

## Appendix 1

Update Date: W/C 08/01/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Update Date was inputted to the SIL (Column added 22/8/23)	Person(s) assigned	Status	Locations of Items / documents Notes to consider	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall  SIL meetings not held w/c 25/12/23 and w/c 01/01/2024	CQC Domain
<b>COMPLIANCE &amp; RISK</b>						
CR 13 Identify Corporate procedures and risk assessments through corporate IGG		LA from 12/12/23	Live	Files have been set up on the drive NC-IGG log	NC-IGG meeting arranged for 16/01/2024	safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC		TJ / SS	Live	It has been established that BHC is not backed up by NTSH HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	SS confirmed action plan has been devised and reviewed by CEO. TJ has suggested a meeting to review prior to implementing - Update 11/12 TJ to send dates. Update 18/12 - dates were not sent. SS to liaise with Admin to circulate dates. Update 8/1/24 - dates not sent TJ to circulate date this week.	safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	22/08/2023	AM / LA / TJ	Live	Clinical team have submitted action plans to TJ to include within the corporate plan	AM & LA have meeting planned to discuss MIP and how to take this forward. TJ asked to send corporate actions to AM & LA, following clinical teams actions sent in Aug/Sept - Update 04/12 TJ to complete. Update 11/12 - TJ has not completed, to complete by 22nd December 2023. Update 18/12 - not completed, TJ now absent Update 8/1/24 - TJ to complete by end of January 2024.	safe, effective, well led, responsive
CR 19 Review and update the Accident & Incident Policy	22/08/2023	LA from 13/11/23	Live	Incident form updated - LA V9	Update 8/1/24 comments received and circulated to trustee for ratification.	safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	29/08/2023	TJ / SS	Live		TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review Update 8/1 comments have been incorporated - TJ to finalise by 19/1	safe, effective, well led, responsive
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	29/08/2023	AM / LA / LH	Live		Review in January 2024 - Date circulated.	safe, effective, well led, responsive, caring
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	17/11/2023	SS / TJ	Live		4/11 TJ to provide list of contractors who have DBS and have been evidenced. Update 11/12 - TJ advised he doesn't have a list but has seen contractors cards. SS has drafted an email regarding DBS to be sent out to all contractors. Update 18/12 - SS advised the document is with CEO Update 8/1/24 - CoC procedure is within the H5SMS folder for complete review	
CR 24 Recovery plan as to actions that have been taken, actions that are ongoing, and additional actions that will be beneficial to increase occupancy of AIPU and CIPU	10/01/2024	LH / JE Oversight AM	Live			
<b>OPERATIONS</b>						
O 11 Review and update BHC Fire Procedure		TJ	Live	Fire Action Signs Zone maps instu Once the combined procedure has been signed - clinical services to place a copy in sign in folders	TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review Update 8/1 comments have been incorporated - TJ to finalise by 19/1	safe, effective, well led, responsive

