

Hina Jenkins

Please find enclosed  
updated actor plan +  
final proposal to manage.

Mandy -

Sue Cramp  
Neil Stubbs.

**East Hampshire Primary Care Trust**

**Fareham & Gosport PCT**

**Portsmouth City PCT**

# **HSE IMPROVEMENT NOTICE**

**FINAL ACTION PLAN: 29 July 2003**

**Updated October 2004**

East Hampshire PCT

Fareham &amp; Gosport PCT

Portsmouth City PCT

## MANUAL HANDLING: ACTION PLAN

Potential Impact	Potential Likelihood				
	Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Certain (5)
None (1)	1	2	3	4	5
Minor (2)	2	4	6	8	10
Moderate (3)	3	6	9	12	15
Major (4)	4	8	12	16	20
Catastrophic (5)	5	10	15	20	25

NO	AREA OF CONCERN	RISK LEVEL	ACTION RECOMMENDED	PERSON/S RESPONSIBLE	(PROPOSED) TIMESCALES	IMPLEMENTATION MONITORED BY	OCTOBER 2004 UPDATE
1.	The HSE Inspector queried how staff are taught to use equipment they do not practice on their Handling Induction.	12	<ol style="list-style-type: none"> <li>Identify appropriate systems and relevant resources to teach all staff (incl. Bank nurses) how to use the equipment available on the wards. This should aim to ensure that ward based training is provided by competent persons and that all training is fully documented.</li> <li>Present a fully costed proposal to each PCT.</li> <li>Full/part PCT implementation of proposal.</li> </ol>	<ol style="list-style-type: none"> <li>Manual Handling Review Group (Systems advice)</li> <li>Handling Advisory Service through Portsmouth Hospitals Trust</li> <li>PCT approval</li> <li>Implementation of agreed proposal</li> </ol>	<ol style="list-style-type: none"> <li>31 July 2003</li> <li>31 October 2004</li> <li>From October 2004</li> </ol>	HSE Implementation Group initially then convene pan-PCT Lifting & Handling Group	Pan-PCT Training proposal and programme developed (with costings). PCT's to be updated and operational managers briefed – November 2004.

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2.	The HSE Inspector queried whether it would have been more appropriate for this patient – who was known to have complex handling needs – to have been allocated to a trained nurse.	12	1. Review how all PCT nurse managers decide which patients are allocated to which staff at the start of each shift e.g. patients with complex needs should be allocated to a member of staff that knows the patient whenever possible. 2. Interim arrangements should be put into place to ensure Nurses in charge of each shift determine what handling equipment Bank staff have been trained to use.	All PCT Service & General Managers		Risk Management Committee	PCT's Service Managers have confirmed current practice satisfies requirement. Bank staff receive moving and handling training. Equipment notices alert staff to the need to be trained. New training includes work based induction.
3.	Nursing staff do not receive formal training in carrying out a handling assessment and completing the handling profile documentation.	10	1. Handling Advisers to run Handling Risk Assessment Workshops for all PCT nursing staff responsible for completing handling profiles. 2. Completion and review of handling profile and care plan documentation to be included in trained nurse induction at ward level.	1. Manual Handling Advisers.  2. PCT Service Managers	Pilot training to be in place by October 2003.  As soon as possible.	Manual Handling Review Group  PCT OMG/OMT or equivalent	1. Completed.  2. PCT induction checklist has been updated to include this requirement.

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4.	Bank staff are currently responsible for identifying when they think their handling refresher training is due.	9	All PCT Services to review arrangements for identifying when handling refresher and other mandatory training is due to ensure staff (inc. bank staff) attend on time (use Handling Links?)	Neil Stubbs, East Hampshire PCT  Fiona Cameron, Fareham & Gosport PCT  Mark Wagstaff, Portsmouth City PCT	New arrangements in place by 31 December 2003	HSE Implementation Group	Superseded by the introduction of NHS Professionals. To be supported by the introduction of passport based training records.
5.	Query whether Agency Contracts are robust in ensuring that staff are up to date with their mandatory and other training before being allocated to wards.	9	Agency Contracts to be reviewed to ensure training requirements for staff are specifically stated in SLAs and that contract is monitored for compliance.	Denise Farmer, East Hampshire PCT, on behalf of Personnel Managers in each PCT	At next available opportunity	Risk Management Committee	Superseded by the introduction of NHS Professionals. Contracts are currently under review. (October 2004)

