

**Report on actions you plan to take to meet CQC essential standards**  
Please see the covering letter for the date by which you must send your report to us and where to send it. **Failure to send a report may lead to enforcement action.**

<b>Account number</b>	RDY
<b>Our reference</b>	
<b>Location name</b>	Forston Clinic
<b>Provider name</b>	Dorset HealthCare University NHS Foundation Trust

Regulated Activities	Regulation
Assessment or medical treatment for persons detained under the Mental Health Act 1983 Diagnostic and screening procedures Treatment of disease, disorder or injury	<p>Regulation 9 HSCA 2008 (Regulated activities) Regulations 2010</p> <p>Care and Welfare of people who use services</p> <p><b>How the regulation was not being met:</b></p> <p>Regulation 9 (1) (b) (i) (ii)</p>
<b>Please describe clearly the action you are going to take to meet the regulation and what you intend to achieve</b>	
<p><b>1. There were shortfalls in some aspects of care planning and risk assessment which meant that arrangements to support patients, and ensure their needs were met, were not clear.</b></p> <p>a) Where there is an identified area of risk or care need this will be accompanied by a care plan and the risk assessment will be updated accordingly.</p>	
Who is responsible for the action?	Ward Manager
<b>How are you going to ensure that improvements have been made and are sustainable? What measures are you going to put in place?</b>	
<p>a) The ward manager in their minimum of monthly review of care plans will ensure that identified needs of service users are represented in a care plan.</p> <p>b) The ward manager will ensure that the date for review of risk assessment is monitored via MDT review and is part of the Acute Care Pathway.</p> <p>c) All staff have been reminded of the need to ensure all identified needs are supported through a care plan. (Evidenced via unit meeting minutes) Staff who are not meeting the standards will receive coaching via the management supervision.</p>	
Who is responsible?	Ward Manager
<b>What resources (if any) are needed to implement the change(s) and are these resources available?</b>	
N/A	
<b>Date actions will be completed:</b>	<p>a) September 2013</p> <p>b) September 2013</p> <p>c) Completed</p>
<b>How will not meeting this regulation until this date affect people who use the service(s)?</b>	
NA as the actions are in place	
Completed by (please print name(s) in full)	James Barton

Position(s)	Director of Mental Health	
Date		
<b>Regulated Activities</b>	<b>Regulation</b>	
Assessment or medical treatment for persons detained under the Mental Health Act 1983 Diagnostic and screening procedures Treatment of disease, disorder or injury	<b>Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010</b> <b>Safeguarding people who use services from abuse</b>	
	<b>How the regulation was not being met:</b>	
	Regulation 11(1) (b).	
<b>Please describe clearly the action you are going to take to meet the regulation and what you intend to achieve</b>		
<p><b>1. The trust had procedures in place to report abuse. However, not all allegations made by patients were reported using these procedures to ensure their concerns were investigated appropriately.</b></p> <p>a) Using the examples raised by the CQC, the ward manager has reviewed with staff what constitutes a safeguarding issue and thresholds for reporting via the Trusts incident reporting system and / or the Trusts safeguarding policy.</p>		
Who is responsible for the action?	Ward Manager	
<b>How are you going to ensure that improvements have been made and are sustainable? What measures are you going to put in place?</b>		
<p>a) The ward manager will raise this issue at unit meetings. (Minutes are available)</p> <p>b) Monthly review of patient notes will be completed between September and December 2013 to ensure a process is embedded into practice that, where identified, safeguarding incidents are reported through Trust Incident Reporting System.</p>		
Who is responsible?	Ward Manager	
<b>What resources (if any) are needed to implement the change(s) and are these resources available?</b>		
N/A		
<b>Date actions will be completed:</b>	a) September 2013 b) December 2013	
<b>How will not meeting this regulation until this date affect people who use the service(s)?</b>		
NA as the actions are in place		
Completed by (please print name(s) in full)	James Barton	
Position(s)	Director of Mental Health	
Date		

