

Our experience



“Inspectors were respectful and collaborative.”

“It was a truly enabling process; the inspectors’ feedback was valuable and confirmed our direction.”

“ The dialogue with inspectors was excellent; they keep us abreast of their findings so we were able to address many issues within a day.”

“ They and we were responsive to any and all changes that needed to be made throughout the inspection process.”



What was said

- One core service **'Inadequate'**
- One service **'Requires improvement'**
- Six rated **'Good'**
- One warning notice
- One removal of warning notice
- 33 should dos
- 21 must dos

Overall 'Requires improvement'

What was heard



- **Places of safety: recording and escalation**
- **Older adult wards: record keeping, training and dementia friendly environments**
- **Management and accessibility of beds**
- **Variations in practice**
- **Need to strengthen Trustwide governance and assurance**

Place of Safety - What do we know?

- We lacked breadth and depth and coordinated **data** on Place of Safety quality and performance
- Within our health-based Places of Safety, the wait for a Mental Health Act assessment was too long and breaches to 72 hour rule “occurred in the absence of adequate escalation processes.”
- All of our data was local and lacked robust Trust oversight of **recording** activity providing governance and assurance

Information – What do we know?

- **More than half** of people detained under S136 (63%) are sent home after being discharged from detention
- **91%** of people detained under S136 arrive with police (or police and ambulance)
- **68%** of people detained between 6pm and 6am (peaks between 9pm-3pm: 47%)
- Mason Unit detained five times as many people compared with other suites (+50 compared with average 10)
- The population of detainees comprises more 35-44 year olds than those aged 65-74.
- Those people aged 25-34 are **half as likely** to be detained as 16-24 year olds

Escalation – What did we do?

After 3 hours: If there is someone in a place of safety for 3 hours and

- They have not been assessed
 - An email is sent to the Place of Safety unit manager

After 5 hours: If there is someone in a place of safety for 5 hours and they have not been assessed and

- It is in working hours
 - An email is sent to the Modern Matron

After a patient has been in detention for 12 hours (regardless of whether they have been assessed) and

- It is in working hours and then every 12 hours after that (ie at 24, 36 and 48 hours)
 - An email is sent to the locality triumvirate management team

After a patient has been in detention for 50 hours and

- It is in working hours
 - An email is sent to the Clinical Executive
- It is outside working hours
 - An email is sent to the Executive Directors

Place of Safety – Making a Difference

- We will have an established system wide response to the issues identified by the CQC initially led by Keith Pople
- We will have sustainable Places of Safety with individuals detained appropriately and within timescales, acknowledging reduction in detention times to 24 hours
- We will have decision making groups such as crisis Concordats that are engaged and empowered to lead

Older Adults – What do we Know?

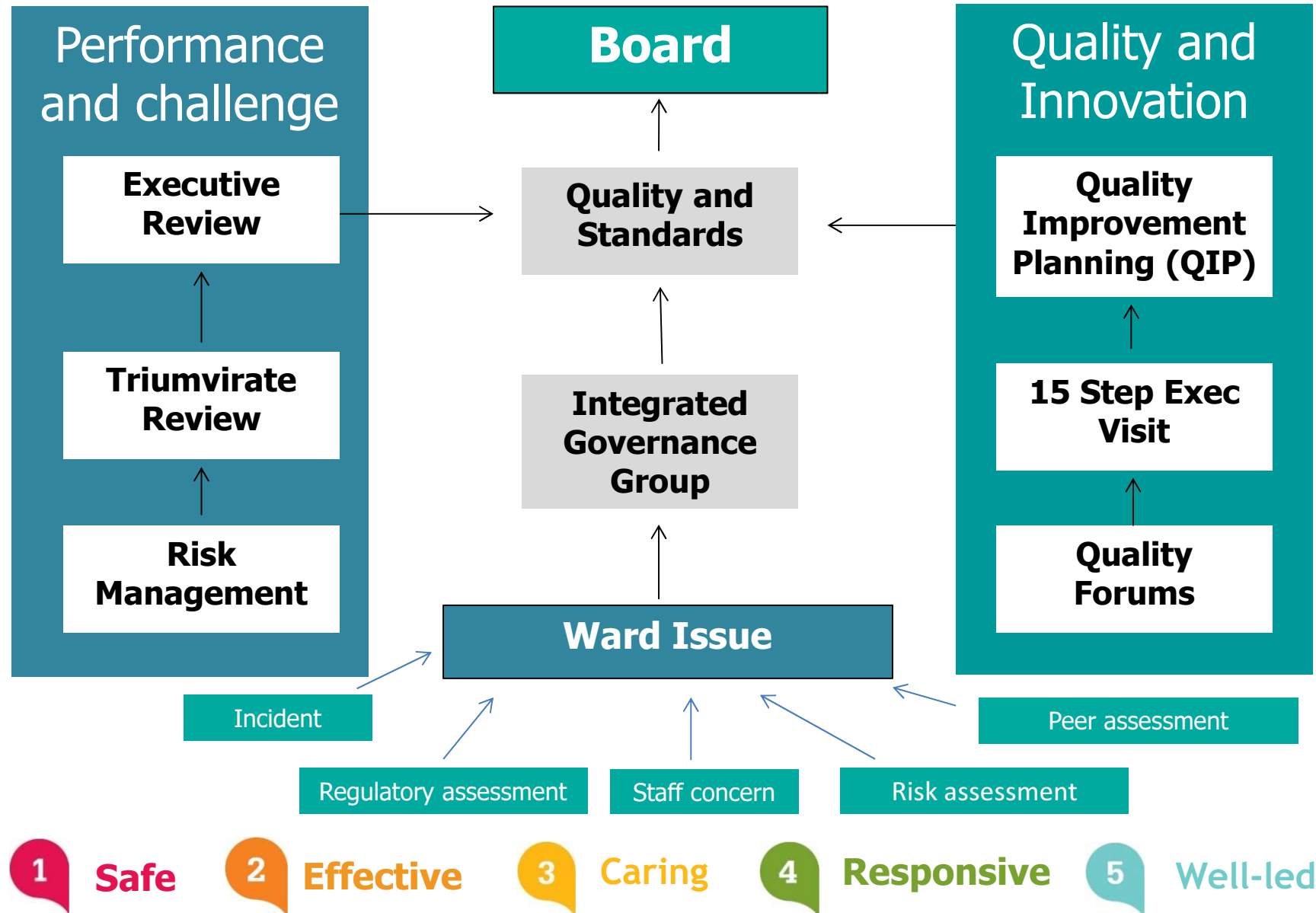
- Our **record keeping** in relation to The Mental Capacity Act, Incident reporting and Care plans were inconsistent. Adherence to care plans and collaborative involvement with service users was also variable .
- The standard of our Inpatient environments was variable. They were not all “**dementia friendly**”.
- Our completed **staff training** across Older Adult Inpatient services was below the 85% standard for the following topics:
 - Practical patient handling
 - Physical Emergency Response Training
 - Prevention and Management of violence and aggression

