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Supplementary information for Scrutiny Board (Health and Well-being and Adult Social Care) on 28 February 2014

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## Full actions in response to unannounced CQC inspection December 2014 v1

## Action plan owner: Beverley Murphy chief nurse and director of quality assurance

## THIS ACTION PLAN SUPERCEDES THE IMMEDIATE PLAN CLOSED 10 FEB 2014

Point	Compliance /	Actions taken and planned	Action owner	Review date	Progress &
	improvement action				evidence
		Bootham Park Hospi	tal		
1	Bootham Park Hospital wards have been judged by the CQC as not being safe or suitable.  This judgement covers several issues; two key	1 a) Complete outstanding environmental actions as agreed in December 2013 Work plan	Dawn Hanwell, Director of Finance	1/3/14	Majority of actions complete as recorded on immediate action plan. Anti-ligature towels and soap dispensers are on order and need to be
	themes are ligature anchor points on all three wards and privacy and dignity issues on the elderly assessment unit.	1 b) Matron to be seconded to hospital, one focus will be improving nursing approach to clinical risk assessment and management	Beverley Murphy, Chief Nurse & Director of Quality Assurance	25/2/14	fitted.  Matron started in post 20/1/14. Assessment of skills underway, immediate remedial actions taken, full report & recommendations due 25.2.14

	1 c) A full assessment of short and medium	Dawn Hanwell,		28.1.14
	term realistic options regarding provision of	Director of Finance	Executive	High level appraisal
	alternative suitable accommodation. The		Team –	discussed by Executive
	assessment to include NHS Property Services,		25.2.14	Team to move to detailed
	Vale of York CCG & NHS England Specialist			feasibility study.
	commissioners		Extraordinary	30.1.14
			single focus	High level appraisal
			board of	discussed at Board of
			directors -	Directors.
			27.2.14	3.2.14
				Engagement with NHS
			Board of	Property services to set
			directors	out issues and seek
			27.3.14	guidance about NHS PS
				owned estate.
				6.2.14
				VOY Board of Directors
				appraised of safety issues
				and support sought for
				short & medium term
				solutions. Further
				meeting with Vale Of York
				Executive team to follow.
				8.2.14
				Vale Of York CCG Director
				of Nursing fully appraised
				of safety issues.
				11.2.14
				Executive Team reviewed
				progress so far. Chairman
				visited the wards to see
				safety issues to inform
				further discussion.

		1	d) Project manager to be appointed to take forward identified preference as per 1 c).	Dawn Hanwell, Director of Finance	25.2.14	Further discussion with Board of Directors booked for 27.2.14, and 27.3.14  Agreement made to appoint, recruitment underway.
2.	The CQC identified poor record keeping and deficiencies in how the quality of service is monitored	a)	Ward managers continue to provide assurance that records are of a good standard with weekly audits reported to Lead Nurse. The weekly audits are triangulated with the findings of a monthly audit by the Lead Nurse using the same audit tool.	Beverley Murphy, Chief Nurse & Director of Quality Assurance	1.3.14	Reports of progress received monthly from Terri Sanders, Lead Nurse. These processes to continue until results demonstrate consistent compliance.
		b)	Matron to further explores reasons for poor records and will make recommendations to improve practice.	Beverley Murphy, Chief Nurse & Director of Quality Assurance	25.2.14	Matron in post from 20 January 2014. Verbal feedback has been regularly received. Formal feedback due 25.2.14
3.	Following the CQC Inspection Bootham Park Hospital has had additional focus from Executive Team, senior operational managers & clinical leaders.  As a result the need to review and improve the standard of clinical leadership, operational management & clinical care has been identified	a)	Full Quality improvement plan to be implemented by the clinical leadership team and monitored by the Associate Director of YNY services.  The Associate Director will be accountable to the Chief Nurse & Director of Quality Assurance for this project with regular reporting to the Quality Committee	Beverley Murphy, Chief Nurse & Director of Quality Assurance	1.3.14	December 2013 Agreement of necessary actions. 24.1.14 First draft report received. 29.1.14 Board of Directors agreed oversight of QIP to be provided by Quality Committee, 6.2.14 Quality committee discussed receipt of

or suitable. Key issues are identified ligature anchor points and privacy and dignity issues.  accommodation. The assessment to include NHS Property Services, Vale of York CGG & NHS England Specialist commissioners  accommissioners  barraordinary single focus board of directors - 27.2.14  Board of directors - 3.2.14  Board of directors - 27.3.14  Board of directors - 27.3.14  Commissioners and seek guidance about NHS PS owned estate.  6.2.14  VOY Board of Directors appraised of safety issue and support sought for short & medium term solutions. Further meeting with VOY Executive team to follow Excutive team to follow						monitoring of Q1 plan Second draft QIP received. QIP also to be received at TIRG March 2013
made a judgement that the premises are not safe or suitable. Key issues are identified ligature anchor points and privacy and dignity issues.    Team - 25.2.14   High level appraisal discussed by E.T. to move to detailed feasibility study.						
VOY CCG Director of	4.	made a judgement that the premises are not safe or suitable. Key issues are identified ligature anchor points and privacy and	a) A full assessment of short and medium term realistic options to be completed regarding provision of suitable accommodation. The assessment to include NHS Property Services, Vale of York CCG & NHS England Specialist	•	Team – 25.2.14  Extraordinary single focus board of directors - 27.2.14  Board of directors	High level appraisal discussed by E.T. to move to detailed feasibility study. 30.1.14 High level appraisal discussed at Board of Directors. 3.2.14 Engagement with NHS Property services to set out issues and seek guidance about NHS PS owned estate. 6.2.14 VOY Board of Directors appraised of safety issues and support sought for short & medium term solutions. Further meeting with VOY Executive team to follow. 8.2.14

		b)	Alternative appropriate windows to be fitted	Dawn Hanwell, Director of Finance	3.3.14	Executive Team review progress so far. Chairman visited the wards to see safety issues to inform further discussion. Further discussion with Board of Directors booked for 27.2.14, 13.2.14. 3.2.14 NHS England specialised Commissioners fully appraised of issues. They are working with NHS Prop Service in developing a PID. Review meeting booked 3.3.14 3.2.14 Suitable windows identified w/c 10.2.14 Company on site to measure and estimate cost.
			Trust Headquarters			
5.	The CQC identified that at Lime Trees, Bootham Park Hospital and Trust Headquarters there was insufficient evidence to	a)	Matron to be seconded to Bootham Park Hospital and undertake a full fact find of quality issues	Beverley Murphy, Chief Nurse and Director of Quality Assurance.	1.3.14	
	demonstrate that the	b)	Ensure regular environmental audits to be reported into operational managers	Jill Copeland, Chief Operating Officer	1.5.14	

quality of service was monitored and therefore addressed.	with risks recorded in risk registers and all extreme risks to be reported to Board of Directors via the risk registers.			
	<ul> <li>c) Strategic risk register to be fully revised and regularly reviewed.</li> </ul>	Beverley Murphy, Chief Nurse & Director of Quality Assurance	28.1.14	Completed 28.1.14 and on-going review within strategic implementation board.
	<ul> <li>d) Corporate risk register to be developed as a means of escalating all extreme directorate risk</li> </ul>	Beverley Murphy, Chief Nurse & Director of Quality Assurance	1.4.13	
	e) Board Assurance Framework and Senior Leaders Forum to be used to communicate key risks, strategic risk register and corporate risks to Board committees.	Beverley Murphy, Chief Nurse & Director of Quality Assurance. Cath Hill, Head of Corporate Governance		In hand