

**Single Agency Action Plan**

**Agency: Stockport NHS FT**

**Date issued: July 2016**

**Date Reviewed: October 2016**

Rag rating	
	Not started
	In Progress
	Completed

No:	Recommendation	Key Actions	Key Outcome	Lead	Target Date	RAG
1	11. Stockport NHS FT : should set a clear strategy for the recognition of domestic abuse , with up to date policy guidance and a programme of staff training	1. Review Trust DA Policy in conjunction with children’s safeguarding team & ED lead, develop links with Stockport MBC to determine DA pathway	Staff will have a clear policy to refer to that will give clear direction for management of domestic abuse disclosures and situations. There will be a clear pathway for onward referral of cases.	WS JP PB	September 2016	
		2. Review Trust managing Staff Domestic Abuse Guidelines	Managers of Trust staff will be clear about their responsibilities towards staff who disclose that they are, or who they suspect are, victims of domestic abuse. This will then assist them to inform and support staff.	WS	September 2016	
		3. Engage with LA DA System Coordination (task and finish ) Group	Specifically this group will oversee: <ul style="list-style-type: none"> <li>1. Development of a cross-agency DA training plan and the identification of resources to deliver it</li> <li>2. An audit of the application across Partners of lessons learned from existing Domestic Homicide Reviews</li> <li>3. Work to recommend and establish whatever networks / groups it deems necessary to ensure                             <ul style="list-style-type: none"> <li>- On-going practitioner learning in respect of DA across agencies</li> <li>- The strategic coordination of services and systems relevant to DA issues across agencies</li> </ul> </li> </ul>	WS		

No:	Recommendation	Key Actions	Key Outcome	Lead	Target Date	RAG
<p><b>Progress &amp; Evidence:</b></p> <ol style="list-style-type: none"> <li>1. Policy reviewed and approved</li> <li>2. Guidelines currently under review deadline for comments 28/10/16</li> <li>3. Meetings ongoing</li> </ol>						

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No:	Recommendation	Key Actions	Key Outcome	Lead	Target Date	RAG
2	12. Stockport NHS FT : should ensure that the lessons learned from this incident with specific regard to domestic abuse and violence are conveyed across the Trust , and particularly in the Emergency Department	1. Prepare briefing paper to highlight issues brought up in the report and recommendations for the Trust - share in ED - share with Strategic Safeguarding Group - check if report can be shared with key players pre inquest or if sections can be shared	Staff will be aware of the issues and the lessons to be learnt and will apply these in practice	WS PB	October 2016	

**Progress & Evidence:**

1. Key recommendations highlighted in report extracted
2. CM to check with Coroner re sharing
3. 7 minute briefing shared with strategic safeguarding committee and children's level 3 safeguarding conference in October. ED Matron to ensure this is cascaded at safety huddles

No:	Recommendation	Key Actions –	Key Outcome	Lead	Target Date	RAG
3.	14: Stockport NHS FT: should revise its admission and discharge documentation to include a prompt regarding carer's needs and signposting to a plan of care and an assessment before discharge.	1.Include this prompt in nursing documentation	Staff would recognise that patients were carers and offer the opportunity for assessment. <b>NB</b> these assessments are undertaken by social care staff not Trust staff and may not be completed whilst an in-patient	WS	In place	Green
		2.Include audit of compliance within Trust record keeping audit	Compliance would be measured and where compliance is not achieved business groups would take actions	DK WS	September 2016	Yellow

**Progress & Evidence:**

1. This has been incorporated into Nursing Assessment
2. Clinical audit leads are discussing how this will be audited for introduction in January 2017

No:	Recommendation	Key Actions –	Key Outcome	Lead	Target Date	RAG
4.	15: Stockport NHS FT : should revise the recording systems to ensure a complete and contemporaneous record is maintained of all clinical encounters	<p>1.This will be addressed with the introduction of the Electronic Patient Record</p> <p>Actions undertaken by medical records ( for information) e-mail from Judith Riley If a patient attends ED the information is recorded on ED Advantis, which then pulls across into Evolve, so the information may not be available in paper but it is stored on our EDMS (Advantis and Evolve) If the patient is admitted there is a folder created and I think (but you will need to check this out with ED mangers) a copy of the paperwork is placed inside.</p> <p>The issue we have regarding loose episodes is that when patients are admitted to one of the emergency wards i.e. AMU, they don't request the notes and the issue has been that the loose episode was then stored separately, not within the main notes. We now have a process underway to send all the loose episode backlog to Cosmographis for scanning into Evolve and we have staff employed in HR to scan the new loose episodes being created.</p> <p>We also now send a RED HRS to the emergency wards for any patient on Evolve and therefore this will then get scanned into Evolve on discharge.</p>		CS		
		2				

No:	Recommendation	Key Actions –	Key Outcome	Lead	Target Date	RAG
		3.				
<b>Progress &amp; Evidence:</b> 1. 2. 3. 4.						

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No:	Recommendation	Key Actions –	Key Outcome	Lead	Target Date	RAG
5.	19: Stockport NHS FT : Domestic abuse training material should be reviewed to ensure that it includes domestic abuse in both children and adults safeguarding ; including that any individual in a domestic arrangement may abuse anyone else in that setting	1.To be added to Adult Safeguarding training	To highlight to staff that DA can be intergenerational and occur in an any domestic setting	WS	August 2016	
2.						
3.						
4.						

**Progress & Evidence:**

- 1.
- 2.
- 3.
- 4.

No:	Recommendation	Key Actions –	Key Outcome	Lead	Target Date	RAG
6.	20: Stockport NHS FT : Fully implement NICE guidance ‘Domestic Violence and abuse : multi-agency working’(PH50) recommendation 5 :‘Create an environment for disclosing domestic violence and abuse ‘ with particular emphasis on consistent implementation of policy , and recording information.	1.Incorporate this into policy alongside NICE Quality Standards - as per 1 (Recommendation 11)	Staff will be clear re their responsibilities	WS PB		

**Progress & Evidence:**

- 1.
- 2.
- 3.
- 4.

**Date agreed for recommendation for sign off:**

**Date agreed for sign off at QA&PM sub Group:**

**Date at SSCB :**

Key – WS - Wendy Stewart – Named Nurse Adult Safeguarding  
 JP - Julie Parker - Named Nurse Children’s Safeguarding  
 PB – Nurse Consultant - ED  
 DK – Deb Kershaw – Clinical Audit Manager