

Rec No.	Organisation	Recommendation	Actions to achieve recommendation	Implementation Lead	Implementation by when	Evidence of Completion	Monitoring & evaluation arrangements
3	C&I	The Trust must ensure that its staff and clinicians comply with the requirements relating to "leave" as set out in section 17 Mental Health Act 1983. The Trust shall provide an assurance that the training afforded to staff will ensure that the Trust complies with all requirements relating to the prescribing of Section 17 leave.	<ol style="list-style-type: none"> To ensure that the Mental Health Act Training that runs fortnightly uses this homicide as a clinical example to address the prescribing of mental health leave and the importance of good documentation around this. To ensure that all staff have attended Mental Health Act Training at least once every 3 years as per the minimum requirement. The Recommendations from this report are to be taken to the Acute Learning Lessons Workshop and the bulletin produced is circulated to all divisions within Trust and reviewed at team meetings. 	Mental Health Law Manager Risk and Patient Safety Manager	March 2018	<p>1-2. Section 17 leave is part of the MHA training and A core skill for the Multi multidisciplinary Team (MDT). The training specifically addresses questions around nurses' risk assessments before allowing patient to take their section 17 leave, reviewing how section 17 leave is used and feeding back to THE MDT so it can be reviewed and modified; including nurses' powers to stop section 17 leave when there are risk concerns. Nurses can challenge and review leave at any time where they identify any issues and changes in presentation. Training compliance is monitored and there is an action plan in place to increase current training compliance to 85% by March 2018.</p> <p>Section 17 leave is audited as part of the MHA audit programme. MHA compliance and training is overseen by the Mental Health Law Committee which is chaired by a Non Executive Director and is a sub committee of the Board. The Committee also receives reports from the Mental Health Act Inspections carried out on wards.</p> <p>3. A serious incident report was completed at the time and an action plan created. The new recommendations and actions in this report will be shared as part of lessons learned. The learning from this report will be imparted to staff through lesson learned workshops (and attendance recorded).</p>	<p>Mental Health Law Committee</p> <p>Annual MHA report which is shared with commissioners at the Clinical Quality Review Group</p> <p>Lessons learned workshops list of attendees</p> <p>MHA audit reports and associated actions plans from CQC MHA inspections .</p>
4	C&I	In order to comply with its obligation to inform the CQC of unauthorised absences relating to patients who are the subject of detention under the terms of the Mental Health Act 1983, the Independent Investigation Team recommends that the Trust undertake an audit to ensure that its internal recording requirements are adhered to in relation to those patients who are the subject of detention under the terms of the Mental Health Act 1983 , in order to ensure that the following information is being recorded in patient's records; <ul style="list-style-type: none"> Outcome of leave is being recorded; and Details surrounding any absconsions during leave are recorded; and Absconsions are then reviewed from a clinical perspective. 	<ol style="list-style-type: none"> Absent without leave (AWOL) and Missing persons incidents are recorded on Datix. Ensure clear policies for managing records and record keeping. The Trust has put in place and information governance team to support subject access requests and information governance processes 	Head of Governance Associate Director of Information Technology and Communications	<p>Completed May 2014</p> <p>January 2018</p> <p>Completed August 2015</p>	<p>1. Absent without leave (AWOL) and Missing persons incidents are recorded on Datix and uploaded to National Reporting and Learning System and this data is shared with CQC. AWOL figures are reported monthly to the AWOL group and recorded on the Quality and Safety report to the Board. The figures on AWOL are also shared with MH benchmarking, the Board and commissioners. NURLS provide 6 monthly benchmarking reports.</p> <p>2. The Trust has a clear records management policy that was updated to aligned with care notes. The policy is currently being updated to include the standards used in the Trust clinical audit tool. The Trust wide clinical audit of records cycle began in October 2017 and will be completed in January 2018. Initial results for one division were shared with the Board in November 2017 and regular updates will be provided throughout the audit cycle. To support best practice in record keeping the Trust has stipulated in the Clinical Supervision Policy, 2017, supervision must take place at least 10 times a year. 2 of the key domains include, clinical scenario & risk management, care planning. Clinical record keeping must be included within this and monitored as part of supervision. An audit tool has been developed to monitor this. The policy will be launched in December 2017.</p> <p>3. There is now an information governance team in place who co-ordinate requests for records to ensure this is done promptly and all the relevant information is included. There is a legal support services lead in place to ensure this is done correctly. Subject access requests are monitored and reported to the Information Governance Committee. The figures show that the Trust has significantly improved in meeting timely requests for records. There is guidance for staff on IG and training with a good level of compliance. The Trust also participate in the annual information governance toolkit assessment. The current 2017 score is 96% satisfactory</p> <p>The Trust will undertake an audit of AWOL in January 2018 to provide assurance that the current processes are working.</p>	<p>Absent without leave (AWOL) and Missing persons Group.</p> <p>Quality Governance Group.</p> <p>Mental Health benchmark report.</p> <p>In addition to this CCG assurance visits are planned to services to monitor how these processes are working in practice.</p> <p>Information Governance Group.</p>