



ACTION PLAN FOR:	Healthwatch Inpatient – Hammersmith & Fulham
Assessment Date	4th February 2015
Report & Action Plan Due Date:	28th August 2015


Recommendation to Address Healthwatch Assessment	How This Will Be Actioned Locally	Implemented By Whom	Implemented By When	Evidence of Completion	RAG Rating
<p>Recommendation 1</p> <p>Cleanliness Ensure that regular audits are completed to identify cleaning and repairs that are needed and ensure they are completed in a timely manner.</p>	<p>Current practice: Nursing staff undertake hourly environmentally checks, which includes checking all bathrooms and showers for functionality and cleanliness. Any identified issues are reported to Estates and or domestic staff immediately. Although this reporting mechanism is in place on occasions patients report incidents such as a blocked toilet and are not kept informed as to the actions undertaken to resolve the matter.</p> <p>Further Action: There is a reporting and monitoring system in place, however, for the times individual patients feel such issues have</p>			<p>Template of current environmental checklist</p> <p> Environmental check list.pdf</p>	

	<p>not been attended to promptly or have not been communicated with; the patients need a direct link with the Senior Nurse Manager to raise concerns/suggestions.</p> <p>a. The Senior Nurse Manager will attend one community meeting per ward per month. The purpose of the meeting is to share information and gain feedback from patients including systems they feel are not working effectively.</p> <p>b. There will be a suggestion box placed outside the Senior Nurse Manager office whereby patients can raise concerns/suggestions over 24hrs. The Senior Nurse Manager can respond in timely fashion.</p>	<p>Senior Nurse Manager</p> <p>Senior Nurse Manager</p>	<p>April 2015</p> <p>April 2015</p>	<p>Community Meeting minutes</p> <p>Record of suggestions/concerns and interventions</p>	
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<p>Recommendation 2</p> <p>Patient Engagement</p> <p>Ensure staff are allocated the time and encouraged to communicate positively with patients.</p>	<p>Current Practice: All wards currently have nursing vacancies that are being robustly recruited to. This is a systemic issue for the Trust following the outsourcing of recruitment to CAPITA not achieving an effective service and subsequently being withdrawn. The Trust now has an in-house recruitment team that is proving very effective and is supporting the managers with filling their establishments. Not having the appropriate number of permanent nursing staff puts extra pressure on nurses that are available to patients and their engagement.</p> <p>Further Action:</p> <p>a. Recruit to all nursing vacancies.</p> <p>b. Ensure effective 1:1 clinical supervision for all nursing staff. The Clinical Nurse Specialist is returning from secondment 2.5 days a week to undertake this work.</p>	<p>Senior Nurse Manager</p> <p>Senior Nurse Manager</p>	<p>May 2015</p> <p>April 2015</p>	<p>Nursing establishments are full</p> <p>Reporting assurance that all registered nurses have had training sessions on how to facilitate and record clinical supervision.</p> <p>Monthly reporting template confirming clinical supervision has taken place.</p>	
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	<p>c. Ensure weekly reflective practice on every ward is in place. The Clinical Nurse Specialist is returning from secondment 2.5 days a week to undertake this work.</p> <p>d. The new Head of Nursing role commences 14th April 2015 and action plan for staff development within Local services will be implemented and reviewed by the Nursing Governance structure.</p>	<p>Senior Nurse Manager</p> <p>Head of Nursing</p>	<p>April 2015</p> <p>May 2015</p>	<p>Weekly recording of reflective practice taking place and attendees.</p>	
<p>Recommendation 2 (B)</p> <p>Following the dignity champions review of Avonmore ward in May 2015, a further recommendation is to ensure staff are allocated the time and encouraged to communicate positively with patients.</p>	<p>Protected time is to be implemented on all wards within the MHU. This will be dedicated nursing time with patients and details by Head of Nursing (HON).</p> <p>The Recovery Strategy Project Manager/Trainer is</p>	<p>Inpatient Service Manager</p> <p>Recovery Strategy project</p>	<p>October 2015</p> <p>December 2015</p>	<p>Weekly recording of protected time.</p> <p>Outcomes to be evidenced via care</p>	