O 16	Uniform board to be designed and displayed			AM	Live		LH and JE to obtain their uniforms as priority in order to progress with the board. Update 11/12 AM to confirm with LH & JE that their uniforms are ordered. Update 18/12 - uniforms have been ordered. LH to liaise with HS to ensure she has pictures of all uniforms. Update 8/1 - Photos being taken of all uniforms. HS to then draft the uniform board	responsive, well led, effective, safe, caring
O 18	Devise and implement responsibilities for locking up procedure / process	22/08/2023		TJ	Live		TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review. Update 8/1 comments have been incorporated - TJ to finalise by 19/1	responsive, well led, effective, safe
O 20	Relocate current archiving room	22/08/2023		TJ / SS	Live		Room C8 on Children's unit identified for archiving. TJ to follow up this week regarding contractor to remove items / cost as recent quote was deemed to high. Update 11/12 - TJ advised TPM visited last Friday - awaiting costs. Update 18/12 - SS to liaise with TPM for update. Update 8/1 - no costs received TJ to follow up	responsive, well led, effective, safe
O 21	Devised procedure for walkie talks	29/08/2023		TJ	Live		TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review. Update 8/1 comments have been incorporated - TJ to finalise by 19/1	responsive, well led, effective, safe
O 23	Revisit plan to reopen CPU flat	11/10/2023		TJ / SS	Review Jan 2024		SS has confirmed this can be removed internally by the operations team once the electrics have been disabled from the stair lift - this will be progressed in Jan 2024	responsive, well led, effective, safe, caring
O 24	Complete outstanding Medical Gasses Policy			TJ	Live		TJ aware and advised to complete by end of November. TJ has liaised with head of facilities at NTH for requirements. UPDATE 04/12/23: Awaiting further details of training from NTH - TJ will chase this week. Update 11/12 - policy will be circulated for comments by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review. Update 8/1 comments have been incorporated - TJ to finalise by 19/1	responsive, well led, effective, safe, caring
<b>TRAINING</b>								
T 14	Prepare for PSIRF			AM / LA	Live		SLT have PSIRF Plan. All staff assigned to complete level 1. AM LA completed level 2. AM & LA continue with Teams meetings every 2nd Wednesday with WH. PSIRF included in the incident policy Dec 2023	safe, effective, well led, responsive
<b>ESTATES &amp; FACILITIES</b>								
EF 14	Janitorial sink to be purchased and fitted on CPU	22/08/2023		TJ	Live 08/01/24		Janitorial sink has been purchased. To be fitted on CPU by end of Jan 2024 inline with IPC action plan.	
EF 16	Implement regular Health & Safety meetings	11/12/2023		SS / TJ	Live		Discussed at SIL meetings - H&S meetings to be implemented asap. Update 18/12 - These will be progressed in the NY following completion/sign off of the H&SMS. Update 8/1 meetings not arranged - SS to implement	
<b>QUALITY &amp; GOVERNANCE</b>								
QG 13	Information Governance / GDPR Policy	13/11/2023		LA from 13/11/23	Live		Update 8/1 - policy ratified by trustee and circulated for read and sign.	safe, effective, well led, responsive

<p><b>QG 15</b> Monitor actions following the completion of the Leadership Walkround</p>	<p>20/10/2023</p>	<p>AM / LA</p>	<p>Monitoring</p>	<p>Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log.</p>	<p>Actions following the walk rounds have been compiled on to one document and will be reviewed weekly following SIL meeting. Actions reviewed following SIL and updated accordingly. Update 18/12 - progress has been made with actions. Update 8/1 - walkround carried out 29/12 - progress being made. dates circulated for 2024.</p>	<p>safe, effective, well led, responsive</p>
<p><b>OTHER</b></p>						
<p><b>01</b> To ensure all outstanding policies are reviewed and updated as per policy log</p>	<p>11/12/2023</p>	<p>Clinical &amp; Corporate teams</p>	<p>CLOSED 8/1/24</p>	<p>Policy Log in place for clinical and corporate</p>	<p>Update 8/1 - policy list monitored through SLT and trustees - action closed due to progress made and monitoring in place.</p>	

Update Date: W/C 15/01/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Date action was imputed to the SIL (Column added 22/8/23)	Person(s) assigned	Status	Locations of Items / documents Notes to consider	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall	COC Domain
<b>COMPLIANCE &amp; RISK</b>						
CR 13 Identify Corporate procedures and risk assessments through corporate IGG		LA from 12/12/23	Live	Files have been set up on the vdrive NC:IGG log	NC-IGG meeting arranged for 16/01/2024	safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC.		TJ / SS	Live	It has been established that BHC is not backed up by NTSH HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	SS confirmed action plan has been devised and reviewed by CEO. TJ has suggested a meeting to review prior to implementing - Update 11/12 TJ to send dates. Update 18/12 - dates were not sent. SS to liaise with Admin to circulate dates. Update 8/1/24 - dates not sent TJ to circulate date this week. Update 15/1/24 - dates not sent TJ to circulate this week as final.	safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	22/08/2023	AM / LA / TJ	Live	Clinical team have submitted action plans to TJ to include within the corporate plan	AM & LA have meeting planned to discuss MIP and how to take this forward. TJ asked to send corporate actions to AM & LA, following clinical teams actions sent in Aug/Sept. - Update 04/12 TJ to complete. Update 11/12 - TJ has not completed, to complete by 22nd December 2023. Update 18/12 - not completed, TJ now absent Update 8/1/24 - TJ to complete by end of January 2024.	safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	29/08/2023	TJ / SS	Live		TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review Update 8/1/24 - TJ to finalise by 19/1	safe, effective, well led, responsive
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	29/08/2023	AM / LA / LH	Live		Date initially identified for review in January, however, this has been rescheduled to February 2024.	safe, effective, well led, responsive, caring
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	17/11/2023	SS / TJ	Live		4/11 TJ to provide list of contractors who have DBS and have been evidenced. Update 11/12 - TJ advised he doesn't have a list but has seen contractors cards. SS has drafted an email regarding DBS to be sent out to all contractors. Update 18/12 - SS advised the document is with CEO Update 8/1/24 - CoC procedure is within the H6SMS manual for complete review. Update 15/1/24 CEO to provide timescale as to when the review will be completed.	
CR 24 Recovery plan as to actions that have been taken, actions that are ongoing, and additional actions that will be beneficial to increase occupancy of AIPU and CIPU	10/01/2024	LH / JE Oversight AM	Live		Update 15/1/24 submitted by CIPU. AIPU to complete by 18/1/24	
<b>OPERATIONS</b>						
O 11 Review and update BHC Fire Procedure		TJ	Live	Fire Action Signs Zone maps in situ Once the combined procedure has been signed - clinical services to place a copy in folders	TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review Update 8/1/24 - TJ to finalise by 19/1	safe, effective, well led, responsive

