Must & Shoulds by Workstreams

Appendix B

People	Caring Well	Environmental	Performance	Governance & Learning
Workstream 1	Workstream 2	Workstream 3	Workstream 4	Workstream 5
Executive Lead Karen Charman	Executive Lead Emma Hardwick	Executive Lead Roy Jackson	Executive Lead Jon Wade	Executive Lead Nick Lyons
1. Trust Overall The trust **must** ensure that mandatory training attendance, including training on infection prevention and control and safeguarding of vulnerable children and adults, improves to ensure that all staff are aware of current practices.	**2. Trust Overall** The trust **must** ensure patient care records are accurate, complete and contemporaneous. This includes the accurate and consistent completion of weight and nutritional assessments and fluid balance charts.	**19. Urgent & Emergency** The trust **must** ensure that the environment within the emergency department is appropriate to provide safe care and treatment. **New**	**12. Trust Overall** The trust **must** ensure that the information used to monitor, manage and report on quality and performance is accurate, valid, reliable, timely and relevant. **New**	**4. Trust Overall** The trust **must** ensure that there is an effective process for governance, quality improvement and risk management in all departments.
10. Trust Overall The trust **must** improve the functionality of the board and ensure formalised processes are in place for the development and support of both current and new executive directors.	**3. Trust Overall** The trust **must** ensure mental capacity assessments are consistently and competently carried out where required. .	**25. Medical** The trust **must** ensure staff have ready access to required equipment, including resuscitation equipment. **New**	**13. Trust Overall** The trust **must** continue to review the bed management and site management processes within the organisation to increase capacity and flow and ensure effective formalised processes are in place to ensure patient safety in any escalation areas when in use. **New**	**5. Trust Overall** The trust **must** ensure that processes for incident reporting, investigation, actions and learning are embedded across all services. Including effective monitoring of incident categorisation, grading, trend analysis and processes for staff to learn from incidents.
14. Trust Overall The trust **must** improve the culture, working relationships and engagement of consultant staff across all services.	**17. Urgent & Emergency** The trust **must** ensure that resuscitation trolleys are checked in accordance with the trust policy and resuscitation council guidelines.	**30. Surgery** The trust **must** ensure that plans to improve arrangements for disposing of waste on SAU and Elm ward are implemented, to ensure compliance with infection prevention and control procedures. **New**	**21. Urgent & Emergency** The trust **must** review the arrangements for booking in patients and for the waiting area to ensure that patients at risk of deterioration are identified and escalated appropriately. Non-clinical staff responsible for booking in patients must have clear criteria for escalating patients to clinical staff. **New**	**6. Trust Overall** The trust **must** ensure that serious incidents are identified, reported and investigated in a timely manner.
15. Trust Overall The trust **must** ensure that effective process for the management of staff grievances and complaints are in place, ensuring timely management in line with trust policy.	**27. Medical** The trust **must** ensure there are processes in place to reduce the risk of medicines errors. **New**	**33. Surgery** The trust **must** ensure that patient care records are stored securely in all areas.	**23. Urgent & Emergency** The trust **must** improve its performance times in relation to ambulance turnaround delays, four-hour target, patients waiting more than four hours from the decision to admit until being admitted and monthly median total time in A&E. **New**	**7. Trust Overall** The trust **must** ensure that the duty of candour is carried out as soon as reasonably practicable, in line with national guidance.
16. Trust Overall The trust **must** ensure effective processes are in place to meet all the requirements of the fit and proper person's regulation. **New**	**29. Surgery** The trust **must** ensure that staff follow infection prevention and control procedures in relation to hand hygiene, disposal of intravenous equipment and clothing in theatres.	**34. Surgery** The trust **must** review the location of the elective admissions unit to ensure that the needs of patients are met. **New**	**46. Maternity** The trust **must** review the antenatal booking process to ensure that referrals are tracked. **New**	**8. Trust Overall** The trust **must** ensure that recommendations and learnings from regulators, external reviews and local audit are utilised to identify actions for improvement and that these are monitored and reviewed.
18. Urgent & Emergency The trust **must** review nursing and medical staffing numbers and plan staffing acuity accordingly.	**31. Surgery** The trust **must** ensure that staff in theatres have clear guidance, and effective processes are implemented, in relation to the required safety checks for anaesthetic equipment and the malignant hyperthermia trolley. **New**	**39. Maternity** The trust **must** ensure that the environment at Wisbech hospital and in the early pregnancy unit is appropriate to provide safe care and treatment.	**60. Urgent & Emergency** The trust **should** review the hours that the ambulatory emergency care unit, the paediatric assessment unit and the rapid assessment team are available to maximise admission avoidance. **New**	**9. Trust Overall** The trust **must** ensure clear processes are in place for sharing learning from incidents, complaints and audits with staff.
