CTP Action Plan Review Learning disability division

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Headlines:

- The action plan was created in partnership across the division and there are actions being picked up at team and senior team level.
- Divisional managers have given recent assurance related to monitoring and review of CTP compliance, which is reviewed weekly and additionally monitored via spreadsheets on our shared drive. All risks re: CTP's are considered within referral meetings and allocated for action. In addition, these are escalated within the directorate as necessary.
- The action plan continues to be reviewed by the senior team and will be noted within the divisional business meetings.
- We have liaised closely with the lead nurse for learning and development and quality improvement to address learning needs and target sessions for staff in relation to writing CTP plans.
- The newly revised quality assurance framework provides an additional layer of review at a team, directorate and divisional level. Some dates have been extended due to challenges in achieving original deadlines.

Requirement	Evidence/Progress	Leads	To be achieved by			
AUDIT CYCLE AND PROCESS.						
Improve skills and confidence of clinicians involved in audit.						
Agree regular audit cycle within the division.	Audit Cycle will be agreed within the divisional quality assurance action plan	DML/JJ/EP	March 2022			
Complete audit alongside clinicians in practice.		DML/JJ/EP	April 2022			
Use the audit tool informally in supervision and peer to peer support sessions.		DML/JJ/EP	April 2022			
Use CTP audit tool with non-relevant patients to provide comparisons.		DML/JJ/EP	April 2022			

Requirement	Evidence/Progress	Leads	To be achieved by		
Arrange feedback on audit within three months of audit taking place.	This will be planned when the next audit is arranged.	Division	Achieved		
CTP PROCESS.		•			
To improve the MDT input into the CTP proces	SS.				
Share audit results and cycle with the MDT.	Shared at senior leadership (including therapies), unit manager/clinical lead and presentations provided by lead nurse QI and HON	HoN and Lead nurses	Achieved		
Give key messages to clinical leaders and team managers about their role in CTP.	Monitoring and review of CTP compliance. Teams reinforce messages about the responsibility of team members through weekly referrals meeting. Divisional managers ensure that the local authority are sited and up to date with status of compliance of those CTP's that they hold.	Directorate manager, Health Team managers	Achieved		
Ensure teams are clear that CTP is central to care planning and reinforce this as the overarching plan of care.	Being covered within the learning and development session.	Lead nurses Health Team managers	March 2022		
ASSESSMENT, CARE PLANNING AND SMART GOALS.					
Develop skills and confidence in using SMART goals. All Relevant Patients will have a current assessment of their needs.					
Utilise HEF workshops to make links between assessed needs and setting goals.	Sessions planned, some uptake.	Lead nurses	March 2022		
The LD Division will be clear about the expectation of the use of outcome measures.	Clear that we expect to collect outcomes in practice, in terms of therapies and therapeutic outcome measures, HEF continues to be utilised. Performance scorecard and service user feedback and improvement team gather feedback.	All	Achieved		

Requirement	Evidence/Progress	Leads	To be achieved by			
Share good practice examples from audits across the service group.	Lead nurses have been asked to provide these to L&D team	DML/JJ/EP	Feb 2022			
Support learning and development sessions in the teams.	Session from learning and development promoted within and attended by representatives in the division.	All	Achieved			
Teams will identify relevant assessment tools which will enable them to formulate an individual's care.		DML/JJ/EP	April 2022			
RISK ASSESSMENT AND RISK MANAGEMENT PLANS.						
Ensure risks are identified via the use of recog assessment.	nised risk assessment tools and that robust risk manager	nent plans are de	vised following			
Ensure that all staff are able to access appropriate training regarding risk assessment and risk management.	Access to training continues to present challenges, this is unresolved	L&D dept	Sep 2021			
Increase percentage of staff who have undergone WARRN training to 75%.	Access to training continues to present challenges, this is unresolved	L&D dept	Sep 2021			
Review risk assessments and CTPs together to ensure consistency in detail and flow of information	Evidence in nursing reviews that CTP and risk assessment are being reviewed jointly.	DML/JJ/EP	April 2022			