

	Lead	Recommendation	Action	Due Date	RAG
Mr A	Derbyshire Healthcare NHS Foundation Trust	<p>Because of the lessons learned from this independent investigation the commissioning and development of the Derbyshire Healthcare NHS Foundation Trust Forensic Team should include:</p> <ul style="list-style-type: none"> <li>• effective supervision structures</li> <li>• audit of family contacts</li> <li>• quality standards for MoJ reporting.</li> </ul>	The Trust has established a Forensic Community Mental Health team. This service line continues to develop and evolve. The General Manager for the service ensures suitable systems are in place including supervision, the maintenance of MoJ reporting standards and practice in relation to family contacts.	Completed	Blue
	Derbyshire Healthcare NHS Foundation Trust	The operational policy for Derbyshire Healthcare NHS Foundation Trust Forensic team must include clarity about roles, responsibilities and communication between Derby City Council and Derby Healthcare NHS Foundation Trust when caring for a patient who is conditionally discharged from Section 37/41 MHA.	<p>We have a joint Social Supervision Policy in place with both local authorities across Derby and Derbyshire, with an escalation process to raise any concerns. The policy provides clear expectations for providers regarding the process of social supervision with the community, in line with Section 37/41 requirements alongside training expectations to support the needs and development of social supervisors across the forensic pathway, not just within the Trust. This joint policy has been discussed and agreed at the Trust's Mental Health Act Committee. A review of the policy is scheduled to take place and will consider any necessary service developments needed and how to maintain effective governance. Work continues with both local authorities to develop the role for specified Forensic Social Workers These roles will be dedicated to supporting the Trust's community and inpatient forensic services. We are also working with partners to establish a monthly review meeting to ensure communication and governance is strengthened across the pathway</p>	Completed	Blue

<p>Derbyshire Healthcare NHS Foundation Trust</p>	<p>The Trust will develop an auditing process to ensure compliance with reporting standards to the MoJ in relation to the progress of conditionally discharged patients and that these are maintained.</p>	<p>A series of audits have taken place and reported into the Trust's Mental Health Act Committee, which demonstrate good compliance with this action. This auditing process continues to be developed.</p>	<p>Completed</p>	<p>Blue</p>
<p>Derbyshire Healthcare NHS Foundation Trust</p>	<p>The Trust will seek assurance that race, ethnicity, gender and religious issues are routinely addressed in CPA needs assessments and care planning.</p>	<p>We have designed a briefing on cultural awareness in mental health, which is scheduled to soon go live. This will include information on how spirituality, religion, gender and ethnicity can impact on risk management and forensic mental health care. The Trust has commenced an audit of clinical practice, safety plans and how the cultural presentation factors are represented in care plans for minority groups. Reports on these actions will be provided to the Trust's Quality and Safeguarding committee who will monitor progress.</p>	<p>Completed</p>	<p>Blue</p>

<p>Derbyshire Healthcare NHS Foundation Trust</p>	<p>The Trust will review and enhance current systems in relation to care planning including EPR systems to capture collateral information in a culturally sensitive way.</p>	<p>The Trust is implementing a new Electronic Patient Record. Enhancements have been made with the development of a new Safety Plan and care planning is now cross referenced against the 'Think Family' policy. Plans are in place to audit family involvement in care plans and our risk assessments will also include the views of families. We will also be undertaking audits in relation to culture. All family contacts are recorded within the patient record. We will continue to develop and support our colleagues' cultural awareness where Section 37/41 applies. Members of the Community Forensic Mental Health team have accessed high levels of training in relation to PREVENT, transgender bias and safeguarding. Our Forensic Team use the HCR20 risk assessment process.</p>	<p>Completed</p>	<p>Blue</p>
<p>Derbyshire Healthcare NHS Foundation Trust</p>	<p>The Trust will ensure that the staff members involved in incidents receive appropriate support.</p>	<p>The Trust has systems in place to support staff following incidents. We recognise the importance of continually improving these processes. Support has been developed in collaboration with staff which co-ordinates support across services including operational, corporate and legal and people services. An aide memoire has been developed and included within the Trust's Incident Policy to support the initial management</p>	<p>Completed</p>	<p>Blue</p>
<p>NHS Derby and Derbyshire Clinical Commissioning Group</p>	<p>NHS Derby and Derbyshire Clinical Commissioning Group must ensure that there is primary care involvement in the MAPPA process for appropriate individuals.</p>	<p>CCG Nursing &amp; Quality/Safeguarding representation at MAPPA level 4, 3 &amp; 2. Information shared with Primary Care on need-to-know basis when appropriate and dependent upon level of rise.</p>	<p>Completed</p>	<p>Blue</p>