

Summary of the CQC Improvement Plan

(February 2022)

Improvement area	Status	Monitored through
Elimination of Dormitory Accommodation	Our dormitory accommodation re-provision plan was shared with the CQC and wards are being vacated and refurbished on a rolling programme that will be concluded by 2023.	Dormitory re-provision plan is kept under review at the Estates and Medical Equipment Committee (EMEC) and any risks are escalated through to the Finance and Performance Committee (FPC). Progress also reported to the CQC monthly.
Personal Patient Call Alarms available on all adult mental health wards	Completed by 31 January 2022. Personal patient call alarms are now available on all adult mental health wards.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
Environmental risks are identified and checked.	New environment checklist process implemented and supported by 6 weekly compliance check. Completed by 31 January 2022.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
To ensure there are effective systems and processes in place to audit risk assessments & care plans	Reviewed current systems, audit tool changed, new audit process now in place. Completed by 31 January 2022.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
To ensure high standards of record keeping in relation to seclusion	Review has been completed additional training and support is being implemented and will be complete by the end of February 2022.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
To ensure that the privacy and dignity is protected	Temporary storage solutions were immediately implemented with investment in permanent storage	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to

around the respectful storage of patient's clothes	facilities that will be complete by 28 Feb 2022.	the CQC monthly.
To ensure protected characteristic needs are identified, care planned and actioned	LPT has reviewed individual care plans and reviewed trust policies. An amended audit framework has been implemented with all adult mental health rehabilitation wards having completed their reviews. Completion due by the end of March 2022.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
To use patient feedback to make improvements to the quality and variety of food available	Estates and facilities have held monthly meetings with patient groups, tested a new menu through patient tasting events. The LPT nutrition group has supported the development of new menus. Completion will be by the end of February 2022.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
To ensure that the privacy and dignity of patients is always maintained	We have reviewed our systems and processes to ensure environmental repairs are prioritised with regular reviews and spot checks that confirm compliance. This will be completed by the end of February 2022. LPT Trust Board have approved a business case to invest in further facilities management transformation.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.
To ensure staff routinely explain rights to informal patients, offer written information and record this	This was completed by 31 January 2021. We have developed leaflets to give to informal patients explaining their rights and a system for auditing these.	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.

<p>To ensure that managers review incidents in a timely way, in line with trust policy</p>	<p>All outstanding incidents have been reviewed and additional training is now available for staff. Completion will be confirmed at the end of February 2022.</p>	<p>LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.</p>
<p>To ensure the acute and psychiatric intensive care wards have consistent and effective management of contraband items – to include lighters</p>	<p>Completed by 31 January 2022. This included refreshing our checking and searching compliance and delivering a Quality Improvement programme. Regular checks and spot checks have demonstrated compliance.</p>	<p>LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.</p>
<p>To ensure that all patients have appropriate access to a range of psychological therapies</p>	<p>All psychology and occupational health posts in acute and intensive care mental health wards have been recruited to. An additional psychology post has been created to add to the existing workforce. Completion at the end of February 2022</p>	<p>LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.</p>
<p>To ensure that staff receive training in the Mental Health Act, Mental Capacity Act and other mandatory training programmes for their specific job role.</p>	<p>This will be complete by the end of February 2022. We have increased the frequency of training, to ensure staff can complete their training and deliver services through this phase of the COVID-19 outbreak</p>	<p>LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.</p>
<p>Learning Disability Services to ensure adherence to NICE guidance in monitoring the physical health of each patient receiving rapid</p>	<p>All available clinical staff completed this training by 31 January 2022</p>	<p>LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.</p>

tranquilisation.		
To ensure there are effective systems and processes to monitor the quality of clinical records, in particular seclusion records, physical health monitoring post rapid tranquilisation	Audits demonstrate sustained compliance, completed by 31 January 2022	LPT Strategic Executive Board, additional oversight by the Quality Assurance Committee and LPT Trust Board. Progress also reported to the CQC monthly.