

Assurance Review Update 22nd June 2017

Recommendation 13.1 - Sunbeam House Services (Target Date: 14th September 2017)

SHS MD or his delegated nominee should review (and where necessary amend) its complaints policy statement within six months, in consultation with all the stakeholders, and consider the extent to which;

- It is in line with the HSE Policy guidelines and Your Service Your Say
- The scope of the policy is clearly defined.
- The stages of the complaints process are defined including who is responsible at each stage.
- The transparent oversight role of the Organisational Complaints Lead is understood and separate from the operational service delivery.
- A transparent process for vexatious complaints is defined.
- The standard letters are modified to ensure that stage 3 and 4 of the complaints process are clearly communicated to the complainant.
- Formal terms are used consistently and described in an appendix to ensure maximum clarity.

Update Wednesday 22nd June 2017

- Organisational Complaints Lead has been moved from Managing Directors Office to Quality, Compliance & Training Senior Managers Team.
- Work has commenced on the review of the organisation's Complaints Policy.
- A principal lead & Project Lead met on Tuesday 23rd May 2017.
- Week 29.05.17 Principal lead has met with Client Service Managers (CSM) group to advise of review to Complaints process, purpose of Complaints Role and seek feedback from CSM group on any current issues.
- Week 29.05.17 Principal lead has met with ICT Team to identify changes and process for amending CID (Central Information Database).
- Meeting held to review draft revised policy with focus group of internal SHS staff members, 12.06.17.
- Cost associated with changes to CID identified.
- 'Introduction to Complaints' briefing to be provided at all refresher training in Safe Guarding & Protection, commencing 27th June 2017.
- Training programme on revised Complaints Policy & process for staff currently being scheduled, first training to take place on 14th August 2017.
- Independent review of Draft SHS Complaints by external party currently being examined.

Recommendation 13.2 - Sunbeam House Services (Target Date: as outlined in each action)

SHS MD or his delegated nominee should review (and where necessary amend) its Safety Incident Management Policy within 6 months ensuring that;

- Serious Reportable Events are defined, managed and communicated in line with HSE policy, within one month. Target Date: 14th April 2017
- There are clearly defined system wide processes to ensure there is assessment and learning from the aggregated analysis of reported incidents, within 6 months. Target Date: 14th September 2017
- The National Incident Management System (NIMS) is used throughout the service, by year end. Target Date; 31st December 2017

- The Organisation should review how they manage their Risk Registers to ensure they are compliant with HSE policy and adopt the HSE ICC (impact, cause, context) approach when describing risks to be included on the Risk Register. Target Date: 14th September 2017

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- Project Lead met with the principal lead on Tuesday 24th May 2017 to fully identify all required actions as part of this recommendation.
- The HSE were advised at IMR Meeting on 17th May 2017, that the organisation is having difficulty accessing NIMS due to challenges being experienced by the relevant HSE Section. The challenges are outlined in the document 'NIMS Access Timeline to date' and demonstrates that SHS have been involved in this process from March 2016. Access issues are now addressed. The support & assistance of the State Claims Agency is recognized by the executive is are being very important in reaching this final stage.
- Principal presented to Senior Management Team (SMT) on 6th June 2017 regarding CID changes and HSE Serious Incident Management Policy. SMT agreement that HSE serious incident management policy should be utilized and adapted to suit SHS environment.
- Project Lead currently in discussions to engage the external consultancy services in order carry out a full review of SHS current Adverse Events policy and practice and align same with HSE Serious Incident Management Policy & HSE Integrated Risk Management Policy. Meeting to be scheduled week 12th June 2017 to discuss scope of work further.

Recommendation 13.3 - Sunbeam House Services (Target Date: 14th June 2017)

SHS MD or his delegated nominee should prepare and implement an Open Disclosure Policy in line with the national policy. This should be incorporated into the incident reporting system within three months.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- Draft Open Disclosure Policy submitted to SHS Board for review at Board meeting on 15th June 2017. Board approval is being requested subject to clarity sought from SHS Insurance Company in relation to policy use.
- Draft Open Disclosure Policy submitted to HSE for review on 19th June 2017.