O 16	Uniform board to be designed and displayed		AM	Live		LH and JE to obtain their uniforms as priority in order to progress with the board. Update 11/12 AM to confirm with LH & JE that their uniforms are ordered. Update 18/12 - uniforms have been ordered. LH to liaise with HS to ensure she has pictures of all uniforms Update 8/1 - Photos being taken of all uniforms. HS to then draft the uniform board <b>Update 15/1/24 delay on CM's uniforms being delivered</b>	responsive, well led, effective, safe, caring	
O 18	Devise and implement responsibilities for locking up procedure / process	22/08/2023	TJ	Live		TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review <b>Update 8/1 comments have been incorporated - TJ to finalise by 19/1</b>	responsive, well led, effective, safe	
O 20	Relocate current archiving room Identify a location for storage of shredding / confidential waste (COMPLETED)	22/08/2023	TJ / SS	Live	Cross shredders taken on of circulation along with shredding bags. Confidential waste disposal boxes now in place.	Room C8 on Children's unit identified for archiving. TJ to follow up this week regarding contractor to remove items / cost as recent quote was deemed to high. Update 11/12 - TJ advised TPM visited last Friday - awaiting costs. Update 18/12 - SS to liaise with TPM for update Update 8/1 - no costs received. TJ to follow up <b>Update 15/1/24 - TJ to follow up as unable to obtain last week</b>	responsive, well led, effective, safe	
O 21	Devised procedure for walkie talks Walkie Talks to be introduced as per revised fire procedure - COMPLETED	29/08/2023	TJ	Live	Walkie talks introduced, however, require a procedure.	TJ including comments received. Update 11/12 - TJ has not done this, to be completed by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review <b>Update 8/1 comments have been incorporated - TJ to finalise by 19/1</b>	responsive, well led, effective, safe	
O 23	Revisit plan to reopen CIPU flat	11/10/2023	TJ / SS	Review Jan 2024		SS has confirmed this can be removed internally by the operations team once the electrics have been disabled from the stair lift - this will be progressed in Jan 2024. <b>Update 15/1/24 TJ/SS to secure date with Harveys for electrics to be disabled on the stairlift.</b>	responsive, well led, effective, safe, caring	
O 24	Complete outstanding Medical Gasses Policy		TJ	Live		TJ aware and advised to complete by end of November. TJ has liaised with head of facilities at NTH for requirements. UPDATE 04/12/23: Awaiting further details of training from NTH - TJ will chase this week. Update 11/12 - policy will be circulated for comments by the end of this week. Update 18/12 - document circulated to EG, AM, LA for review <b>Update 8/1 comments have been incorporated - TJ to finalise by 19/1</b>	responsive, well led, effective, safe, caring	
<b>TRAINING</b>								
T 14	Prepare for PSIRF		AM / LA	Live	SLT have PSIRF Plan All staff assigned to complete level 1 AM LA completed level 2 AM & LA continue with Teams meetings every 2nd Wednesday with WH PSIRF included in the Incident policy Dec 2023	PSIRF included in draft incident policy. Feedback from ICB re SIRMS is this is currently not being rolled out at this time. Update 8/1 - CEO has completed level 2 <b>Update 15/1/24 AM &amp; LA have PSIRF workshop meetings 29/1/24 and 12/2/24 - will feedback following meeting on 29/1/24</b>	safe, effective, well led, responsive	
<b>ESTATES &amp; FACILITIES</b>								
EF 14	Janitorial sink to be purchased and fitted on CIPU	22/08/2023	TJ	Live 08/01/24		Janitorial sink has been purchased To be fitted on CIPU by end of Jan 2024 inline with IPC action plan. <b>Update 15/1/24 TJ advised the fitting will be delayed due to LTS</b>		