24. Medical The trust **must** ensure the service has enough nursing staff, on all medical wards, to keep people safe from avoidable harm and to provide appropriate standards of care and treatment.	**32. Surgery** The trust **must** ensure that medicines are stored, prescribed and administered safely, in line with trust policy. **New**	**48. Maternity** The trust **must** ensure that women who have miscarried up to 16 weeks are cared for in a suitable environment.	**62. Urgent & Emergency** The trust **should** review the policies and protocols in place to manage escalation and crowding. **New**	**11. Trust Overall** The trust **must** ensure that effective processes are in place, and monitored, to ensure clinical policies and guidelines are regularly reviewed and updated in line with national guidance.
26. Medical The trust **must** ensure there are sufficient and appropriate induction procedures for agency staff and competency checks for both agency staff and substantive staff who are moved from other areas of the hospital. **New**	**35. Surgery** The trust **must** ensure that the world health organisation (WHO) and five steps to safer surgery checklist is used consistently in theatres and that effective process is in place for quality audit of all five steps of the checklist. **New**	**58. Urgent & Emergency** The trust **should** review the layout of the emergency department to ensure that it supports flow and meets the needs of local people. **New**	**63. Urgent & Emergency** The trust **should** review the service provided for patients with mental health conditions to ensure that they receive timely assessment and treatment. **New**	**20. Urgent & Emergency** The trust **must** ensure that serious incident action plans are comprehensive and that the completion of actions is monitored.
37. Maternity The trust **must** monitor medical staff training rates, and improve appraisal rates to meet the trust target.	**41. Maternity** The trust **must** ensure that effective arrangements are in place for vulnerable service users.	**66. Urgent & Emergency** The trust **should** review its communication aids available to assist staff to communicate with patients living with a sensory loss, such as hearing loss. **New**	**70. Medical** The trust **should** ensure there are systems in place to reduce and manage the high number of medical outliers. **New**	**22. Urgent & Emergency** The trust **must** ensure that compliance with new or updated national guidance is regularly assessed and monitored, and improvements made where necessary.
38. Maternity The trust **must** improve cardiotocography training rates.	**42. Maternity** The trust **must** ensure that service users with high risk care pathways receive consistent care planning and appropriate consultant review.	**91. Diagnostic Imaging** The trust **should** ensure effective processes are established for the cleaning of clinical rooms and equipment in the radiology department.	**73. Medical** The trust **should** ensure there is improved communication and multidisciplinary working with external services. **New**	**28. Medical** The trust **must** ensure the risk register is reflective of all the risks in the service and includes relevant actions to mitigate risk. **New**
47. Maternity The trust **must** ensure that leaders within the service collaborate to improve the service and that culture and wellbeing of staff is improved.	**44. Maternity** The trust **must** ensure that the world health organisation (WHO) and five steps to safer surgery checklist is used consistently within obstetric theatres. **New**		**78. Surgery** The trust **should** ensure strategies to manage access to the service and patient flow through the service are embedded. **New**	**36. Surgery** The trust **must** ensure there are clear governance processes in place, particularly in relation to the monitoring of safety checks in theatre, identification and management of risk and reporting of performance to the board.
57.Trust Overall The trust **should** ensure that effective processes are in place to promote and protect the health and wellbeing of all staff.	**49. Maternity** The trust **must** ensure that resuscitation trolleys are checked daily and that all medicines stored on resuscitation trolleys are in date.		**82. Surgery** The trust **should** ensure all staff have access to relevant information management systems, to meet patients' needs. **New**	**40. Maternity** The trust **must** ensure that there are effective processes in place for quality improvement and risk management.
59. Urgent & Emergency The trust **should** ensure that staff receive yearly appraisals.	**50. End of Life Care** The trust **must** review 'do not attempt cardio-pulmonary resuscitation' (DNACPR) forms to ensure they are completed fully and in line with trust		**85. Outpatients** The trust **should** ensure that patients commence treatment for cancer within 62 days in line with national guidance. **New**	**43. Maternity** The trust **must** ensure that clinical guidelines are regularly reviewed and contain up-to-date national guidance.

	policy and national guidance.			