Recommendation 13.4 - Sunbeam House Services (Target Date: 14th June 2017)

SHS MD or his delegated nominee should prepare and implement a Protected Disclosure Policy within three months.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation. Project Lead will meet with the principal on 25th May 2017 to fully identify all required actions as part of this recommendation.
- Draft Protected Disclosure Policy submitted to SHS Board for review at Board meeting on 15th June 2017.
- Draft Protected Disclosure Policy submitted to HSE for review on 19th June 2017.

Recommendation 13.5 - Sunbeam House Services (Target Date: 14th April 2017 & 31st December 2017 respectively)

The safeguarding training provided across the service should be agreed by the HSE National Safeguarding Office within one month and where deficits in the current training are identified, refresher training should be provided by year end to all staff.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- To date 444 staff have completed SHS two day Safeguarding & Protection Training. This training does not at present include the HSE half day module and as such is not being accredited by the HSE. The Safeguarding & Protection Training Team have met to review the current training programme and this will now include the HSE half day module in addition to one and a half days training as per SHS current training process. SHS current training includes practical examples, discussions, use of CID, Trust In Care Policy review, Complaints Policy review in addition to other items. It is deemed very important for all staff. As such the new training module, will be two days in length as is current practice.
- SHS have identified three staff who have completed Designated Officer Training and are undertaking HSE Train the Trainer Course at present (12th June 2017). This will allow SHS to provide the HSE specific half day training module in Safeguarding & Protection from June 2017 onwards.
- Six dates for staff refresher training have been scheduled, all refresher training will include HSE module until all staff have completed same. All new staff will receive HSE module as part of SHS current two-day compulsory training in Safeguarding & Protection.
- It is anticipated that 140 staff will have received the HSE half day module in Safeguarding & Protection by year end, with the balance completed in quarter one of 2018.
- A/Quality, Compliance & Training Senior Manager and Social Work Team are currently review SHS Safeguarding & Protection Policy in order to align same with National Policy. This will be presented to the Board for final approval.
- ICT Team and Social Work Team are currently reviewing work flow on CID to align with National Policy.

Recommendation 13.6 - Sunbeam House Services (Target Date: 14th September 2017)

The role and operation of the Client Service Managers should be kept under management and peer review. A management development course/and training programme for the role of Person in Charge (PIC) would strengthen the role.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- A management development course, with specific focus on PIC, has been identified for all CSM's and Deputy CSM's. One CSM is currently undertaking this training with further role out scheduled for September 2017. Course will be run in two groups as follows;
Course 1 – Days one & two 6th & 7th September 2017, day three 13th October
Course 2 – Days one & two 13th & 14th September 2017, day three 17th October.
Training is being facilitated by Health Management Institute of Ireland (HMI)

- 9th June 2017 – meeting held with Principal and Training Coordinator to look at current CSM training and recording of same.
- Principal has established a Cluster Review Working Group which is scheduled to first meet on 26th June 2017. This will be the second cluster review process.
- Draft Policy for Communications with Families and Stakeholders under development.
- Values Based Training to be scheduled for all CSM's & Deputy CSM's

Recommendation 13.7 - Sunbeam House Service Board (Target Date: 14th April 2017)

The Board of Directors should re-establish the Quality Assurance & Audit Committee within one month.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- Principal advised HSE at IMR Meeting on 17th May 2017 that SHS Board have identified an Independent Chairperson for the Audit Committee.
- Principal advised HSE at IMR Meeting on 17th May 2017 of concern with regard to the sourcing of individuals to sit on the Quality Assurance Committee and Audit Committee. Help and advice in this matter was requested from the HSE.

