





Service	Action	Evidence	Lead/Ownership	Target Date
Add provider or commissioner and recommendation number	Additional action required	Evidence and assurance	Roles no names	Realistic target date
Recommendation 1 - Diagnosis				
17.6. It was discussed at the lessons for learning workshop that a more "stringent formulation" process was required particularly for service users with a combined psychosis, substance misuse and forensic history. The issue was raised about the thresholds for forensic assessment to support diagnostic and risk formulation. The issue was also raised as to whether the Trust should lower the threshold for forensic assessment referral.	The Trust will review current liaison arrangements between locality directorates and Forensic Services, looking in particular at referral thresholds. The review will ensure that in future formulation processes will be sensitive enough to take into account complex presentations utilising the skills and services to be found within the organisation. This process will be completed within six months of the publication of this report.	Clinical Directors for Tower Hamlets and Forensics have met to assess current processes / communication and referral thresholds.  They will publish revised guidelines where necessary to refresh clinicians and services on knowledge of how to access Forensic service support and advice.	Clinical Director, Tower Hamlets Adults Mental Health Services, East London NHS Foundation Trust and Head of Forensics, East London NHS Foundation Trust (ELFT)	31 December 2016







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Recommendation 2 – medication and treatment				
17.7. The role of housing should be clarified with regard to medication management. Some hostels in the area are required to support medication compliance and mental health monitoring – others are not. At the lessons for learning workshop we heard from the Tower Hamlets Clinical Commissioning Group that guidelines are now in place.	1. Ensure guidelines / protocols are in place so that hostels are clear on their arrangements for reporting back to East London Foundation Trust and GPs. This is to include support with alerting where there are compliance issues with medication plus information sharing generally (especially including mental health issues)	The local authority has developed robust medication management and reporting procedures - Tower Hamlets Provider Medication Standards and Guidelines - within the mental health supported housing sector, most recently updated in August 2016. They have been agreed by and signed up to by all members of the Mental Health Professionals Forum. It is proposed that these will be consulted on and rolled out to the hostel sector in January 2017 and supplemented with	Vulnerable Adults Commissioning Team, London Borough of Tower Hamlets	February 2017







 independent investigation		! <u>!</u>	
	training via CMHT.		
2. Ensure there is a process for communicating changes in medication / care plans with hostel staff	Care Plans reflect any changes and are shared with hostel staff (if patient has consented). As per the new RESET Operational Policy.	Consultant Psychiatrist, Specialist Addiction Service, ELFT	Complete







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Recommendation 3 - Referral system				
<ul> <li>17.8. The referral system has been improved since the transfer from paper to electronic records. Referrals are now highlighted and audited. The system is fully integrated at the present time.</li> <li>The recommendation is that the current arrangements be audited within six months of the publication of the report</li> </ul>	ELFT to review the referral system. Audit of 50 case notes to be conducted.  There is also a monthly audit of CPA records		Clinical Director and Borough Director for Adult Mental Health Service Tower Hamlets, ELFT	31 March 2017







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Recommendation 4 – Risk assessment  17.9. Risk assessment processes need to be tightened for those service users with a stable/medium/long-term relationship with the Trust. Reviews should be conducted and an assurance provided that historic risk information is brought together and that ongoing/new risk information is considered as part of a dynamic risk assessment process as routine. Risk assessments should be multidisciplinary/agency and perhaps the CPA meeting should be used to assess risk in a more defined manner.	In-line risk assessment forms to be audited for the inclusion of historical and multi-agency information	The Trust now uses an electronic in-line risk assessment form for inpatient admission and new CPA meetings which includes historic risk factors. These where introduced June 2016  50 cases will be reviewed/ audited in December 2016. Findings to be presented to the Directorate Management Team meeting.  Actions/recommendations will be completed by the service with feedback to the Directorate Management Team meeting.	Clinical Director and Borough Director for Adult Mental Health Service Tower Hamlets, ELFT	31 January 2017







