


Key Themes	Action Required	Lead Person	Timescale	Progress
Patient Experience 1. Patient Information	<ul style="list-style-type: none"> <li>• Effective use of Trust Policy on translation service, education for all staff on how to obtain information in different languages and use of language line as required in a timely manner</li> <li>• Develop patient information on ward process (e.g. welcome letter explaining key activities of the ward)</li> <li>• Develop specific patient information leaflets upon discharge and utilise Trust website on leaflets that are available</li> <li>• Full review of all notice boards throughout the ward (redesign Quality notice board, Safer staffing notice board incorporating who's who)</li> </ul>	Sara Clarke-Isaacs & Lynn Tompkins  Joint approach with Tristram Mills Marie Clough	<ul style="list-style-type: none"> <li>• Immediate effect and on-going</li> <li>• 31<sup>st</sup> May 2017</li> <li>• 30<sup>th</sup> June 2017</li> <li>• 31<sup>st</sup> May 2017</li> </ul>	In place
Complaint Handling 1. Shared Learning from all forms of concerns raised	<ul style="list-style-type: none"> <li>• Standard Operation Procedure via Governance team to be shared with all members of staff</li> <li>• Ensure there are adequate patient information leaflet how to raise a concern.</li> <li>• Ward to maintain local action plan on all complaints received demonstrating learning which will feed up into Divisional action plan</li> </ul>	Tristram Mills  Sara Clarke-Isaacs  Sara Clarke-Isaacs	<ul style="list-style-type: none"> <li>• Immediate effect</li> <li>• Immediate effect</li> <li>• 31<sup>st</sup> May 2017</li> </ul>	In place  Process agreed at Divisional Board 26 <sup>th</sup> April 2017

	<ul style="list-style-type: none"> <li>All concerns to be logged in ward monthly meeting, surgical wards have agreed on set format for records(Quality &amp; Safety team meeting)</li> <li>Nurse in charge &amp; ward sister to do daily walkabout and speak to patient to obtain real time feedback</li> </ul>	Sara Clarke-Isaacs	<ul style="list-style-type: none"> <li>Immediate effect</li> </ul>	
<p>Environment</p> <p>1. Maintaining infection control measures to protect our patients</p>	<ul style="list-style-type: none"> <li>Bi-Annual Infection Prevention &amp; Control Audit:               <ol style="list-style-type: none"> <li>Staff compliance</li> <li>Staff knowledge/understanding</li> <li>Communal areas</li> <li>Patients care areas</li> <li>Equipment</li> </ol> </li> <li>Implement our internal peer review cycle in line with infection control</li> <li>Tighter control between wards to be reviewed in line with Fire regulations to prevent staff movement between two different wards. This will require a review with estates department to explore swipe access</li> </ul>	<p>Sara Clarke-Isaacs &amp; Lynn Tompkins ICPT link nurse</p> <p>Sara Clarke-Isaacs/ all surgical ward managers</p> <p>Tristram Mills &amp; Rob Speight</p>	<ul style="list-style-type: none"> <li>2<sup>nd</sup> May 2017</li> <li>31<sup>st</sup> May 2017, first audit cycle will be complete</li> <li>16<sup>th</sup> May 2017, at next site wide resilience meeting</li> </ul>	<p>Tristram Mills finalising cycle with ICPT post review with ward managers</p> <p>At present we have liaised with ICPT and they have confirmed that movement is permitted if hand gel used</p>
<p>Safer Staffing</p> <p>1. Recruitment Plan</p>	<ul style="list-style-type: none"> <li>Weekly workforce meeting with Associate Director of Nursing addressing recruitment plan</li> <li>Ward to develop recruitment trajectory for 6 month</li> </ul>	<p>Sara Clarke-Isaacs/ all surgical ward managers</p> <p>Sara Clarke-Isaacs /</p>	<ul style="list-style-type: none"> <li>On-going</li> <li>16<sup>th</sup> May 2017</li> </ul>	Achieved

<p>2. Staffing level per shift to support team</p>	<p>period</p> <ul style="list-style-type: none"> <li>Weekly workforce meeting as above to cover skill mix target in line with Trust Policy and key performance indicators to maintain safety</li> <li>Senior Nurse to maintain 24hr staffing plan which addresses skills mix and balance use of external staff throughout the surgical wards</li> <li>Site wide recruitment strategy plan been developed with Director of Nursing and Associates</li> </ul>	<p>Lynn Tompkins</p> <p>All</p> <p>Lynn Tompkins</p> <p>Tristram Mills</p>	<ul style="list-style-type: none"> <li>On-going</li> <li>TBC (CORPORTAE APPROACH)</li> </ul>	<p>Achieved</p> <p>Achieved</p> <p>Strategy workshop held 25<sup>th</sup> April</p>
<p>3. Staff Morale</p>	<ul style="list-style-type: none"> <li>Share staff survey from site and develop local action plan (Picker Survey)</li> <li>Listening into Action event to explore team work to continue</li> </ul> <p style="text-align: center;">         Outline programme final.docx     </p>	<p>Sara Clarke-Isaacs / Lynn Tompkins</p> <p>Ellen Skyes (Values Based Standard Project Lead)</p>	<ul style="list-style-type: none"> <li>30<sup>th</sup> June 2017, organisational development overview and further actions agreed</li> </ul>	<p>In progress</p>