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6.	Nurse managers may not be aware of the skills, experience, equipment used, etc, by Bank & Agency staff when they arrive on a ward.	9	<p>1. PCTs to introduce a "passport" (or similar) document for staff to take with them from ward to ward which documents the training they have had, equipment they have been trained to use, etc.</p> <p>2. Staff should be actively discouraged from using equipment unless they have been trained or are being mentored to use the equipment.</p>	<p>Portsmouth City PCT to share proposal with other PCTs</p> <p>Proposal to be agreed and put into action.</p> <p>All 3 PCT Service Managers</p>	<p>31 October 2004</p> <p>December 2004</p> <p>31 December 2003</p>	Risk Management Committee	<p>1. PCT's working on 'passport' system for all PCTs to adopt.</p> <p>2. Service Managers alerted. Equipment marked to be used by trained operators only.</p>
7.	Health Care Support Workers and Bank/Agency staff not actively encouraged by Nursing staff to refer to Handling Profiles and Care Plans.	9	<p>1. During shift handover the Nurse in charge should actively and positively promote the use and reference to Care Plans and Handling Profiles to all staff including Bank/Agency and ensure these are easily accessible.</p> <p>2. The Ward Induction of all new permanent nursing and HCSW staff must include orientation and familiarisation with patient care plans and handling profiles.</p>	1. & 2. All 3 PCT Service Managers	30 September 2003	Risk Management Committee	1 & 2. PCT's Service Managers have confirmed that current practice satisfies this requirement and that staff have been reminded during team meetings.

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8.	The Handling Profile documentation is still headed as Portsmouth HealthCare and suggestions were made by staff about possible improvements to the format/ content.	9	1. Provide an interim update of forms to include PCT logos 2. Update the Handling Profile in consultation with staff from PCT services to include prompts for details of core maneuvers and equipment to be used.	Handling Advisers in consultation with PCT Service Managers	1. Interim forms produced by 30 August 2003.  2. New forms produced by 31 July 2004	Handling Review Group	Peter Fisk, PHT has offered to lead on this item.
9.	The HSE Inspector queried whether a formal inspection and replacement programme was in place for hoist slings.	8	Audit inspection, maintenance and replacement programmes using risk assessment checklist.	Risk Managers in consultation with Service Managers	31 October 2003	Risk Management Committee	All areas managed by Fareham & Gosport PCT have completed the Risk Assessment checklist. XXX to be clarified for East Hants and Portsmouth City
10.	The HSE Inspector expressed concern that the current day-long Handling Induction does not provide time to practice use of all handling equipment.	8	Review existing provision of manual handling induction in light of proposals for new system.	Manual Handling Review Group and HSE Implementation Group	Review completed by 31 October 2004.	PCT Risk Advisers	This item has been addressed via the Training programme developed.

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11.	Concerns were expressed by nursing staff about the availability of handling courses and refresher courses.	6	Review access to patient handling induction and refresher training in light of proposals for new system.	Manual Handling Review Group and HSE Implementation Group	Review completed by 31 October 2004	PCT Risk Advisers	This item has been addressed via the Training programme developed.



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12.	<p>Occ Health and the Bank Management Team were advised when it became known that the member of staff had sustained a serious injury. However, this information was not reported to the Ward/Service Manager. Similarly, the Bank did not automatically receive a copy of the risk event form straight away.</p>	6	<p>1. All PCT Services to review/improve arrangements for sharing details of incidents involving bank staff with wards/service managers and vice versa.</p> <p>2. Re-design of Risk Event form to include a "prompt" to remind Managers to send a copy of relevant forms to the Bank Management Team (Portsmouth City PCT) or a nominated individual in Fareham &amp; Gosport PCT and East Hampshire PCT (re-design of form in line with NPSA minimum data set).</p>	<p>1. PCT Service Managers</p> <p>2. PCT Risk Advisers</p>	<p>Review completed by 31 October 2003</p> <p>Risk Event Form to be re-designed by 30 December 2003</p>	<p>Risk Management Committee</p>	<p>1. Fareham &amp; Gosport PCT Service Managers have confirmed that current practice satisfies this requirement and that staff have been reminded during team meetings. East Hants PCT work with NHS Professionals and routinely provide copies of high-risk events signed off by the ward/service manager. Portsmouth CityXXX</p> <p>2. New Adverse Event Form includes prompt to copy form to Agency/Bank/NHS Professionals. Pan-PCT pilot completed. New forms streamlining reporting arrangements to be implemented late 2004/early 2005.</p>

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13.	Evidence suggests risk events are being stockpiled on wards before being sent to Service Managers and details of incidents involving patients not being communicated quickly to Consultants.	6	1. All Services to remind Managers about the importance of prompt completion and onward distribution of risk event forms to Service Managers. 2. Arrangements for notifying Consultants/Lead Clinicians of all patient-related incidents to be reviewed.	All Service & General Managers	30 September 2003	Risk Management Committee	PCT's Service Managers have confirmed that current practice satisfies this requirement and that staff have been reminded. Where delays are evident feedback is provided to managers.

Updated: October 2004