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Recommendation 5 – CPA  17.10. A number of service users of the CMHTs have named Care Coordinators but are not subject to CPA. At present, no core CPA documentation such as Risk Assessment, Care Plan and Crisis and Contingency Plan need be maintained. It is noted that in the case of the incident in question, hostel staff had little information on the key professionals involved in Mr. X's care	A sample of records of non CPA patients will be audited to see if information about them was appropriately shared with the hostel staff. A sample case of 50 cases will be reviewed.	All community staff have been written to by the Senior operation lead for community services informing them that all patients not on CPA must have a crisis and contingency plan. This will be picked up via case notes supervision for care coordinators.  There will be an audit of 50	Community Service Manager, ELFT and Service Manager, Vulnerable Adults Commissioning Team, LBTH  Borough Director, Tower	Complete  31 March
or how to respond in the event of a crisis.		cases notes. Actions/ recommendations will be completed by the service with feedback to the Directorate Management Team meeting.  Training has been provided to hostel staff and a joined up	Hamlets Adult Mental Health Services, ELFT  Borough Director, Tower	2017







# Independent Investigation - Action Plan Mr X and Mr Y approach to risk sharing and Hamlets Adult Mental Complete management in place. Health Services, ELFT Service users not on CPA will have, as a minimum, a crisis and contingency plan.







quired Evidence and assurance	Roles no names	Realistic target date
ncy arranged. held to	Associate Medical Director, East London NHS Foundation Trust	31 March 2017
aware of  Joint working agreement circulated across all CMHT	Deputy Borough Director Tower Hamlets Adult Mental Health Services, ELFT	Complete
created by ELFT and Hostel providers and Training was delivered to hostel providers	and Vulnerable Adults Commissioning Manager LBTH	Complete
get help was created by ELFT and circulated to hostel providers		
 	Lessons ency e held to aware of  Joint working agreement circulated across all CMHT  A joint working agreement wa created by ELFT and Hostel providers and Training was delivered to hostel providers by ELFT. Flow chart for how to get help was created by ELFT and circulated to hostel	Lessons arranged.  Trust-wide seminar to be arranged.  Joint working agreement circulated across all CMHT  A joint working agreement was created by ELFT and Hostel providers and Training was delivered to hostel providers by ELFT. Flow chart for how to get help was created by ELFT and circulated to hostel providers  Associate Medical Director, East London NHS Foundation Trust  Deputy Borough Director Tower Hamlets Adult Mental Health Services, ELFT  Deputy Borough Director and Vulnerable Adults Commissioning Manager LBTH







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		dual diagnosis worker.		
		Each Hostel also has a link	Health Services, ELFT	
hostel/housing provider.		January 2017	Hamlets Adult Mental	
CMHT link worker for each		workers is to commence in	Borough Director, Tower	
Work on-going to consider a named		At trial of CMHT/Hostel link	LBTH	Complete
Training to the Daniel Gilbert Hostel.		(19 <sup>th</sup> November 2015)	Commissioning Manager	
		authority on mental health	and Vulnerable Adults	
contacts).		hostel providers in local	Deputy Borough Director	







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Recommendation 5 – CPA (cont.)				
17.12. A key point was identified as being the role of the Care Coordinator in pulling all of the agencies and services together in the best interests of the service user, and once designated this role had key responsibilities over and above those other practitioners in other services to ensure the on-going flow of communication. Care Coordinators need to be more mindful of their role. The communication between CMHTs and GPs is now part of the CQUIN process		The Trust has developed and commenced a Care Coordinator training programme which, in time, all Care Coordinators will attend. The curriculum for that programme has been informed by the Mr X and Mr Y Investigation includes their responsibilities to ensure an ongoing communication between the agencies involved in the service users care.  The communication between Community Mental Health Teams and GPs is now part of the CQUIN process with a requirement that GPs are written to within 48 hours whenever there is a contact	Director of Operations ELFT	Complete







