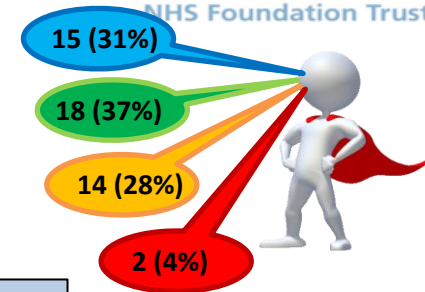


# CQC Improvement Plan Infographic

## Current position September 2019



Achieved
On track for delivery
Some issues, being managed/closely monitored
Issues/barrier noted. Not on track

Must do's

Adult wards and PICU	HBPoS	Older peoples wards
<ul style="list-style-type: none"> <li>Joint working to be implemented re reviewing effects of medication</li> </ul>	<ul style="list-style-type: none"> <li>Review borough leadership structures to ensure appropriate cover of 136 suites</li> <li>Supervision tree to be developed and policy to be reviewed</li> <li>Joint working to be implemented re safe management of meds</li> <li>Audit tool to be developed to capture quality of compliance with S136</li> </ul>	<ul style="list-style-type: none"> <li>Covert meds audit to be undertaken</li> <li>Joint working implemented re recording rationale for administering meds and ensuring this is done safely</li> <li>DNACPR policy to be reviewed and audit to be undertaken</li> <li>Administration of covert meds to be included in care plans</li> </ul>
<b>100%</b>	<b>25%</b> <b>75%</b>	<b>25%</b> <b>50%</b> <b>25%</b>

Should do's

Adult wards and PICU	HBPoS	Dental	Older peoples wards
<ul style="list-style-type: none"> <li>Develop milestones to eliminate MSA</li> <li>Develop a policy re protected characteristics</li> <li>Develop a policy on blanket restrictions</li> <li>Care plan documentation updated to reflect individual needs</li> <li>Review CEST and IPDR compliance</li> <li>All adult inpatient posts have been recruited to in relation to psychological therapies</li> <li>Continue to implement EPR</li> <li>Liaise with LA to discuss level of advocacy commissioned</li> <li>Develop female PICU beds</li> <li>Policy in place re alternatives to admission</li> <li>Expand the care planning audit to capture a wider sample size</li> <li>Sub-contract in place for female PICU beds</li> </ul>	<ul style="list-style-type: none"> <li>Self-assessment tool to be developed to ensure patients are aware of how to complain/provide feedback</li> <li>CCTV leaflets have been adapted to include 136 suites</li> <li>Develop peer reviews and QI framework to improve learning and sharing best practice</li> <li>Patient information leaflets are available in various languages</li> </ul>	<ul style="list-style-type: none"> <li>All relevant staff to have up to date IRMER training</li> <li>X-ray audit to be carried out</li> <li>Establish formal structure to improve communication between the directorate and other teams</li> </ul>	<ul style="list-style-type: none"> <li>Relevant information displayed on noticeboards</li> <li>Develop a policy on blanket restrictions</li> <li>Review supervision and IPDR compliance</li> <li>Joint working to be implemented to ensure meds management practice is consistent</li> <li>Engage staff in the development of the Trust Strategy</li> <li>Develop peer reviews and QI framework to improve learning and sharing best practice</li> <li>Patient information leaflets are available in various languages</li> </ul>
<b>43%</b> <b>36%</b> <b>21%</b>	<b>25%</b> <b>25%</b> <b>50%</b>	<b>33%</b> <b>67%</b>	<b>22%</b> <b>45%</b> <b>33%</b>

Well-led

<ul style="list-style-type: none"> <li>Agree new visions and values and how to roll these out</li> </ul>	<ul style="list-style-type: none"> <li>Quality Implementation Plan to be agreed</li> </ul>	<ul style="list-style-type: none"> <li>Management Development Programme reviewed</li> </ul>	<ul style="list-style-type: none"> <li>Review the patient experience structure and resource</li> </ul>	<ul style="list-style-type: none"> <li>A process flowchart re MHA reviewer reports has been developed</li> </ul>
<ul style="list-style-type: none"> <li>Equality, Diversity and Inclusion Steering Group established and agreed priorities around EDI</li> </ul>	<ul style="list-style-type: none"> <li>Develop QI framework to improve learning and sharing best practice and offer training on QI</li> </ul>	<ul style="list-style-type: none"> <li>Undertaken the NHSi Patient Experience Improvement Framework self-assessment</li> </ul>	<ul style="list-style-type: none"> <li>Flowchart developed re governance arrangements for Clinical Audit for feedback loop to ILGs</li> </ul>	<ul style="list-style-type: none"> <li>Line Management Development programme reviewed</li> </ul>