

5BP Patient R Action Plan

May-15

Key

V0.6

Final Assurance Visit

Evidence seen & agreed

Evidence produced

NO	Recommendation	Trust Response	Action	Responsible Owner / Committee	Monitoring process and timescale	Evidence to be submitted	RAG	Who submitted to
1	The Trust should provide training and develop guidance to ensure that there is a greater focus on, and value attached to, the building of a therapeutic relationship between inpatient and community staff and their service users.	As part of the Trusts high level objectives a Culture of Care Strategy has been developed based on the 6C's, ensuring that care and compassion are at the forefront of all service delivery. This is now in its second year of implementation.	A core number of Inpatient, HTT, Assessment and Recovery Team generalist practitioners have been trained in an attachment focused treatment – Structured Clinical Management by Professor Anthony Bateman and also our own in house Training over 100 staff trained. NOTE: this is an evidenced based treatment approach for personality disorder – 5BP was the first Trust in the country to have this training. The Trust has also trained over 700 staff in the department of health's Personality Disorder Training KUF, developed an e-learning training as well as bespoke training for personality disorder – see attached paper to support this.	Psychology Lead for PD	31-Jan	Culture of Care Strategy KUF paper SU experience survey Recovery packs & Recovery College Information		Knowsley CCG
			On the assurance visits Dr Mark Sampson (PD Specialist) will meet with the CCG to describe the evaluation process for the PD Pathway	Matron	30-Apr	Assurance Visit		Visit complete awaiting report
			On the assurance visit the CCG will see the morning MDT meeting on the ward. This is attended on a weekly basis by Home Treatment and Huyton Core & Cluster	Matron	30-Apr	Assurance Visit		Visit complete awaiting report
			On the assurance visit the CCG will see how teams communicate across the Acute Care Pathway	Matron	30-Apr	Assurance Visit		Visit complete awaiting report
		Issues relating to the building of therapeutic relationships are addressed through management and clinical supervision.	The Supervision policy is currently undergoing review. The new policy will ensure these issues are picked up as part of the supervision conversation.	Head of Clinical Quality	31-Jan	Revised policy		Knowsley CCG
			An audit against compliance with the policy will be undertaken	Head of Clinical Quality	31-Jan	Audit		Knowsley CCG
2	The Trust should ensure that any reports from service users about violent behaviour are fully logged in the patient's notes and reported in detail to the police.	As part of comprehensive assessment any history relating to violence and record would be recorded.	Awareness raising will take place through a variety of communications in relation to Lessons Learned from this investigation. This will include how staff report to the police when violent acts are disclosed during assessments or interventions .	Head of Clinical Quality	Quality & Safety Meeting	Notes from the events Minutes from the Q&S Meeting		Knowsley CCG

		The Safeguarding Team will ensure that staff are aware of their obligations relating to reporting and monitoring of violence within families	Safeguarding Policies and Procedures are available Safeguarding flowchart is insitu in all clinical areas There are nominated safeguarding leads in each team			Safeguarding training data Safeguarding policy and procedures		Knowsley CCG
			On the assurance visit the CCG will see the safeguarding flowcharts and be able to identify the nominated leads	Matron	30-Apr	Assurance visit		Visit complete awaitng report
			On the assurance visit the CCG will be able to examine care records to see assessments relating to violence and aggression	Matron	30-Apr	Assurance visit		Visit complete awaitng report
3	The Trust should ensure that, when there are reports of actual or possible violence, a detailed history is compiled and an appropriate risk assessment tool is used.	Detailed history taking would take into account acts of violence and aggression. The Trust has a risk assessment form which does ask questions relating to violence and aggression.	On the assurance visit the CCG will be able to examine care records to see assessments relating to violence and aggression	Matron	30-Apr	Assurance visit Admission checklist Discharge checklist Acceptable Behaviour Agreement		Visit complete awaitng report
4	The Trust should ensure that their risk management strategy outlines a clear link between risk assessment, care planning, care co-ordination and the application of CPA.	The Trust has a Clinical Risk Assessment Policy which is aligned to the CPA policy and procedures. A CPA audit has just been conducted which shows the Trust has a high level of compliance relating to risk assessment and management.	The Trust will also review and refine the whole risk strategy to ensure all strands of risk are incorporated The Trust will continue to monitor this via the CPA audit process.	Head of Clinical Quality Strategic Care Delivery Framework Meeting	28-Feb 31-Jan	Risk Assessment Policy Sign-up to safety documentation CPA Audit		Knowsley CCG Knowsley CCG
5	The Trust should ensure that any requests for a specific medication are fully explored with the service user and the possibility of dependency is considered and discussed.	Requests for drugs with abuse potential with no evidence of current use would be discussed by the MDT to consider their prescription. Specialist pharmacists provide clinical services to all inpatient wards and are used by the MDT and medical teams to help with medication issues that have been identified.	This will be included as part of the Lessons Learned awareness raising communications. On the assurance visit the CCG will be able to see the pharmacist at the ward morning meeting and discuss pharmacy input in the teams	Chief Pharmacist Matron	 30-Apr	Notes from lessons learned events Screen shots from intranet Medicines Management Policy Assurance visit		Knowsley CCG Visit complete awaitng report

