

HIW FEEDBACK ACTION PLAN Sept 2013

Problem Identified	Action Taken	Timescale	By Whom	Resolved.....Yes/No
1 There was insufficient staffing by night	Staffing numbers have been reviewed, extra member of staff put on duty to bring the numbers to 6 Constant reviews of patients who are on 1-1	Immediate	Hospital Manager Senior Nurse Agreed by Stream Manager	This has been resolved and we are currently recruiting into vacant posts and also looking to increase our bank staffing numbers
2 Night Staff doing non nursing duties especially at night e.g housekeeping duties	We employ two housekeepers to keep the building clean and recently their hours have been increased. There are duties which the staff are required to do at night but this has now been reviewed and many of these tasks have been removed, however staff are required to carry out essential tasks for the benefit of infection control and patient comfort	Immediate	Hospital Manager Senior Nurse Senior Nurse Support Services Manager	We are monitoring this and seeking to ensure that we get a balance for the benefit of patients, staff and the service
3 A Storage Room on the first floor with a fire exit door was cluttered with broken furniture, toiletries and some patient's	This room has been cleared of all clutter and this has been removed in a skip There is full access to the fire escape. Staff have been	Immediate	Hospital Manager	Completed

<p>belongings. This must be cleared to allow access to the fire escape and all patients belongings needs to be clearly labelled so that staff know who owns them.</p>	<p>informed not to use this room as a storage area. All patient belongings in storage have been labelled.</p>			
<p>4 Environmental damage to Windows and Doors by Patients. All damaged areas to be repaired.</p>	<p>This has now all been repaired and a specialist glazier has been to repair all the windows that were damaged Damaged doors have been repaired</p>	<p>Immediate</p>	<p>Estates Team Outside Glazier Head of Estates Hospital Manager</p>	<p>Completed</p>
<p>5 No Door-bell in the front door No Reception area inside the front door. Area is dark and unwelcoming Lighting needs to be improved</p>	<p>This has now been rectified and there is a front door bell clearly signposted This has been reviewed prior to the visit. Plans are being implemented to create a reception area with good access, improved lighting and manned by staff during 9-5 hours</p>	<p>Immediate End of December 2013</p>	<p>Hospital Manager Stream Manager Estates department</p>	<p>Completed Not complete</p>
<p>6 Sufficient staff to cover patient leaves and activities</p>	<p>There are now four staff in the Day Centre to ensure that all activities happen. We hold a flash meeting every morning to ensure</p>	<p>Agreed staffing levels to be fully implemented by Dec 2013</p>	<p>Hospital Manager Senior Nurse Senior Nurse Occupational Therapist</p>	<p>No patient Leave has been cancelled recently except on the grounds of risk and only after discussion with the MDT</p>

	<p>that all patient leaves happen. The Staff rota is reviewed every Friday to ensure that adequate cover is available for the coming week</p> <p>Staffing recruitment drive. Additional staff employed however some more have left</p> <p>Additional staff recruited for the day centre and so no activities have been cancelled recently</p>			<p>We have recruited additional staff to the Day Centre and they are now up to full compliment. Along with this we have increased staffing in general and so this has enabled all of the planned</p>
<p>7 Where CPI/APT is used each patient must have a specific care plan. There were no specific CPI care plans for patients, A, B and C</p>	<p>All patients at St Davids now have an individual care plan in relation to CPI/APT intervention</p>	<p>Immediate</p>	<p>Senior Nurses Hospital Manager</p>	<p>Completed Attached is a copy of a care plan for the usage of CPI/APT</p>
<p>8 A significant number of assessment forms were not completed for patient B. These included observation of eating and drinking and an assessment of depression. In addition the patients</p>	<p>We apologise in relation to this point but would inform that this patient had been admitted a short while prior to the visit of the inspectors and was still in the 12 week assessment phase. In relation to his belongings he was</p>	<p>Immediate</p>	<p>Hospital Manager Senior Nurses</p>	<p>Completed and on-going</p>

<p>belongings inventory had not been completed. All assessments for patients must be completed in a timely manner.</p>	<p>admitted with only a minimal amount of items. However we note this point and have informed all staff of the need for completion of all documentation especially the patients possessions. Further to this regular audit of files will be carried out to ensure compliance.</p>			
<p>9 The OK health Check was not completed for patients B and C. The OK Health Check must be fully completed for all patients.</p>	<p>A File audit has been completed and all primary nurses have been asked to ensure that all documentation has been completed appropriately. Senior Nurses in supervision are randomly checking files with staff</p>	<p>Immediate</p>	<p>Hospital Manager Senior Nurses Practice Nurse</p>	<p>Completed St Davids employs a practice nurse that holds both RGN/RMN qualifications. She now completes all physical health checks and ensures that where there is a physical health care need that an appropriate care plan is in place. She is also completing the OK Health Check</p>
<p>10 CPI techniques are used when transporting patients. The use of CPI when transporting patients needs to be urgently reviewed and the practice</p>	<p>This has now completely stopped and CPI/APT is only used as a last resort. The Hospital Manager had sent a memo to all staff regarding this and is spending more time on the</p>	<p>Immediate</p>	<p>Senior Nurses Staff Teams Training Department</p>	<p>Full compliance has been achieved with this since the memo has been circulated. A copy of the memo is attached and was made available to HIW on their visit</p>

<p>of transporting patients in a restraint must cease with immediate effect.</p>	<p>floor to ensure that staff are complying. Further to this we are now changing our restraint process to MAPA and all staff are being retrained in this</p>			<p>All staff will be retrained in the usage of de-escalation and MAPA over the coming months.</p>
<p>11 There was only limited evidence of staff receiving supervision. The responsible person must ensure that a robust system of supervision is in place for all staff and is</p>	<p>A new and robust system of supervision has now been put in place. All staff are receiving supervision on an individual, peer and group basis. We are now using the new Snowdrop system for recording and monitoring supervision and this is now on the agenda of Clinical Governance.</p>	<p>End of September 2013</p>	<p>Support Services Manager Hospital Manager Senior Nurses Occupational Therapist</p>	<p>Records will be available for the next HIW Visit Attached also is a copy of the supervision tree and designated supervisors.</p>
<p>12 Staff morale was low and feelings of not being valued was evident. Improvement of staff morale is essential</p>	<p>The manager is now meeting with staff regularly and since his appointment has an increased presence on the floor where staff are able to raise concerns directly. Further to this there have been a number of new inclusive initiatives that enable and empower staff</p>	<p>On-going to be reviewed monthly in Stream Meetings</p>	<p>Stream Manager Operational Lead Hospital Manager Senior Nurses</p>	<p>We are looking to improve this with the appointment of the current managers, new lead nurses, regular staff meetings, more visible contact with managers, increased supervision and inclusion of staff in all areas of service provision</p>

	at all levels to contribute their ideas and opinions.			
13 Staff Training records examined confirmed that CPI Restraint training had not been updated for a significant number of staff. This area requires urgent attention.	CPI/APT has now been discontinued throughout the company. We are now moving over to using MAPA and all staff are being trained in the usage of this. A new training manager is now in post for the company and he has been to see all hospital and residential managers in the company to agree training and urgent requirements. A full staff training, refresher and update programme has been developed.	End of September 2013	Hospital Manager Operational Lead Senior Nurses Training department	Training on-going