

**Cardiff and Vale University Health Board
Action Plan re ~ Homicide – Mental Health Division**

Actions					
Issue	Current Actions	Timescale	Lead	Intended Outcome	Current Status
1. Section 117 leave arrangements					
a) review of both section 117 lists held in health and local Authority	Mental Health Act Manager and Local Authority Cardiff & Vale Manager and Mental Health Act Administration office in the UHB – to share current understanding of 117 lists.	January 2013	Mental Health Act Manager	Single electronic, Health and local authority, 117 aftercare list for use by the community services and for the purposes of internal audit.	Completed
b) Both Health & LA lists to be cleansed and a single list developed	Initially all service users on PARIS lists to be completed and agreed with the teams – following which all medical paper records in the Mental Health Act office and archives back to 1983 to be scrutinized	February 2013	Mental Health Act Manager & Mental Health Act Administrator	For all service users eligible to 117 aftercare since 1983 in C&V to be identified and appropriate actions taken	Completed
c) All clinical records in Mental Health Act office to be reviewed	For all paper records from 1983 to be scrutinized in order to identify all 117 eligible service users.	February 2013	Mental Health Act Administrator	Definitive central Cardiff and Vale 117 record.	Completed
d) Integrated managers to check lists in CMHT's back to 2006 against PARIS and identify any anomalies	Initial central PARIS 2006 list of 117 eligible service users forwarded to integrated managers in CMHTs to compare local and central lists. Where there are additional anomalies, for integrated managers to access senior decision making to review clinical course of action	March 2013	Head of Operations and Delivery	117 process post 2006 cleansed	Completed

	against individuals who have lost contact with services.				
e) Sec 117 flags to be put on PARIS system with review dates	Develop a process on PARIS where 117 eligible service users are flagged with a review date	July 2013 - Ongoing	Mental Health Act Manager & PARIS IT lead	Flagging process for 117 meetings electronically	117 flag present
f) Integrated managers to check lists in CMHT's back to 1983 against PARIS and identify any anomalies Any cases where action is unclear to be discussed with Clinical Director and Clinical Board Nurse	Process to be completed for all post 1983 service users, with all lists cleansed using the Welsh records for deaths etc where there are difficult to identify service users. Where allocation to teams is not clear from PARIS, to allocate for follow up action using last known address.	July 2013	Mental Health Act Manager & Mental Health Act Administrator	Centralized electronic 117 list dating from 1983 to be available for use in the teams and	Completed
g) To undertake routine audit on service compliance to 117.	Routinely request information from PARIS for those eligible for 117 aftercare who have not been reviewed in the last 12 months as is required as minimum. To audit 3 monthly adherence to 117 procedures for a sample group	3 monthly	Mental Health Act Administrator	3 monthly audit of compliance to regular reviews for those eligible as well as adherence to the 117 procedure.	Commenced
Issue	Current Actions	Timescale	Lead	Intended Outcome	Current Status
Internal Root Cause Analysis investigation to be undertaken	RCA completed June 2013	Immediate			
a) Appoint RCA investigation team	Appointed Consultant Psychiatrist (Low secure services) Consultant Clinical Psychologist - Forensic Adult Directorate Manager (RMN background)	Immediate	Clinical Board Nurse	Clinical team appointed with experience and knowledge	Completed

b) Terms of reference	Completed prior to appointment of RCA team	Immediate	Clinical Board Nurse		
c) Staff list	Completed prior to appointment of RCA team	Immediate	Clinical Board Nurse		
d) Chronology of events	Completed prior to appointment of RCA team	Immediate	Clinical Board Nurse		
Issue	Current Actions	Timescale	Lead	Intended outcome	Current Status
Psychosocial support for the communities affected by the major incident					
a) establish a Mental Health Multi-Agency team to follow up this incident	Establish Multi-agency group including the police, council, health, PTSD services	Immediately following incident	Head of Operations & Delivery	Establish a multi-agency group to allow appropriate follow up support for victims and witnesses of the incident, both citizens and staff.	Completed
b) Follow up	Convene a monthly meeting to ensure process in place to provide information and support to those needing it. This is completed through delivering information to direct victims and witnesses through the police, information to local GPs on accessing emergency and follow up support and information to CMHTs on triaging and treating victims/witnesses. Additional information set to local community premises in the Ely and Leckwith	6 month follow up period	Head of Operations & Delivery Consultant Clinical Psychologist – & PTSD therapist	For all victims of the incident, including witnesses, to receive timely support.	Completed

	areas. All information based on national evidence and standards				
c) Review	Final review meeting held to look at lessons learned and service uptake.	February 2013	Head of Operations & Delivery	Review of process indicated a well received response for the actions taken with take up from the PTSD service of a number of witnesses. Good feedback from the police and social services on the integrated process.	Completed
Issues relating to single clinician following RCA report					
a) Clinical Director to discuss RCA report with Medical Director	Telephone discussion with Medical Director following RCA report being shared	End of June 2013	Clinical Director & Medical Director	Discussion on what action to take	Completed
b) Meeting with Medical practitioner	Meeting convened with Medical practitioner, Medical Director (or nominated deputy) and Clinical Director to discuss RCA report and findings	July 10th 2013	Clinical Director & Medical Director or nominated deputy	Discussion re: RCA report and medical practitioner response and any follow up actions.	Complete
c) Feedback session to Consultants re: RCA report	Individual meetings to be convened with all Adult directorate Consultant Psychiatrists regarding the RCA report	July & August 2013	Clinical Director	Discussion regarding working practices and responsibilities/accountabilities	Completed
d) Follow up meeting with Medical Director	Following meeting with Consultants, follow up meeting to discuss outcomes with Medical Director	July 2013	Clinical Director, Medical Director, Clinical	Feedback and any further actions to be decided	

			Board Nurse		