

ACTION PLAN PRODUCED IN RESPONSE TO THE INDEPENDENT REVIEW INTO THE CARE AND TREATMENT OF PATIENT R
STEIS No: 2011/7259
Incident Date: 17 April 2011

| RECOMMENDATION | Actions Required | Progress | Responsibility | Timescale | Outcomes |
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| 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. | <ul style="list-style-type: none"> Quality Practice Alert to be shared with medical staff emphasizing the need to explore addiction issues | | Steve Morgan, Director of Patient Safety | May 2015 | That prescribing clinicians will have an increased awareness of dependency issues that may be otherwise masked. |
| | <ul style="list-style-type: none"> Drug and Therapeutic Committee asked to consider including this issue in its training programmes | | Lee Knowles, Chief Pharmacist | June 2015 | The training programmes are amended to reflect the need for staff to explore dependency issues. |
| | <ul style="list-style-type: none"> Risk assessment guidance to be checked/amended to ensure it requires staff to consider dependency issues and the affect on their mental health and safety | | Jane Boland, Project Lead | June 2015 | Risk processes will include dependency on illicit substances and alcohol and where necessary be incorporated into risk management plan |
| | <ul style="list-style-type: none"> To be included in the new | | Steve Morgan, | May 2015 | The training programmes |

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| | <p>Dual Diagnosis Training sessions to be delivered directly into Clinical Areas by Dual Diagnosis Specialist Practitioners .</p> <ul style="list-style-type: none"> Addictions services will be actively involved in considering their knowledge and accountability re patients with a mental illness and a dual diagnosis and how they relate with adult mental health services | | <p>Director of Patient Safety</p> <p>Dr Al-abasi, Clinical Lead</p> | <p>September 2015</p> | <p>are amended to reflect the need for staff to explore dependency issues.</p> <p>Addictions services have clear guidance that directs how staff relate to adult services when they are working with a patient with a dual diagnosis</p> |
| <p>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.</p> | <ul style="list-style-type: none"> Risk assessment guidance to be checked/amended to ensure it considers the need for staff to liaise with other agencies to gain or share information about involvement in care A quality Practice Alert will be sent to all Clinical Teams emphasizing the importance of sharing information with neighbouring organisations where appropriate. | <ul style="list-style-type: none"> Updates/amendments to be provided when required. | <p>Jane Boland, Project Lead</p> <p>Director of Patient Safety</p> | <p>June 2015</p> <p>June 2015</p> | <p>Risk assessment guidance will include direction for staff regarding the importance of liaising with other services</p> <p>Staff are aware of the need to consider the stability of a persons living accommodation and potential involvement of other services</p> |

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| | <ul style="list-style-type: none"> Quality Practice Alerts will be audited on a bi-annual basis to ensure that they are an effective way of disseminating information and changing practice. This issue will be used as one of the QPAs that are audited as part of a percentage process | | Director of Patient Safety | October 2015 | The efficacy of using Quality Practice Alerts will be reviewed and amendments made where coverage or effectiveness are challenged |

Signed: S Morgan

Date: 08/05/15