68. Urgent & Emergency The trust **should** ensure that plans in relation to the development of a strategy for the urgent and emergency service are implemented.	**51. End of Life Care** The trust **must** review its Mental Capacity Assessment and Deprivation of Liberty Safeguarding process and the way this is documented within patients' notes.		**93. Diagnostic Imaging** The trust **should** ensure effective processes are in place for the timely completion of diagnostic reports. **New**	**45. Maternity** The trust **must** improve its local audit programme and review national audit outcomes to improve patient outcomes.
73. Medical The trust **should** ensure there are appropriate systems to ensure staff feel supported, engaged and listened to.	**52. Outpatients** The trust **must** ensure resuscitation equipment in the paediatric clinic is checked daily.		**94. Diagnostic Imaging** The trust **should** review processes to ensure that patients are able to access diagnostic imaging services in a timely manner. **New**	**61. Urgent & Emergency** The trust **should** ensure that internal professional standards are created and monitored. **New**
75. Surgery The trust **should** continue to implement plans to maintain sufficient nursing staff to meet the needs of patients.	**53. Outpatients** The trust **must** ensure infection prevention and control audits are completed regularly and action taken to address concerns including cleaning of toys in waiting areas.			**65. Urgent & Emergency** The trust **should** ensure the service improves its local audit programme, including audits recommended in national guidance.
77. Surgery The trust **should** ensure all staff receive an annual appraisal, in line with trust policy.	**54. Diagnostic Imaging** The trust **must** ensure staff lock computer screens to protect patient information when leaving them unattended in the breast care unit.			**67. Urgent & Emergency** The trust **should** ensure that regular and minuted mortality and morbidity meetings take place for urgent and emergency services. **New**
79. Surgery The trust **should** ensure there are clear processes in place for sharing information with ward staff.	**55. Diagnostic Imagining** The trust **must** provide all patients with the option of a chaperone when undergoing diagnostic imaging in the cardio respiratory department. **New**			**69. Medical** The trust **should** ensure there are systems in place to ensure the consistent and effective sharing of feedback and learning from complaints and incidents
80. Surgery The trust **should** ensure that plans in relation to development of a vision and strategy for the surgery service are implemented.	**56. Trust Overall** The trust **must** review the knowledge, competency and skills of staff in relation to the Mental Capacity Act and Deprivation of Liberty safeguards			**72. Medical** The trust **should** ensure complaints are managed and responded to in a timely manner and in line with trust policy.
92. Diagnostic Imaging The trust **should** ensure all staff receive an annual appraisal, in line with trust policy.	**64. Urgent & Emergency** The trust **should** ensure that patients, relatives and carers receive timely emotional support. **New**			**76. Surgery** The trust **should** ensure that regular and minuted mortality and morbidity meetings take place for surgery services. **New**
	71. Medical The trust **should** ensure call bells are answered promptly to respond to patient risk and need. **New**			**83. Surgery** The trust **should** review the implementation of the local clinical audit programme for surgery services.
	81. Surgery The trust **should** ensure that information relating to the individual needs of patients is collected in a timely way.			**84. End of life Care** The trust **should** ensure morbidity and mortality meeting need to have a focus on the end of life care journey and how to improve end of life care. **New**
	89. Diagnostic Imaging The trust **should** ensure the secure storage, prescription and administration of medicines. This includes ensuring that appropriate patient group directives (PGD) are in place for the safe administration of medicines, including the safe administration of saline. **New**			**86. Outpatients** The trust **should** ensure that there is an effective process for quality improvement and risk management.
	90. Diagnostic Imaging The trust **should** ensure that resuscitation equipment in the breast care unit is easily accessible to all staff.			**87. Outpatients** The trust **should** ensure the service improves its local audit programme and review national audit outcomes to improve patient outcomes.
				88. Outpatients The trust **should** ensure that the service improves the time taken to investigate complaints in line with its complaints policy.
MUST and SHOULD but not included on the original Trust QIP – indicated by New above				
16, 26	27, 31, 32, 35, 44, 55, 63, 70, 88	19, 25, 30, 34, 57, 65, 81	12, 13, 21, 23, 59, 61, 62, 69, 73, 77, 84, 92, 93	28, 60, 66, 75, 83
Actions included on original Trust QIP but not a MUST or SHOLD				
GL16, DP3, DP9, DP11, DP12, DP7, DP8, IPC3, IPC4, IPC5, PC2, WF2, EE1, EE2, EE3				