6	The Trust should ensure that, when a service user appears to have a particularly peripatetic lifestyle, contact should be made with appropriate mental health trusts to share information.	When service users are known to other MH Trusts it is part of the protocol to share communications and risks. In this instance although he switched between Trusts it does not appear that he was open to services in Merseycare and the Trust at the same time	This will be included as part of the Lessons Learned awareness raising communications. Recording via NHS number on RiO to ensure that shared patient information is accurate even if a patient changes their name	Head of Clinical Quality	31-Jan	Notes from lessons learned event		Knowsley CCG
			Head of Clinical Quality has met with AD of Nursing from Mersey Care to discuss shared action	Head of Clinical Quality/Matron	28-Feb	Shared lists of services with Mersey Care		Knowsley CCG
7	The Trust should ensure that, when there has been reported violence to a family member, there should be robust efforts to establish some contact with the victim and other family members to discuss the issue, and to consider an assessment of carers' needs, in line with Trust 1's CPA policy.	The Trust has completed a CPA audit which shows compliance with Carers Assessment	The Trust will continue to monitor this via the CPA audit process. This will be included as part of the Lessons Learned awareness raising communications.	Head of Safeguarding	Strategic Care Delivery Framework Meeting (SCDF) Audit - annual	Audit Notes from lessons learned events		Knowsley CCG
8	The Trust should review progress made against the internal review's recommendation for mental health staff to assist service users to register with a local GP, and establish systems for effective communication between GPs and mental health services regarding patient care.	This was a recommendation in the Trusts Internal Report. Local actions were taken immediately to remedy this. The Trusts Procedure (linked to the CPA Policy) on Integrated Care Pathways clearly outlines the responsibility of the Care Coordinator in assisting service users to obtain a GP	Audit against this part of the procedure	Head of Care Delivery	CPA Audit - annual ongoing	CPA Audit		Knowsley CCG
			On the assurance visit the CCG will be able to discuss this procedure with ward staff to ensure it happens in practice	Matron	30-Apr	Assurance Visit		Visit complete awaiting report
9	The Trust should revise their drug detection policy to include procedures around the use of drug detection dogs, and specifically a process for making service users aware that drug detection dogs may visit acute inpatient areas.	There has been awareness raising in respect of drug detection dogs. Posters are prominently displayed on inpatients units and patients are informed as part of the admission process	The Searching Patients Policy will be reviewed to incorporate the use of drug detection dogs	Matron Secure Services	28-Feb	Draft policy shared		Knowsley CCG
			On the assurance visit the CCG will see the posters and information displayed	Matron	30-Apr	Assurance Visit		Visit complete awaiting report

10	The Trust should test for effectiveness their implementation of the internal investigation's recommendations, and ensure that the new model of care is operating fully and effectively by conducting some qualitative audits of the whole care pathway including for someone with personality disorder.	The Trusts care pathway for personality disorder is fully NICE compliant and offers one of the most comprehensive personality disorder care pathways in the country – we offer 3 types of personality disorder treatment programmes that focus on establishing strong links between Inpatient and community care.	On the assurance visit the CCG will meet the psychology lead for PD to discuss the pathway and service user evaluations	Psychology Lead for PD	30-Apr	Assurance Visit		Visit complete awaiting report
				Head of Clinical Quality	28-Feb	PD Pathway KUF paper Evaluations from training		Knowsley CCG