<p><b>EF 16</b> Implement regular Health &amp; Safety meetings</p>	<p>11/12/2023</p>	<p>SS / TJ</p>	<p>Live</p>	<p>Discussed at SIL meeting - H&amp;S meetings to be implemented asap Update 18/12 - These will be progressed in the NY following completion/sign off of the H&amp;SMS Update 8/1 - meetings not arranged - SS to implement Update 15/12/24 update - meetings not arranged. TJ advised meeting agenda can not be formalised until the H&amp;SMS manual is approved - CEO to finalise review.</p>
<p><b>QUALITY &amp; GOVERNANCE</b></p>				
<p><b>QG 15</b> Monitor actions following the completion of the Leadership Walkround</p>	<p>20/10/2023</p>	<p>AM / LA</p>	<p>Monitoring</p>	<p>Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log.</p> <p>Actions following the walk rounds have been compiled on to one document and will be reviewed weekly following SIL meeting. Actions reviewed following SIL and updated accordingly. Update 18/12 - progress has been made with actions. Update 8/1 - walkround carried out 29/12 - progress being made. Dates circulated for 2024. Update 15/12/24 next walkround 17/12/24. Actions to be reviewed at the end of each month following SIL meeting.</p> <p>safe, effective, well led, responsive</p>

Update Date: W/C 22/01/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall	Locations of Items / documents Notes to consider	Status	Person(s) assigned	Date action was inputted to the SIL (Column added 22/8/23)	CR / O	CQC Domain
<b>COMPLIANCE &amp; RISK</b>							
CR 13 Identify Corporate procedures and risk assessments through corporate IGG	Update 22/1/24 NC-IGG meeting held 16/01/2024. Inc. gen. ops. EdF, Finance, Retail all asked to search vdrive and folders and place procedures in the files set up. Governance process set for reviewing and identifying any procedures - shared and agreed with group. Flow chart provided to the group. Further dates set.	Files have been set up on the vdrive NC-IGG log Flow chart of work - timescales.	Live	LA from 12/12/23			safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC.	Update 22/1/24 - Meeting held and action plan devised by TJ/SS reviewed and discussed alongside the plan devised by clinical services. Couple of areas to check: aid call, catering support from NTH.	It has been established that BHC is not backed up by NTEH HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	Live	TJ/SS			safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	Update 8/1/24 - TJ to complete by end of January 2024. Update 22/1/24 - TJ has not commenced, advised by CEO to commence. Draft MIP provided as hard copy.	Clinical team have submitted action plans to TJ to include within the corporate plan	Live	AM / LA / TJ	22/08/2023		safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	Update 22/1/24 - policy in final draft stage, with CEO - to send to trustees for ratification		Live	TJ/SS	29/08/2023		safe, effective, well led, responsive, caring
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	Date initially identified for review in January, however, this has been rescheduled to February 2024.		Live	AM / LA / LH	29/08/2023		
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	Update 22/1/24 - Control of contractors has been reviewed by CEO but further / final review is required. This procedure is to be removed initially for the short term from the HDSMS.		Live	SS / TJ	17/11/2023		
CR 24 Recovery plan as to actions that have been taken, actions that are ongoing, and additional actions that will be beneficial to increase occupancy of AIPU and GIPU	Update 22/1/24 - recovery plans for both services with DoC.		CLOSED 22/1/24	LH / JE Oversight AM	10/01/2024		
<b>OPERATIONS</b>							
O 11 Review and update BHC Fire Procedure	Update 22/1/24 - final draft with CEO.	Fire Action Signs Zone maps in situ Once the combined procedure has been signed - clinical services to place a copy in sign in folders	Live	TJ			safe, effective, well led, responsive
O 16 Uniform board to be designed and displayed	Update 22/1/24 - delay on CL's uniforms exceeded initial due date. JE to make contact with the company.		Live	AM			responsive, well led, effective, safe, caring
O 18 Devise and implement responsibilities for locking up procedure / process	Update 22/1/24 - with CEO for sign off		Live	TJ	22/08/2023		responsive, well led, effective, safe
O 20 Relocate current archiving room identify a location for storage of shredding / confidential waste (COMPLETED)	Update 22/1/24 - ongoing discussions with finance as the company identified to clear room are not in agreement with proposed payment dates. TJ to follow up	Cross shredders taken out of circulation along with shredding bags. Confidential waste disposal boxes now in place. Room C8 identified as new archiving room but needs cleaning	Live	TJ/SS	22/08/2023		responsive, well led, effective, safe
O 21 Devised procedure for walkie talkies	Update 22/1/24 - with CEO for sign off. AM has requested that staff are required to familiarise themselves with the walkie talkies.	Walkie talkies introduced, however, require a procedure.	Live	TJ	29/08/2023		responsive, well led, effective, safe

