

Mr Samuel Wallace
Hammersmith & Fulham Healthwatch
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West London Mental Health Trust

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20th March 2015

Dear Mr Wallace

Hammersmith Healthwatch 4th February 2015

I would like to thank you for your feedback following your report detailing the assessment undertaken at the Hammersmith and Fulham Mental Health Unit on the 28th February 2015.

The report makes valuable comparison to the Healthwatch assessment undertaken in 2014 and I am very pleased to see the considerable improvements that have been put place by the unit leadership team.

However, you have raised some significant concerns that require addressing with urgency; I am very pleased to inform you that we implemented a new senior nursing structure within the Trust including a new Executive Director of Nursing and Patient Experience, a new Deputy Director of Nursing and Governance and Local services has very recently appointed a new Head of Nursing. The Local Services Senior Management Team feel very confident that we can now invest dedicated nursing leadership to some of the very important issues that you raise in your recommendations.

We have developed an action plan (please see attached) which we will continue to monitor and we will share our progress with you.

If you have any further queries please do not hesitate in contacting either myself or Suzanne McMillan, Interim Head of Inpatient Care.

Yours sincerely



Ms Sarah Rushton
Director of Local Services

Cc

Paula Murphy, Director, Healthwatch Central West London

Lizzie Wallman, Assistant Director for Quality & Patient Safety, CWHHE Clinical Commissioning Groups Collaborative



ACTION PLAN FOR:	Healthwatch Inpatient – Hammersmith & Fulham
Assessment Date	4th February 2015
Report & Action Plan Due Date:	20th March 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 not been attended to promptly or</p>			<p>Template of current environmental checklist</p> <p> Environmental check list.pdf</p>	

	<p>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>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</p>	<p>Senior Nurse Manager</p> <p>Senior Nurse Manager</p> <p>Senior Nurse Manager</p> <p>Head of Nursing</p>	<p>May 2015</p> <p>April 2015</p> <p>April 2015</p> <p>May 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> <p>Weekly recording of reflective practice taking place and attendees.</p> <p>TBC</p>	
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	role commences 14 th April 2015 and action plan for staff development within Local services will be implemented and reviewed by the Nursing Governance structure.				
<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>	Senior Nurse Manager	May 2015	Minutes for meetings	
<p>Recommendation 4/5</p> <p>Care Plans/Discharge Planning</p> <p>Ensure, monitor and report on the involvement of all patients in writing their care plans; and that they are aware of their contents and how to access them.</p> <p>Ensure that discharge planning begins with patients as soon as they are admitted and ensure all patients are aware of what support will be available post discharge.</p>	<p>Current Practice: Each ward has a Welcome Pack, which details important care pathway information for patients and their families. The Welcome Pack was recently designed utilising medical, nursing, OT, pharmacy, social care staff and patient involvement.</p> <p>Further Action: a. The Clinical Nurse Specialist and User Involvement Project (UIP) will be co-facilitating a workshop with staff and patients on the wards; to ensure patients are meaningfully involved in the</p>	Senior Nurse Manager	April 2014	<p>Welcome Pack to be embedded</p> <p>Action plan</p>	

	<p>process, including a review of the current structure of community meetings, co-development of action plans and assurance around patient safety.</p> <p>b. Review of recommendations from the Healthwatch CWL work on the National Special Enquiry on Unsafe Discharge; Mental Health Briefing and incorporation of recommendations within the WLMHT Standards to Improve the Patients Care Pathway</p>	Senior Nurse Manager	May 2015	 <p>191214-Special-Inquiry-Mental-Health-Brie</p>  <p>Inpatient Care Standards.doc</p>	
<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. All Meridian IPADS in clinical areas are fully operational.</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</p>			<p>Meridian Action Plans</p> <p>Friends and Family feedback</p> <p>UIP minutes</p> <p>Community meeting</p>	

	<p>in every clinical area.</p> <p>Further Action:</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>minutes</p> <p>Community meeting minutes</p> <p>Record of suggestions/concerns and interventions</p>	
<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>	<p>Senior Nurse Manager</p>	<p>May 2015</p>	<p>Minutes of meeting</p>	
<p>Recommendation 8</p> <p>As Healthwatch have been flagging concerns about staff patients/interaction and about care planning for over two years</p>	<p>Hammersmith Healthwatch will be invited to meet quarterly with the Hammersmith & Fulham Mental Health Unit Leadership</p>	<p>Head of Inpatient Care</p>	<p>May 2015</p>	<p>Meetings dates will be set.</p>	

(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.	Team, Head of Nursing and Head of Inpatient Care to review progress of the action plan.				
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Action Plan Co-ordinator:	Parminder Sahota				
Action Plan Signed Off & Monitor:	Suzanne McMillan				
Prepared By:	Parminder Sahota	Date:	20.03.14		