<p>Work collaboratively with patients to create a warmer, more homely environment at the unit.</p> <p>Ensure, monitor and report on the involvement of all patients in co-writing their care plans and ensure they are aware of the contents, outcomes and how to access the detail.</p>	<p>implementing The Named Nurse project on Avonmore Ward and this will be rolled out to the remaining wards within the MHU.</p>  <p>Named nurses - building the narrative</p>	<p>Manager/Trainer</p>		<p>plan audit and patient focus groups.</p>	
<p>Recommendation 3</p> <p>Environment</p> <p>Work collaboratively with patient's to create a warmer and more homely environment in the unit.</p>	<p>Current Practice: Avonmore Ward – Co – production with patient volunteers to decorate the ward.</p> <p>Further Action: Each ward will be developing a Co-produced Environment Planning Group with Nursing and OT Staff.</p>	<p>Senior Nurse Manager</p>	<p>December 2015</p>	<p>Minutes for meetings</p>	
<p>Recommendation 4/5</p> <p>Care Plans/Discharge Planning</p>	<p>Current Practice: Each ward has a Welcome Pack, which details important</p>			<p>Welcome Pack to be embedded</p>	

	<p>Pathway</p> <p>c. Implementation of the standards within <i>Healthwatch Special Inquiry Safely Home.</i></p>			 Healthwatch Special Inquiry 2015.pdf	
<p>Recommendation 6</p> <p>Patient Feedback</p> <p>Ensure everyone is asked for their opinion about the services they receive on a regular basis, both through individual and group meetings. Use this feedback on an on-going basis to improve the service.</p>	<p>Current Practice:</p> <p>a. Meridian system is currently being replaced with Patient Opinion.</p> <p>b. The Friends and Family test is fully operational in all clinical areas.</p> <p>c. UIP Closed Patient Forums facilitated monthly in all clinical areas.</p> <p>d. Weekly community meetings in every clinical area.</p> <p>Further Action:</p> <p>a. The Inpatient Service Manager will attend one community meeting per ward per month. The purpose of the meeting is to share information and gain feedback from patients including systems they feel are not working effectively.</p> <p>b. There will be a suggestion box placed outside the</p>	<p>Inpatient Service Manager</p> <p>Inpatient Service Manager</p>	<p>August 2015</p> <p>April 2015</p> <p>April 2015</p>	<p>Friends and Family feedback</p> <p>UIP minutes</p> <p>Community meeting minutes</p> <p>Community meeting minutes</p> <p>Record of suggestions/concerns</p>	

	<p>Inpatient Service Manager office whereby patients can raise concerns/suggestions over 24hrs. The Senior Nurse Manager can respond in timely fashion.</p> <p>c. Suggestion boxes to be implemented on all wards.</p>	Inpatient Service Manager	August 2015	and interventions	
<p>Recommendation 7</p> <p>Meal Times</p> <p>Consider an alternative serving arrangement at meal times to avoid long queuing times.</p>	<p>Current Practice: Monthly user catering forums facilitated by OCS (Catering department)</p> <p>Further Action: UIP to undertake some focused work within this forum (above) to initiate alternative/staggered meal times.</p>	Inpatient Service Manager	May 2015	Minutes of meeting	
<p>Recommendation 8</p> <p>As Healthwatch have been</p>	Hammersmith Healthwatch will	Head of Inpatient	May 2015	Meetings dates will be	

<p>flagging concerns about staff patients/interaction and about care planning for over two years (August 2012). Healthwatch have recommended that they are invited by the Trust to meet with the Senior Managers on a regular basis to review implementation of recommendations.</p>	<p>be invited to meet quarterly with the Hammersmith & Fulham Mental Health Unit Leadership Team, Head of Nursing and Head of Inpatient Care to review progress of the action plan.</p> <p>First meeting took place on 6th August 2015.</p>	<p>Care</p>		<p>set.</p>	
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<p>Action Plan Co-ordinator:</p>	<p>Simba Kaseke</p>		
<p>Action Plan Signed Off & Monitor:</p>	<p>Suzanne McMillan</p>		
<p>Prepared By:</p>	<p>Simba Kaseke</p>	<p>Date:</p>	<p>14.08.15</p>