

KMPT ACTION PLAN FOLLOWING THE INDEPENDENT INVESTIGATION CARRIED OUT BY VERITA RELATING TO 'Mr D'

				Date Plan	
Job title of manager completing action plan		Team	Thanet Community Mental Health Team	Created/ Updated	01/07/2016
Service Line	Community Recovery Service Line	Date of Incident	6 TH March 2011		
Persons responsible for monitoring/review	Assistant Director Community Recovery Service Line – Patient Safety				
Brief Summary of Incident	On the 6 th March 2011 Mr who later died.	D assaulted a fellow resident in	n a house of Mu	ıltiple Occupano	cy in the Thanet area,

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	Recommendation/ Requirement/Learning as per VERITA	Action Required	Owner	To be Achieved by (date)
1	Kent & Medway Partnership Trust (KMPT) and the Clinical Commissioning Group (CCG) should be assured that the allocation of Care Programme Action (CPA) and non CPA cases is undertaken in accordance with Trust Policy and is needs led. Clinical documentation must identify the responsible Care Co-ordinator and detail how often CPA reviews should be undertaken	Business Intelligence (BI) reporting is a key feature in every team. 2. A CPA compliance audit tool to be developed. 3. The KMPT Policy Lead for CPA	Action Group	December 2016
2	KMPT should be assured that Service Users subject to CPA receive care and support which		Action Group	December 2016

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	is compliant with CPA guidance; (including care planning, risk assessment and risk management planning). Governance arrangements within CRSL should support CPA audit compliance at least every six months and report its findings to the board.	2. CRSL to implement robust Patient Centred Care Planning Audits and Clinical Risk Assessment and Management Audits within each Team and report the findings to the CRSL		
3	Depot Clinics must be underpinned with the introduction of robust guidance to govern the way in which the clinics operate and support individuals. It is recommended that the Trust undertakes an audit to ensure compliance with the above guidance.	Guidance on Medications Management. 2. Review the Policy and Guidance regarding the management of Depot Clinics to support improved standards.	Action Group	December 2016

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		Depot clinic process. 3. Audit tool and audit results to be published and disseminated to Teams for compliance and actions.		
4	The Trust should review the protocols with partnership agencies such as housing services to ensure effective communication and information-sharing for the safety of patients and the general public. This should take place within the next three months		Action Group	December 2016

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