

## Assurance Review Report 20<sup>th</sup> July 2017

### Recommendation 13.1 - Sunbeam House Services (Target Date: 14<sup>th</sup> 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 20<sup>th</sup> July 2017:

- ✦ Interim changes made to SHS Complaints Policy and approved at SHS Senior Management Team Meeting 11<sup>th</sup> July 2017. These interim changes reflect the movement of complaints from Managing Directors office to Quality, Compliance & Training Office. Location posters also updated to reflect changes.
- ✦ Complaints Officer Job Description submitted to HSE for consideration on 20<sup>th</sup> July 2017.
- ✦ Principal met with two members of SHS Service Users Forum to ask if they and the forum are willing to now take the draft easy to read version of complaints policy for review. Both agreed to review and also to ask their forum colleagues as well as KISS (Keep It Simple Sunbeam) client review group to also read and review the document. Two-week period of review was agreed, date for SUF & KISS to feedback to Principal agreed as 18<sup>th</sup> July.
- ✦ Final Draft Complaints Policy sent on 11<sup>th</sup> July 2017 to the following individuals / groups for consideration and comment;
  - SHS Families Group
  - Prosper Fingal Family Group
  - Inclusion Ireland
  - National Federation Voluntary Bodies
  - Leigh Gath - Confidential Recipient
  - HSE Consumer Affairs
  - External Independent Professional Review
  - Sunbeam House Services Staff Forum
  - Sunbeam House Services Client Service Managers

### **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: 14<sup>th</sup> 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: 14<sup>th</sup> September 2017
- The National Incident Management System (NIMS) is used throughout the service, by year end. Target Date; 31<sup>st</sup> 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: 14<sup>th</sup> September 2017

#### Update 20<sup>th</sup> July 2017;

- ✦ Currently awaiting proposal from external consultant in order carry out a full review of SHS current Adverse Events policy and practice and align same with HSE Series Incident Management Policy & HSE Integrated Risk Management Policy.
- ✦ NIMS now in use in SHS. Currently one staff member assigned on interim measure in order to establish extent of work involved in NIMS management.

### **Recommendation 13.3 - Sunbeam House Services (Target Date: 14<sup>th</sup> 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 20<sup>th</sup> July 2017;

- ✦ Draft Open Disclosure Policy submitted to HSE for review on 19<sup>th</sup> June 2017
- ✦ Issues relating to insurance query have been responded too. Further discussion required with HSE on how this matter can be progressed.

**Recommendation 13.4 - Sunbeam House Services (Target Date: 14<sup>th</sup> June 2017)**

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

Update 20th July 2017;

- ✦ Draft Protected Disclosure Policy submitted to SHS Board for review at Board meeting on 15<sup>th</sup> June 2017. Board did not have an opportunity to approve policy at June meeting.
- ✦ Draft Protected Disclosure Policy submitted to HSE for review on 19<sup>th</sup> June 2017.
- ✦ Draft Protected Disclosure Policy submitted to SHS Board for review at Board meeting in July 2017.
- ✦ 'Best practice' indicates that an external company should be engaged to act as the independent recipient under this policy. The organisation are currently looking at available options and the cost of same which will be presented to the HSE at the next IMR meeting.

**Recommendation 13.5 - Sunbeam House Services (Target Date: 14<sup>th</sup> April 2017 & 31<sup>st</sup> 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 20th July 2017;

- ✦ A/Quality, Compliance & Training Senior Manager and Social Work Team are currently reviewing SHS Safeguarding & Protection Policy to align same with National Policy. This will be presented to the Board for final approval at September 2017 Board Meeting. Sunbeam House Services are currently operating fully in line with National Policy.
- ✦ ICT Team and Social Work Team are currently reviewing work flow on CID to align with National Policy.
- ✦ To date 91 staff have completed the HSE Safeguarding & Protection element of SHS Safeguarding & Protection Training.

### **Recommendation 13.6 - Sunbeam House Services (Target Date: 14<sup>th</sup> 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 20th July 2017;

- ✦ 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 6<sup>th</sup> & 7<sup>th</sup> September 2017, day three 13<sup>th</sup> October Course 2 – Days one & two 13<sup>th</sup> & 14<sup>th</sup> September 2017, day three 17<sup>th</sup> October. Training is being facilitated by Health Management Institute of Ireland (HMI)
- ✦ Draft terms of reference have been established for internal SHS Cluster Review Group. First meeting took place on 26<sup>th</sup> June 2017. A questionnaire has been created which will be sent to all Client Service Managers' in order to gather information around their cluster groups. Next cluster review meeting set for 24th July 2017.
- ✦ Draft Policy for Communications with Families and Stakeholders has been reviewed by Senior Management Team. The elements of this policy will be included into the organisation's current 'Code of Conduct Policy'.

