

Parkside Lodge CQC report action plan

In response to CQC inspection on 4 April 2016
 Report published: 11 August 2016
 Report available on [CQC website here](#)

Action 1

Page in report:	Domain and issue:	MHA Section & CoP Ref:
6 / 12	Safety – The Trust must ensure that all staff are up to date with Mental Health Act training	
Action you will take:		
<ul style="list-style-type: none"> The ward manager and Matron will ensure a trajectory is agreed and monitored to increase compliance of Mental Health Act training over the next few months. 		
How you will know it is achieved:		Date when action will be completed: (dd/mm/yyyy)
Compliance will be 90% for all staff		1 December 2016
Comments:		Name of responsible manager:
		Matron

Action 2

Page in report:	Domain and issue:	MHA Section & CoP Ref:
6 / 12	Safety – The Trust must ensure all ligature risks are identified and added to the local risk register, and ensure that ligature risks are mitigated by the removal of those risks where possible	
Action you will take:		
<ul style="list-style-type: none"> The Ligature Anchor Point Risk Assessment has been updated to include wardrobe doors, and will be reviewed / updated in line with Trust procedure (including details for managing risks that cannot be immediately removed) Curtain hooks were made safe within days of the Inspection occurring (as planned) 		
How you will know it is achieved:		Date when action will be completed: (dd/mm/yyyy)
Ligature Anchor Point risk assessments are reviewed and updated via the Clinical Environments Group		Completed – reviews ongoing
Comments:		Name of responsible manager:
		Matron

Action 3

Page in report:	Domain and issue:	MHA Section & CoP Ref:
6	Safety – The Trust should ensure staffing numbers are always adequate to keep patients safe when the service is at full capacity	
Action you will take:		
<ul style="list-style-type: none"> We will continue to review staffing numbers and usage on a regular basis, and formally report these to the Board via the Safer Staffing report provided by the Director of Nursing 		
How you will know it is achieved:		Date when action will be completed: (dd/mm/yyyy)
The Learning Disability Service management & clinical governance teams will monitor staffing usage, incidents, activity and any identified concerns on a regular basis. Issues will be escalated as required		Ongoing
Comments:		Name of responsible manager:
		Service Manager

Action 4

Page in report:	Domain and issue:	MHA Section & CoP Ref:
6	The Trust should ensure all areas of the hospital are clean	
Action you will take:		
<ul style="list-style-type: none"> Regular environmental audits and Health & Safety reviews will be undertaken in accordance with the Trust procedures. The Matron will conduct ad-hoc 'walk arounds' with the Ward Manager to review this Issues will be quickly identified and raised / escalated with the domestic services provider as required 		
How you will know it is achieved:		Date when action will be completed: (dd/mm/yyyy)
Formal inspections and informal checks will confirm improved level of cleanliness		Immediate
Comments:		Name of responsible manager:
		Ward Manager

Note: names of responsible managers have been redacted in this version.