Our values: Passion Respect Integrity Diversity Excellence

Older Adults – what did we do?

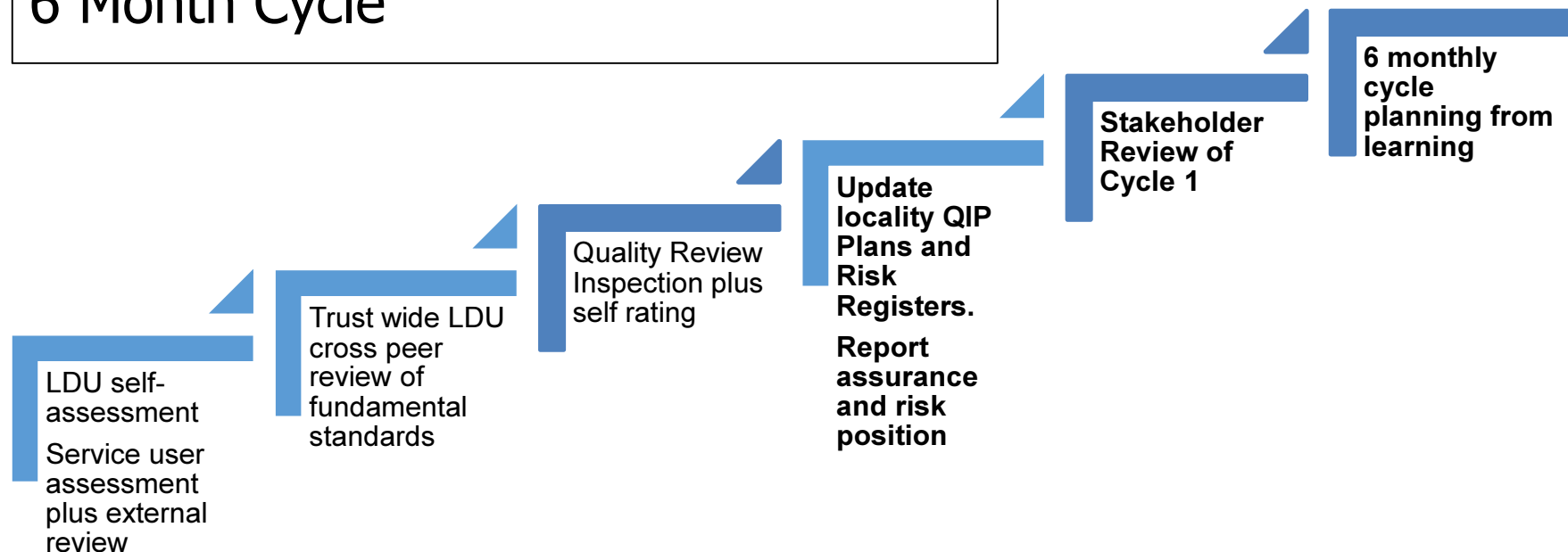
- Nurse Consultant for Dementia Care has created a 'Dementia Strategy' for the trust which will guide the organisation in addressing areas highlighted by the CQC and beyond in reference to government policy. The aim will be to achieve excellence in care for this target group.
- The Trust has implemented a Trust wide audit of in-patient units against King's Fund standards for dementia friendly environments, to be completed by December 2016
- An analysis of training data is underway with emphasis on the specific issues for older adults such as DNAs

How we will we sustain improvements



How will we know?

Fundamental Standards Framework 6 Month Cycle



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Specific issues

- Vacancies and recruitment in Intensive Service
- Ward 4 environment

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Good Practice

- Fresh Art project
- Therapies service – Quality improvement audit
- Police liaison role with Intensive Service
- Confidentiality conference – training with carers
- Recovery service – community medicines management
- Clinicians trained in BSL

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