### **Recommendation 13.7 - Sunbeam House Service Board (Target Date: 14<sup>th</sup> April 2017)**

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

#### Update 20th July 2017;

- ✦ Boardmatch have produced a costed proposal for an initial Director recruitment that will include a search specifically for a candidate with service delivery/clinical experience. It is planned that this director will assist the staffing of the Quality and Risk Committee.
- ✦ The Chairman and the Company Secretary have undertaken further discussions with the newly appointed Chair of the Audit Committee concerning suitable external candidate to staff the Audit Committee.

### **Recommendation 13.8 - Sunbeam House Services Board (Target Date: 14<sup>th</sup> 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 20th July 2017;

- ✦ Project Lead currently in discussions to engage the services of external consultant in order to assist 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. Full costing and proposal awaited.

### **Recommendation 13.9 - Sunbeam House Services Board (Target Date: 14<sup>th</sup> 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 20th July 2017;

- ✦ Draft job description submitted to HSE on 19<sup>th</sup> June 2017 for consideration.
- ✦ Draft job description submitted to SHS Service Users Forum on 15<sup>th</sup> June 2017.
- ✦ Project Lead met with SHS Service Users Forum on 29<sup>th</sup> June 2017 to discuss this new role. The SUF have requested additional time to consider the job description and what they would like included / omitted from the current draft.
- ✦ Once feedback from the SUF has been received, the job description will be amended to include their feedback and issued to the 'Sunbeam Families Group' for consideration and resubmitted to HSE.

### **Recommendation 13.10 - Sunbeam House Services Board (Target Date: 14<sup>th</sup> 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 20th July 2017;

- ✦ Governance Ireland (GI) have supplied a quote and a programme for a Director training course. Training is planned on-site in SHS. GI can provide training in the 2nd week of Sept '17. Two other organisations also quoted for this work, however GI were deemed most suitable. Availability of directors now being established for the 2nd week in September.

### **Recommendation 13.11 - Sunbeam House Services Board (Target Date: 14<sup>th</sup> 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 20th July 2017;

- ✦ The Nominations Committee met with Inclusion Ireland, on 29th June 2017 to receive input in relation to the views of families regarding Director recruitment under the Action Plan.
- ✦ The Nominations Committee and Inclusion Ireland discussed the planned engagement of Boardmatch to manage and support the process of the recruitment. The SHS Nominations Committee then met with Boardmatch on 4th July 2017 to progress this matter. Based on these discussions and given their experience of such a process, Boardmatch have produced a costed proposal for an initial Director recruitment drive.
- ✦ 11<sup>th</sup> July 2017- the Company Secretary has forwarded this proposal to the Chief Officer CHO6 with a query in relation to procurement requirements for such services and HSE funding for additional costs involved given SHS current funding pressure.
- ✦ The Chairman of the Board and the Company Secretary met with SHS's solicitors to discuss queries that had concerning the drafting of the new constitution. The solicitors have been instructed to provide a draft as soon as possible.

### **Recommendation 13.12 Health Service Executive (Target Date: 14<sup>th</sup> September 2017)**

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

#### Update 20th July 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 22<sup>nd</sup> June 2017.

### **Recommendation 13.13 Health Service Executive (Target Date: 14<sup>th</sup> 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 20th July 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 22<sup>nd</sup> June 2017.

### **Recommendation 13.14 Health Service Executive (Target Date: 14<sup>th</sup> 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 20th July 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 22<sup>nd</sup> June 2017.

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

- Information evenings on Assisted Decision Making (Capacity) Act 2015 have been held in Bray on Wednesday 24<sup>th</sup> May 2017, Arklow on Wednesday 5<sup>th</sup> July 2017 and in Wicklow on Monday 10<sup>th</sup> July 2017. A total of 58 family members attended these sessions. These sessions in addition to training as outlined in previous updates have started the conversation on capacity among staff, service users and families.
- SHS are committed to working in collaboration with all stakeholders to ensure that this Act is fully supported.
- SHS Senior Management Team have approved a Business Plan under the SHS Programme Office which details how the organization will prepare for the implementation of the Act.

### **Recommendation 13.15 Health Service Executive (Target Date: 14<sup>th</sup> 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 20th July 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 22<sup>nd</sup> June 2017.

### **Recommendation 13.16 Health Service Executive (Target Date: 14<sup>th</sup> 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 20th July 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 22<sup>nd</sup> June 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 20th July 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 22<sup>nd</sup> June 2017.