Independent Investigation - Action Plan Mr X and Mr Y				
with the secondary mental				
	health serv	/ice		







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Recommendation 6 -				
Interagency/service communication				
17.13. The lessons for learning workshop discussed at length the issues around information sharing between agencies, particularly between health and hostels. The group decided that a core set of information should be agreed between the agencies and that this should form a recommendation. The	1. Action 1 - quarterly workshop to be arranged to foster relationships. First workshop to be used to make decisions regarding next steps.	The agreed protocol between ELFT Mental Health services and the Borough's homeless hostels addresses these issues about core information, consent and confidentiality.	Service Manager for Adult Mental Health, LBTH and Community Services Manager for ELFT.	31 December 2016
recommendation should address issues pertaining to patient confidentiality, consent, and safety thresholds etc. It was also agreed that an information	2. Senior CMHT managers have met with staff from Hostel and discussed arrangement of mutual support and advice.	This document will be reviewed annually at the Hostels Forum.		
sharing protocol should also be developed in order to promote safety and joined up working. A profile should				
be developed that outlines what information is expected from each professional (across all services and				







agencies) involved with a service user.		
This profile should identify who needs to		
know what and when. A core dataset		
should be developed (e.g. risk and crisis		
plans, relapse information, change of		
workers, medication etc.). The core data		
set should apply to ALL service users		
whether they are subject to CPA/CMHT		
services or not.		







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Recommendation 6 - Interagency/service communication (cont.)				
17.14. The workshop acknowledged that there were often chaotic service users who did not meet CMHT thresholds and that satellite clinics should be provided for advice to hostels and primary care. It was recognised that different types of service users would require specific information sharing criteria to be identified.	This has been addressed by the Drugs and alcohol action Team and CCG with the new provision of addiction services in Tower Hamlets	The Drug and Alcohol services in the Borough have been recommissioned into 3 services RESET (provided by East London NHS Foundation Trust), RESET Recovery (provided by Lifeline) and Outreach (Provided by Providence Row Charity)  The newly commissioned services provide specific input to hostel population in adherence with the Hostels/Drug and Alcohol services protocol	Lifeline, Providence Row and East London NHS Foundation Trust	Complete







Recommendation 7 – Safeguarding thresholds in hostels  17.15. Given the large number of residents at each hostel, many of whom present with significant and complex risk and varying states of vulnerability and anti-social behaviour, there is a need to develop an overarching strategy to monitor and as necessary respond to escalation of behaviour of concern related to relationships between hostel users	ELFT to create an escalation process for hostels in LBTH	The local authority has developed a procedure - the Pathway into and out of the adult supported hostel sector including the use of Bed & Breakfast. The process has been supplemented by the development of an escalation process that is responsive to	Vulnerable Adults Commissioning Team, LBTH	31 December 2016
present with significant and complex risk and varying states of vulnerability and anti-social behaviour, there is a need to develop an overarching strategy to monitor and as necessary respond to escalation of behaviour of concern related to relationships between hostel		developed a procedure - the Pathway into and out of the adult supported hostel sector including the use of Bed & Breakfast. The process has been supplemented by the development of an escalation	Commissioning Team,	







Independent Investigation - Action Plan Mr X and Mr Y    skills such as working with				
		skills such as working with		
		Personality Disorder and		
		managing violence.		







