The Queen Elizabeth Hospital NHS
King's Lynn
NHS Foundation Trust

Action Plan Subject:		Review Date:	Monitoring Body:
Care Quality Commission – Review of Compliance 2012 - Outcomes 1,5,21		Monthly	Board of Governors
Related Performance Indicator	and Target:	Performance against KPI as at date of Review:	BAF/Risk Register Reference:
CQC Registration	No conditions		
Conditions / Triggers for Escalation/Exception reporting to Board / Senior Committee (determined by Monitoring Body):			

Ref. No.	Issue being addressed and cause of issue	Weighting H,M,L	Action (to address the cause of underperformance / risk)	Responsibility	Progress update	Date for completion	RAG	Outcomes/Evidence
Outcome 1 - Respecting and involving Care and welfare of people who use services								
1	Some patients did not fully understand the care and treatment available to them and had not been involved in planning their care Records do not demonstrate that patients are involved in their assessments and plan of care	H	All patients to be involved i decisions in relation to care choice and in planning own care. Documentation policy revised to include the need for staff to document patient involvement in the assessment and plan of care	Matrons ward sisters / charge nurses	Trust's documentation policy has been reviewed and revised and all staff are aware that they must individualise patient care, this has been included in documentation sessions held September – November 2012- New handover standard developed,	29th Novemb er 2012	G	Monitoring of care plans and informal monitoring by matrons, sisters charge nurses Board rounds have commenced in ward areas New handover to commence
1	Reported that on occasions patients privacy and dignity had not been fully met	H	Trust's policy on privacy and dignity reviewed and all staff aware they are to monitor this policy in their clinical areas	All Trust Staff	Reminders given to all staff at sister/ charge nurse meetings, to consultants, all medical	29th Novemb er 2012	G	Audits of privacy and dignity standards Informal monitoring by

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			and challenge any member of staff who does not adhere to the policy and the dignity code		staff and all Non medical professionals			Matrons, sisters charge nurses
Outcome 5 – Meeting Nutritional Needs								
5	Some patients did not receive the support required to met their nutritional needs	H	Standard for meal service reviewed and revised to ensure that all aspects of nutritional support are met when patients receive meals	Matrons/ wards sisters / charge nurses	All staff to be aware of which patients need assistance with meals and plan how this will be supported during each meal time	November 29th 2012	G	Daly monitoring by ward sisters during meal times
Outcome 21 - Records								
	Some records in relation to nutritional assessment, nutritional intake, fluid balance and care rounds were inaccurate	H	Documentation and nutrition policies reviewed and awareness heighten in all staff of professional requirements for excellent documentation to ensure patient safety.. .	Ward sisters / Charge nurses	All staff reminded to complete nutritional assessments, food and fluid charts in line with legal requirements for documentation.	29th November 2012	G	Audit of food charts during CQC nutrition audit indicated compliance

KEY: RAG Rating					
	Complete		On track for delivery		Behind plan and action needed to bring back on target (see Recovery Plan column)
KEY: WEIGHTING					
H	High Priority	**M**	Medium Priority	**L**	Low priority