O 23	Revisit plan to reopen CIPU flat	11/10/2023	TJ / SS	Live 8/1/24		Update 22/1/24 - SS to secure a date with Harveys to disable electrics. In the meantime, TJ/SS to place yellow and black tape around the stairlift and identify out of use.  Update 22/1/24 - Outstanding. TJ to complete by Friday 26th Jan	responsive, well led, effective, safe, caring
O 24	Complete outstanding Medical Gases Policy		TJ	Live			responsive, well led, effective, safe, caring
<b>TRAINING</b>							
T 14	Prepare for PSIRF		AM / LA	Live		All clinical facing staff assigned to complete level 1 AM LA EG completed level 2 AM & LA continue with Teams meetings every 2nd Wednesday with WH PSIRF included in the incident policy Dec.2023	safe, effective, well led, responsive
<b>ESTATES &amp; FACILITIES</b>							
EF 14	Janitorial sink to be purchased and fitted on CIPU	22/08/2023	TJ	Live 08/01/24		Sink purchased Part of IPC plan	
EF 16	Implement regular Health & Safety meetings	11/12/2023	SS / TJ	ON HOLD from 22/1/24		Update 22/1/24 - placed on hold until the H&SMS manual has been signed off.	
<b>QUALITY &amp; GOVERNANCE</b>							
QG 15	Monitor actions following the completion of the Leadership Walkround	20/10/2023	AM / LA	Monitoring		Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log. Dates for 2024 circulated	safe, effective, well led, responsive

Update Date: W/C 29/01/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Date action was inputted to the SIL (Column added 22/8/23)	Person(s) assigned	Status	Locations of Items / documents Notes to consider	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall	CQC Domain
<b>COMPLIANCE &amp; RISK</b>						
CR 13 Identify Corporate procedures and risk assessments through corporate IGG		LA from 12/12/23	Live	Files have been set up on the vdrive NC-IGG log Flow chart of work - timescales.	Dates set for further meetings	safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC.		TJ / SS	Live	It has been established that BHC is not backed up by NTEH HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	minor amendments required by JE & LH	safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	22/08/2023	AM / LA / TJ	Live	Clinical team have submitted action plans to TJ to include within the corporate plan	No update provided	safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	29/08/2023	TJ / SS	Live		Final with CEO - to be sent to trustees for comment	safe, effective, well led, responsive
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	29/08/2023	AM / LA / LH	Live		Date initially identified for review in January, however, this has been rescheduled to February 2024.	safe, effective, well led, responsive, caring
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	17/11/2023	SS / TJ	Live		Control of contractors with CEO	
<b>OPERATIONS</b>						
O 11 Review and update BHC Fire Procedure		TJ	Live	Fire Action Signs Zone maps institu Once the combined procedure has been signed - clinical services to place a copy in sign in folders	final draft with CEO.	safe, effective, well led, responsive
O 16 Uniform board to be designed and displayed		AM	Live		JE to make contact with the company this week as PO now located	responsive, well led, effective, safe, caring
O 18 Devise and implement responsibilities for locking up procedure / process	22/08/2023	TJ	Live		with CEO for sign off	responsive, well led, effective, safe
O 20 Relocate current archiving room Identify a location for storage of shredding / confidential waste (COMPLETED)	22/08/2023	TJ / SS	Live	Cross shredders taken out of circulation along with shredding bags. Confidential waste disposal boxes now in place. Room C8 identified as new archiving room but needs clearing	Costs received - TJ to update	responsive, well led, effective, safe
O 21 Devised procedure for walkie talkies	29/08/2023	TJ	Live	Walkie talkies introduced, however, require a procedure.	with CEO for sign off.	responsive, well led, effective, safe
O 23 Revisit plan to reopen CIPU flat	11/10/2023	TJ / SS	Live 8/1/24		Stair lift electrics isolated and stair lift removed.	responsive, well led, effective, safe, caring
O 24 Complete outstanding Medical Gases Policy		TJ	Live		With CEO	responsive, well led, effective, safe, caring
<b>TRAINING</b>						
T 14 Prepare for PSIRF		AM / LA	Live	All clinical facing staff assigned to complete level 1 AM LA EG completed level 2 AM & LA continue with Teams meetings every 2nd Wednesday with WH PSIRF included in the Incident policy Dec 2023	AM & LA have PSIRF workshop meetings 29/1/24 and 12/2/24 - will feedback following meeting on 29/1/24	safe, effective, well led, responsive
<b>ESTATES &amp; FACILITIES</b>						

