



SSG UKSAS - CRITICAL CHANGE PROGRAMME (CCP)

STAKEHOLDER COMMUNICATION AGAINST PLAN – 24th January 2019

Milestone	Progress to date	Progress next period	Due	RAG
CCP Board formation	<p>The CCP Board was formed on the 20th December 2019 and meets fortnightly with an approved Terms of Reference</p> <p>All meetings have an agenda, minutes, action log, Project Highlight Reports and a maintained Risk and Issue Register</p> <p>There is a baselined high level programme plan</p> <p>A Task Force has been approved to address immediate CQC concerns and the team have been given protection from BAU activity</p> <p>All CCP Board members have the skills and experience to deliver clinical and operational change and/or expertise to advise best practice to the Board</p> <p>SSG owners are engaged with the new ways of working</p>	<p>Detailed project plans to be developed and to include medium and long term additional improvements</p> <p>Appointment of a UK based Managing Director</p> <p>Appointment of a Communications Manager</p> <p>Project Group meetings to be arranged</p> <p>Staff Representatives to be appointed to the projects and the CCP Board</p>	7th February 2019	G
Medicine Management (including Controlled Drugs) Medicines are managed safely and securely including transport and destruction. To include a review of Remote Prescribing, personal issue CDs and managing medicine safety alerts	<p>All Medicine Management Policies have been re-written in accordance with best practice</p> <p>Completely re-built the medicine storage facilities in Rainham and Fareham</p> <p>Introduced a much more robust paper trail process whilst we design and</p>	<p>Continue to embed the new processes and to further develop the plan for the digital process</p> <p>Audit the paramedics which have left the organisation to ensure their CDs are traced</p>	15th February 2019	G



	<p>implement an electronic system and process</p> <p>Remote prescribing has ceased</p> <p>Personal issue CD storage (where it still occurs) has been audited</p> <p>Medicine Safety Alert Policy is being drafted and we currently have three staff subscribed to the MHRA alerts</p> <p>Temperature checks of the storage facility is recorded daily</p>			
<p>Management of PGDs</p> <p>To include an audit trail of staff who have used PGDs</p>	<p>All PGDs have been re-written in accordance with NICE guidelines. These have been sent to the Commissioning Trusts for approval</p> <p>SECAM have approved and training commenced on the 24th January 2019 on their use</p> <p>Where trust PGDs are used by SSG we are waiting for access from the trust training packages and are actively chasing</p>	<p>Continue to chase non response trusts regarding PGDs</p> <p>Chase SCAS regarding the learning platform</p> <p>Deliver two additional training sessions</p>	15th February 2019	G
<p>Review of POMs to improve stock levels, and the tracking of medicines</p>	<p>New Medicine Management policy has been approved by the Risk Management and Clinical Governance Committee</p> <p>Initiated an audit process which includes daily and weekly audits of the centrally held medicine stock</p> <p>All medicine bags are re-stocked at a central store before being deployed to operations</p>	<p>Audits to be maintained and ensure this is passed to BAU ongoing</p>	15th February 2019	G



Incident Reporting Ensure effective incident reporting to the CQC is embedded, and lessons are learned	A Statutory Notification policy has been approved by the CCP To demonstrate a change of behaviour an incident was reported within 24 hours of it being identified	Embed the new policy. This is being delivered via training to the staff to increase awareness and the importance of following procedure in a timely manner. Identify a date and time for this to be delivered.	15th February 2019	G
Policies and Procedures Ensure Policies and Procedures are current and embedded	We now have an assigned Board to approve Policies and Procedures There is a process implemented to ensure Policies and Procedures are current at all times	Continue the process of reviewing, adjusting and approving policies and procedures as they are requiring renewal. Plan to embed the cycle of adhering to policies and procedures to be designed and taken to the CCP Board for comment.	15th February 2019	G
Maintain records of care To include risk assessments and be able to clearly demonstrate how risks are managed.	Risk Assessments are now documented as part of the patient care record, where appropriate Risk Assessment awareness throughout Senior Management has commenced	Risk Assessment database to be designed in order to assess trend and incorporate learning into a training plan	31st May 2019	G
Ensure there are effective Audit systems in place	Audits are now taking place for: <ul style="list-style-type: none"> - Patient Clinical Records - Hand Washing - Vehicle Cleanliness - Prescription Only Medicines - Controlled Drugs - Clinical Performance 	Outcome of audit database to be designed in order to assess trend and incorporate learning into a training plan	31st May 2019	G



Training Ensure all staff are current in the appropriate training for their role	Operations: <ul style="list-style-type: none"> - A skills matrix is being completed to define the skill mix for each role - A GAP analysis is being undertaken on the Senior Team to identify educational needs for the Statutory Appointments 	Develop a training plan to address the GAP analysis	15th March 2019	G
Information Management Improved Information Management, including implementing new systems to improve trend analysis and ensure feedback is given	Integrating an IT System which allows trend analysis of incidents and includes a feature to ensure that feedback is provided to the workforce	New IM system is being presented to the CCP on the 7th February 2019 Next steps pending discussion with the CCP	31st May 2019	G
Governance Improved Corporate Governance	The CCP has been formed since the 20 th December 2018 A revised Corporate Governance structure has been drafted and is due to be presented to the SSG owners on the 14 th February 2019	Next steps pending discussion with the CCP	28th February 2019	G
Human Resources Implement a new HR system to improve staff management	A new HR system has been identified and approved by the CCP Implementation plans shall form part of the business case which is to be presented to the CCP on the 7 th February 2019	Staff files to be audited to ensure records are complete and compliant New HR system: next steps pending discussion with the CCP	15 th February 2019 31st May 2019	G