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Recommendation 7 – Safeguarding thresholds in hostels (cont.)				
17.15.(cont)				
For Health (commissioners and providers), Housing and the Local Authority to develop an Escalation Procedure in order to be able to respond to concerning behaviour from one hostel resident to another by use of planning and communication across teams and agencies. The procedure will also take into account the need for the 'global' situation within a hostel to be ascertained on a regular basis in order to assess the collective risk presented by having large numbers of people with chaotic lifestyles living together in one place. This process will be completed	ELFT to create an escalation process for hostels in LBTH	See above – this has been created and is complemented and underpinned by a multidisciplinary approach to working. All relevant agencies including the respective Care Coordinators would be invited to attend if there is a concern about tension / hostility within the hostel environment or particular area or cluster.  ELFT Representatives regularly attend the Accommodation Pathways Group. This allows ELFT to	Borough Director, Tower Hamlets Adult Mental Health Services, East London NHS Foundation Trust  And Clinical Director, Tower Hamlets Adult Mental Health Service	Complete







within six months of the publication of	offer a similar level of attention	
this report.	to hostels by facilitating regular	
	communication and a	
	systematic review of services	
	in their appropriate	
	environment.	







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Recommendation 8 – Accommodation pathways working				
17.16. Of the various hostels based in Tower Hamlets, the client group has changed over the years and now includes a greater number of service users under the care of secondary mental health services. Placements are accessed via the homeless services HOST Team but at the time of the incident there was no consistent system for placement review to explore potential move-on nor a forum to discuss interface issues and referrals pathways.	Local Authority to draft policy and procedure to address and reaffirm the pathways working between hostels and HOST.	The local authority has developed a procedure document - Pathway into and out of the adult supported hostel sector including the use of B & B. As identified above.  In partnership with Hostel providers and Supporting People ELFT has agreed a Joint Working Protocol with standards to which ELFT and the hostel providers would work. A tool was designed to assist Hostel staff if worried about someone, whether or not they were known to the	LBTH Housing Department Safeguarding Team	31 January 2017







Independent Investigation - Action Plan Mr X and Mr Y				
	service. Training session have			
	been delivered on how to use			
	the tool at Hostel Forums.			
	Independent Inves	service. Training session have been delivered on how to use		







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Recommendation 9: Dual Diagnosis service				
17.17. Good practice has been highlighted regarding the relationship between the CMHT and Dual Diagnosis Service, the Specialist Addiction Unit, the hostel and Health E1 Medical Centre. However, issues have been raised regarding the operation of the Dual Diagnosis Service in terms of its relationship with partner addiction services and referral pathways.	The CCG, together with the DAAT, will facilitate a workshop during the mobilisation phase of the new treatment service to review and where necessary strengthen the pathways for those with dual diagnosis mental health and substance misuse issues.	Pathways for those with dual diagnosis are an important element of the new model for treatment currently being rolled out across the Borough, and with the new service also being provided by ELFT that is an opportunity to ensure that the relationships and pathways are fully aligned. The workshop will take place in January of 2017.	Lead Mental Health Commissioner, Tower Hamlets CCG	28 February 2017







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Recommendation 10: Ethnicity, diversity and cultural competence				
17.18. Mr X was from an East African cultural background and as such there was an opportunity to explore issues surrounding stigma, denial of symptoms and masking of symptoms which can be common features in people of this background, however this was not explored.	To publicise cultural awareness workshops.  Promote cultural awareness groups that are already working in the Borough such as Bangladeshi and Somali associations.	The Trust endeavours to support the cultural competency of its staff in various ways including the provision of cultural competency training, the inclusion of cultural competency and sensitivity in mainstream training such as the Care Co-ordinator Training Programme, and through the provision of the ethnic minority groups which exist in the Borough.	Borough Director, Tower Hamlets Adult Mental Health Services, ELFT	31 March 2017







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Recommendation 11 - Internal Investigation findings sharing				
17.19. The Trust internal investigation and joint commissioner process did not communicate its findings to all of the stakeholders concerned. This prevented learning from taking place and the timely development of safer practice. This work should be embedded within six months of the publication of this report.	In future all multi-agency reports will be shared across all of the relevant agencies via a formal briefing process.	The Trust will share with other partners SI Review reports and invite/engage partners in learning lessons events. Where appropriate partner agencies will be invited to contribute to the review process.	Chief Medical Officer ELFT	31 January 2017