Recommendation 13.8 - Sunbeam House Services Board (Target Date: 14th June 2017)

The Board of Directors should consider, within three months a review of the governance of Quality and Patient Safety to ensure there is a systems wide approach to learning and communication. The service might consider referring to the HSE Quality and Safety Committee, Guidance and Resource document 2016.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- Project Lead currently in discussions with external consultants with a view to providing assistance to SHS in the establishment of baseline data on key performance measures and the best practice process with which to analysis trends to quality, incidents and complaints management as per the functions of the Quality Assurance & Risk Committee. The development of a learning note process will also form part of this work.

Recommendation 13.9 - Sunbeam House Services Board (Target Date: 14th September 2017)

The Board should consider approaching the HSE with a view to requesting temporary additional external management support to augment the management structure, offering a challenge perspective and assisting with a thorough performance self-evaluation, in particular, of matters in this review as well as service quality issues identified by HIQA.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.
- HSE advised at IMR Meeting on 17th May 2017 that SHS are currently preparing a Job Description and Specification which will be submitted to the HSE for Review.

- Role to be advertised through Public Appointments Service.
- Draft job description submitted to HSE on 19th June 2017 for consideration.

Recommendation 13.10 - Sunbeam House Services Board (Target Date: 14th September 2017)

The Board of Directors should arrange a facilitated workshop to review the effectiveness, transparency and leadership of the Board specifically in relation to the strategic governance of Quality and Patient Safety.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.

Recommendation 13.11 - Sunbeam House Services Board (Target Date: 14th September 2017)

In the context of vacancies and role changes, every opportunity should be taken to strengthen the Board and ensure a distribution of roles and responsibilities which enables the promotion of suitable governance of checks and balances, support and challenge regarding the management of complaints and other matters covered by the review.

Update Wednesday 22nd June 2017;

- A principal lead has been appointed by SHS to this recommendation.

Recommendation 13.12 Health Service Executive (Target Date: 14th September 2017)

There is a need to review, define and resource service improvement arrangements including establishing a system of proportionate intervention.

Update Wednesday 22nd June 2017;

- It is noted that the following deliverable is under the remit of the HSE, however as the actions of the HSE impact on the Executive/Board of SHS a principal lead has been appointed in order to ensure that SHS undertakes the necessary steps to facilitate the implementation of the recommendations under the remit of the HSE. Principal will attend IMR meetings to fully identify all required actions as part of this recommendation that may impact on the Executive/Board of Sunbeam House Services. A clear detailed timeline for all actions requested by the HSE under this recommendation will be provided to the HSE at the following IMR meeting and will outline any anticipated challenges / support requirements.
 - No actions requested from Principal by HSE at IMR Meeting 18th May 2017.

Recommendation 13.13 Health Service Executive (Target Date: 14th September 2017)

The national HSE Social Care Office should review the case for merging Sunbeam House Services with other organisations to codify the benefits, outline the consequences and ensure effective communication of the business plan and associated timescales.

Update Wednesday 22nd June 2017;

- It is noted that the following deliverable is under the remit of the HSE, however as the actions of the HSE impact on the Executive/Board of SHS a principal lead has been appointed in order to ensure that SHS undertakes the necessary steps to facilitate the implementation of the recommendations under the remit of the HSE. Principal will attend IMR meetings to fully

identify all required actions as part of this recommendation that may impact on the Executive/Board of Sunbeam House Services. A clear detailed timeline for all actions requested by the HSE under this recommendation will be provided to the HSE at the following IMR meeting and will outline any anticipated challenges / support requirements.

- No actions requested from Principal by HSE at IMR Meeting 18th May 2017.

Recommendation 13.14 Health Service Executive (Target Date: 14th September 2017)

The Chief Officer or her delegated nominee should support SHS to establish and recognize the importance of consultation with families not least in the context of the Assisted Decision-Making legislation.