EF 14 Janitorial sink to be purchased and fitted on CIPU	22/08/2023	TJ	Live 08/01/24	Sink purchased Part of IPC plan	Contractor identified - JE to liaise with SS re dates of no admissions on CIPU in order to complete work.	
EF 16 Implement regular Health & Safety meetings	11/12/2023	SS / TJ	ON HOLD from 22/1/24		Update 22/1/24 - placed on hold until the H&SMS manual has been signed off.	
<b>QG 15 QUALITY &amp; GOVERNANCE</b>						
QG 15 Monitor actions following the completion of the Leadership Walkround	20/10/2023	AM / LA	Monitoring	Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log. Dates for 2024 circulated	Actions reviewed - AM to update log	safe, effective, well led, responsive

Update Date: W/C 05/02/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Date action was inputted to the SIL (Column added 22/8/23)	Person(s) assigned	Status	Locations of Items / documents Notes to consider	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall	CQC Domain
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CR 13 Identify Corporate procedures and risk assessments through corporate IGG		LA from 12/12/23	Live	Files have been set up on the website NC-IGG log Flow chart of work - timescales.	Dates set for further meetings - next meeting 13th Feb	safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC.		TJ / SS	Live	It has been established that BHC is not backed up by NT&H HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	minor amendments required by JE & LH - update 05/02/24 amendments not made - LH & JE to complete by Friday this week. Upon circulation, hard copy to be printed for AM	safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	22/08/2023	AM / LA / TJ	Live	Clinical team have submitted action plans to TJ to include within the corporate plan	Update 05/02/24 - SS confirms he has possibly disposed of the hard copy of draft MIP provided to him at the SIL. LA to resend. TJ & SS to combine for corporate services.	safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	29/08/2023	TJ / SS	Live		Final with CEO	safe, effective, well led, responsive
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	29/08/2023	AM / LA / LH	Live		Date initially identified for review in January, however, this has been rescheduled to February 2024.	safe, effective, well led, responsive, caring
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	17/11/2023	SS / TJ	Live		Control of contractors with CEO	
<b>OPERATIONS</b>						
O 11 Review and update BHC Fire Procedure		TJ	Live	Fire Action Signs Zone maps in situ <b>Once the combined procedure has been signed - clinical services to place a copy in sign in folders</b>	final draft with CEO.	safe, effective, well led, responsive
O 16 Uniform board to be designed and displayed		AM	Live		Update 05/02/23 JE & LH in receipt of uniforms - LH to liaise with HS regard final draft of the uniform board this week.	responsive, well led, effective, safe, caring
O 18 Devise and implement responsibilities for locking up procedure / process	22/08/2023	TJ	Live		with CEO for sign off	responsive, well led, effective, safe
O 20 Relocate current archiving room Identify a location for storage of shredding / confidential waste (COMPLETED)	22/08/2023	TJ / SS	Live	Cross shredders taken out of circulation along with shredding bags. Confidential waste disposal boxes now in place. Room CB identified as new archiving room but needs clearing	Costs received - TJ to update. Update 05/02/24 - discussions held around priority as a request was made for this action to go on hold. Unable to accept this due to risk to data security TJ has identified this action will be completed by the end of March 2024.	responsive, well led, effective, safe
O 21 Devised procedure for walkie talkies	29/08/2023	TJ	Live	Walkie talkies introduced, however, require a procedure.	with CEO for sign off. Update 5/2/24 - TJ identified this is guidance not a procedure.	responsive, well led, effective, safe
O 23 Revisit plan to reopen CIPU flat	11/10/2023	TJ / SS	Live 8/1/24		Update 05/2/24 stair lift has been fully removed. SS & TJ asked to review current fire procedure due to the comments following the inspection report.	responsive, well led, effective, safe, caring
O 24 Complete outstanding Medical Gasses Policy		TJ	Live		With CEO. Update 05/2/24 TJ has now contacted vivis to see if we can obtain a contract with them for out of hours. Policy remains in draft.	responsive, well led, effective, safe, caring
<b>TRAINING</b>						

