

**Independent Investigation Mr F
Action Plan**

Recommendations	Assurances	Action Required	Timescale	Evidence on Completion	Timescale for Completion
1a. The Trust should conduct Annual Audits of NICE Quality Standards	<p>NICE Quality standards are included as a priority in the Trust's annual audit programme, audit results are reported to the Trust audit committee which is a subgroup of Trust Board.</p> <p>Quarterly reports on NICE guidance and quality standards are reported to the Executive Quality Committee and to Commissioner's via the quality contract process.</p> <p>Key NICE guidance has been built into the Trust's Quality SEEL</p>	Completed	March 2014	The Trust will continue to conduct Audits of NICE Quality Standards as part of Trust's annual audit programme.	Completed
1b. The board should be provided with evidence that all community mental health teams have access to specialist addiction practitioners and know how to refer to them.	The Trust has a Dual Diagnosis Partnership Arrangement in place for all Mental Health services.	<p>Community Mental Health Services will strengthen the links between the Community Mental Health Teams and in Substance Misuse services through ownership of local pathways and protocols by team managers.</p> <p>The Trust Dual Diagnosis Partnership Arrangement will be updated.</p> <p>Team level Audit of practice will be introduced</p>	<p>June 2014</p> <p>June 2014</p> <p>July 2014</p>	The Board will receive assurance that all community mental health teams have access to specialist addiction practitioners and know how to refer to them.	August 2014
1c. The Trust should conduct annual audits to review	The Trust undertakes a thematic incident review relating to care pathways which is reported to	The Trust serious Incident report to be shared with NHS England.	March 2014	The Trust will continue to undertake an analysis of the themes arising from care	July 2014

<p>patient pathways from referral to discharge.</p>	<p>Board as part of the Board Serious Incident Report.</p> <p>The Trust has reviewed care pathways within Adult MH services through its 'Mind the Gap' project aimed at improving the service user experience and amended certain aspects of practice as a result of this project.</p>	<p>The Trust will share with commissioners the outcomes of the 'Mind the Gap project in Q4 of 2013/14 and agree actions from this report.</p>	<p>June 2014</p>	<p>pathways and report through to Board and commissioners.</p> <p>The Trust will implement the actions agreed from the 'Mind the Gap' project.</p>	
<p>2a. Within the next six months the Trust reviews the process by which they decide whether someone should have a carers' assessment. This should be reviewed alongside adult mental health services to ensure that the process is systematic.</p>	<p>The Trust has a Mental Health carer's strategy. This strategy stipulates the importance of carers receiving carers' assessments.</p>	<p>Guidance to be produced for all Mental Health Services stipulating specifically when a carer's assessment should be provided. This guidance will be across all age ranges.</p> <p>Implementation plan completed</p>	<p>July 2014</p> <p>August 2014</p>	<p>An audit of compliance has been produced and the results and actions will have been reported through to Board, NHS England and Lead Mental Health Commissioner.</p>	<p>August 2015</p>
<p>2b. A clinical audit of compliance with the set standards should be conducted and reported to the board as part of the trust's clinical audit plan.</p>	<p>A Trust Carers Audit was completed in 2012 and reported to the Trust Audit Committee</p>	<p>An audit of compliance will be undertaken and results shared with the Trust Board, commissioners and NHS England</p>	<p>March 2015</p>	<p>An audit of compliance has been produced and the results and actions will have been reported through to Board, NHS England and Lead Mental Health Commissioner.</p>	<p>March 2015</p>
<p>3a. The Trust should report on the implementation of</p>	<p>The Trust has invested in the development of a new risk assessment and management</p>	<p>The Trust will report to Board on the roll out of the new risk assessment process and training</p>	<p>Quarterly reports from</p>	<p>The new electronic risk assessment and management module will</p>	<p>June 2016</p>

<p><i>their new risk assessment process and on the roll out of training to the board.</i></p>	<p>module. The roll out will be supported by training for Mental Health clinical staff.</p>	<p>delivered to frontline staff. The Trust will report Progress to the Mental Health Quality Performance meeting.</p>	<p>June 2014</p>	<p>have been rolled out across all Mental Health services. Staff will have received training in risk assessment and risk management and the use of the tool.</p>	
<p><i>3b. The Trust plans to commission an external review of the quality of the new process. These findings should be reported to the board for any necessary action.</i></p>		<p>The Trust will commission an external review of the quality of the new process following full implementation.</p>	<p>June 2016</p>	<p>An external review of the process will be reported through to Board</p>	<p>June 2016</p>