Update Wednesday 22nd June 2017;

- It is noted that the following deliverable is under the remit of the HSE, however as the actions of the HSE impact on the Executive/Board of SHS a principal lead has been appointed in order to ensure that SHS undertakes the necessary steps to facilitate the implementation of the recommendations under the remit of the HSE. Principal will attend IMR meetings to fully identify all required actions as part of this recommendation that may impact on the Executive/Board of Sunbeam House Services. A clear detailed timeline for all actions requested by the HSE under this recommendation will be provided to the HSE at the following IMR meeting and will outline any anticipated challenges / support requirements.
 - No actions requested from Principal by HSE at IMR Meeting 18th May 2017.

SHS have begun preparations for the commencement of the Assisted Decision Making (Capacity) Act 2015;

- Training provided to all Senior Managers, Client Service Managers and Deputy Client Service Managers on 18th & 19th May 2017.
- Information evening on Assisted Decision Making (Capacity) Act 2015 held in Bray for families on Wednesday 24th May 2017, 36 individuals in attendance.
- Further Information evenings on Assisted Decision Making (Capacity) Act 2015 being held in Arklow on Wednesday 5th July 2017 and in Wicklow on Monday 10th July 2017.
- Training for staff and information evenings being facilitated by external provider.

Recommendation 13.15 Health Service Executive (Target Date: 14th September 2017)

Prior to the release of the report the Chief Officer or her delegated nominee should identify a senior manager to liaise with the complainant families and to seek to repair the relationships and to do so against a specific timescale.

Update Wednesday 22nd June 2017;

- It is noted that the following deliverable is under the remit of the HSE, however as the actions of the HSE impact on the Executive/Board of SHS a principal lead has been appointed in order to ensure that SHS undertakes the necessary steps to facilitate the implementation of the recommendations under the remit of the HSE. Principal will attend IMR meetings to fully identify all required actions as part of this recommendation that may impact on the Executive/Board of Sunbeam House Services. A clear detailed timeline for all actions

requested by the HSE under this recommendation will be provided to the HSE at the following IMR meeting and will outline any anticipated challenges / support requirements.

- No actions requested from Principal by HSE at IMR Meeting 18th May 2017.

Recommendation 13.16 Health Service Executive (Target Date: 14th April 2017)

The Chief Officer or her delegated nominee should seek assurance that Serious Reportable Events are managed and communicated in line with National Policy within one month of the report being published

Update Wednesday 22nd June 2017;

- It is noted that the following deliverable is under the remit of the HSE, however as the actions of the HSE impact on the Executive/Board of SHS a principal lead has been appointed in order to ensure that SHS undertakes the necessary steps to facilitate the implementation of the recommendations under the remit of the HSE. Principal will attend IMR meetings to fully identify all required actions as part of this recommendation that may impact on the Executive/Board of Sunbeam House Services. A clear detailed timeline for all actions requested by the HSE under this recommendation will be provided to the HSE at the following IMR meeting and will outline any anticipated challenges / support requirements.
- No actions requested from Principal by HSE at IMR Meeting 18th May 2017.

Recommendation 13.17 Health Service Executive

The Chief Officer or her delegated nominee should ensure that the Quality & Safety component of the IMR meetings is strengthened to ensure any trends or flags are noted and monitored.

Update Wednesday 22nd June 2017;

- It is noted that the following deliverable is under the remit of the HSE, however as the actions of the HSE impact on the Executive/Board of SHS a principal lead has been appointed in order to ensure that SHS undertakes the necessary steps to facilitate the implementation of the recommendations under the remit of the HSE. Principal will attend IMR meetings to fully identify all required actions as part of this recommendation that may impact on the Executive/Board of Sunbeam House Services. A clear detailed timeline for all actions requested by the HSE under this recommendation will be provided to the HSE at the following IMR meeting and will outline any anticipated challenges / support requirements.
- No actions requested from Principal by HSE at IMR Meeting 18th May 2017.