Regulated Activities	Regulation
Assessment or medical treatment for persons detained under the Mental Health Act 1983 Diagnostic and screening procedures Treatment of disease, disorder or injury	<b>Regulation 22 HSCA 2008 (Regulated Activities) Regulations 2010 Staffing</b> <b>How the regulation was not being met:</b>  Regulation 22.
<b>Please describe clearly the action you are going to take to meet the regulation and what you intend to achieve</b>	
<p><b>1. Staffing on Waterston Assessment Unit was not planned effectively to ensure that there were always enough suitably qualified staff on duty to carry out physical intervention if required and minimum staffing levels were met</b></p> <p>There will be enough suitably trained staff to carry out physical intervention when the recruitment process has been completed and the staffing establishment will be at full complement. In the mean time we will continue to utilise bank staff and overtime to ensure minimum staffing levels are met and staff can carry out physical intervention if required.</p> <p>It is a mandatory requirement for staff to have received training in physical intervention prior to starting on the ward. (December 13) However, Melstock will remain the point of contact for emergencies.</p>	
Who is responsible for the action?	Ward Manager
<b>How are you going to ensure that improvements have been made and are sustainable? What measures are you going to put in place?</b>	
<p>a) All staff will receive training in the Prevention and Management of Violence and Aggression which includes physical intervention prior to working on the ward.</p> <p>b) All vacancies have been recruited to; the Trust predicts all new recruits will be in post by December 2013. However, it is important to note that there will continue to be natural turnover of staff within the service and vacancies will appear. <b>(Service Manager – Acute Care and Crisis West)</b></p> <p>c) Staff will continue to receive annual training on physical intervention skills. <b>(Ward Manager – Melstock House)</b></p>	
Who is responsible?	See above
<b>What resources (if any) are needed to implement the change(s) and are these resources available?</b>	
NA	

<b>Date actions will be completed:</b>	a) December 2013 and ongoing b)December 2013  c) complete and ongoing
<b>How will not meeting this regulation until this date affect people who use the service(s)?</b>	
A) During the recruitment phase the Trust will continue to utilise bank staff and ensure there is always enough staff to meet the needs of service users, including the ability to undertake physical intervention. This includes utilising staff from Melstock in emergencies.	
Completed by (please print name(s) in full)	James Barton
Position(s)	Director of Mental Health
Date	

Regulated Activities	Regulation
Assessment or medical treatment for persons detained under the Mental Health Act 1983 Diagnostic and screening procedures Treatment of disease, disorder or injury	<b>Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010</b> <b>Supporting workers</b>
	<b>How the regulation was not being met:</b>  Regulation 23(1)(a).
<b>Please describe clearly the action you are going to take to meet the regulation and what you intend to achieve</b>	
<p>1. There were some arrangements in place to support staff on Waterston Assessment Unit but formal staff supervision and appraisal arrangements had not been fully implemented.</p> <p>a) The Trust has increased the Clinical Team Leader establishment, enabling more senior time to support the team and complete supervision. <b>(Ward Manager)</b></p>	
Who is responsible for the action?	<b>Ward Manager</b>
<b>How are you going to ensure that improvements have been made and are sustainable? What measures are you going to put in place?</b>	
<p>a) A process led by the ward manager is in place to ensure that staff receive management supervision in line with Trust policy. <b>(Ward Manager)</b></p>	
Who is responsible?	See above
<b>What resources (if any) are needed to implement the change(s) and are these resources available?</b>	
NA	
<b>Date actions will be completed:</b>	A) Complete
<b>How will not meeting this regulation until this date affect people who use the service(s)?</b>	
Completed by (please print name(s) in full)	James Barton
Position(s)	Director of Mental Health
Date	

Regulated Activities	Regulation
Assessment or medical treatment for persons detained under the Mental Health Act 1983 Diagnostic and screening procedures Treatment of disease, disorder or injury	<b>Regulation 10 HSCA 2008 (Regulated Activities) Regulations 2010</b> <b>Assessing and monitoring the quality of service provision</b>
	<b>How the regulation was not being met:</b>  Regulation 10(1)(a).
<b>Please describe clearly the action you are going to take to meet the regulation and what you intend to achieve</b>	
<p><b>1. Quality assurance systems on Waterston Assessment Unit were not fully embedded to ensure that monitoring resulted in timely action and shortfalls were addressed promptly.</b></p> <p>As outlined in the MHA CQC Action plan submitted on 12<sup>th</sup> August 2013:</p> <p>a) <i>Since the inspection two Mental Health Support Workers have been identified as leads for the community meetings; to ensure they are effective and meaningful for clients and recorded properly.</i></p> <p>b) <i>The Ward manager or Clinical team leader will continue to review the minutes of the meetings weekly and records feedback to the service users views' and suggestions. This feedback is then shared at the next community meeting.</i></p>	
Who is responsible for the action?	Ward Manager
<b>How are you going to ensure that improvements have been made and are sustainable? What measures are you going to put in place?</b>	
<p>a) <i>This new system has now been implemented and will be reviewed again in three months by the ward manager.</i></p> <p>b) <i>Feedback from community meetings, along with other forms of feedback, will be used to develop quarterly 'you said, we did' posters which will be displayed on the Quality Notice Board</i></p>	
Who is responsible?	See above
<b>What resources (if any) are needed to implement the change(s) and are these resources available?</b>	
NA	
<b>Date actions will be completed:</b>	A) Complete B) Complete
<b>How will not meeting this regulation until this date affect people who use the service(s)?</b>	

NA	
Completed by (please print name(s) in full)	James Barton
Position(s)	Director of Mental Health
Date	