T 14 Prepare for PSIRF		AM / LA	Live	All clinical facing staff assigned to complete level 1. AM LA EG completed level 2 AM & LA continue with Teams meetings every 2nd Wednesday with WH PSIRF included in the Incident policy Dec. 2023	Update 05/02/24 PSIRF workshop attended last week - further meeting next week. Initial guidance was that as a provider we do not require a full PSIRF plan, however, this may have changed. Work to continue within the hospice group.	safe, effective, well led, responsive
<b>ESTATES &amp; FACILITIES</b>						
EF 14 Janitorial sink to be purchased and fitted on CIPU	22/08/2023	TJ	Live 08/01/24	Sink purchased Part of IPC plan	Update 5/7/24 SS to contact TMS for a date for fitting sink.	
EF 16 Implement regular Health & Safety meetings	11/02/2023	SS / TJ	ON HOLD from 22/1/24		Update 22/1/24 - placed on hold until the HESMS manual has been signed off.	
<b>QUALITY &amp; GOVERNANCE</b>						
QG 15 Monitor actions following the completion of the Leadership Walkround	20/10/2023	AM / LA	Monitoring	Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log. Dates for 2024 circulated	Actions reviewed - log updated. Review end of Feb	safe, effective, well led, responsive

Update Date: W/C 12/02/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Date action was inputted to the SIL (Column added 22/8/23)	Person(s) assigned	Status	Locations of items / documents Notes to consider	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall	CQC Domain
<b>COMPLIANCE &amp; RISK</b>						
CR 13 Identify Corporate procedures and risk assessments through corporate IGG		LA from 12/12/23	Live	Files have been set up on the vdrive NICIGG log Flow chart of work - timescales.	Dates set for further meetings - next meeting 13th Feb	safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC.		TJ / SS	Live	It has been established that BHC is not backed up by NITBH HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	Amendments made by LH & JE and circulated	safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	22/08/2023	AM / LA / TJ	Live	Clinical team have submitted action plans to TJ to include within the corporate plan	draft MIP resent to SS for reference. SS & TJ to compile combined draft	safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	29/08/2023	TJ / SS	Live		With CEO need to include CIPU flat within the policy	safe, effective, well led, responsive
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	29/08/2023	AM / LA / LH	Live		Date initially identified for review in January, however, this has been rescheduled to February 2024.	safe, effective, well led, responsive, caring
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	17/11/2023	SS / TJ	Live		Control of contractors with CEO	
<b>OPERATIONS</b>						
O 11 Review and update BHC Fire Procedure		TJ	Live	Fire Action Signs Zone maps instu Once the combined procedure has been signed - clinical services to place a copy in sign in folders	Signed by CEO. Final with LA to upload to vdrive	safe, effective, well led, responsive
O 16 Uniform board to be designed and displayed		AM	Live		AM to follow up with HS.	responsive, well led, effective, safe, caring
O 18 Devise and implement responsibilities for locking up procedure / process	22/08/2023	TJ	Live		Signed by CEO. Final with LA to upload to vdrive	responsive, well led, effective, safe
O 20 Relocate current archiving room to stationary room Updated action 12/2/24	22/08/2023	TJ / SS	Live	Cross shredders taken out of circulation along with shredding bags. Confidential waste disposal boxes now in place. Room CB identified as new archiving room but needs clearing	Due to costs involved and concerns from CIPU the suggestion for the archiving room to be on CIPU has been closed. The group identified & discussed the stationary cupboard in the education room to be used for archiving - this has been agreed. SS to arrange skip & liaise with retail for any possible items within the cupboard which may be sold.	responsive, well led, effective, safe
O 21 Devised procedure for walkie talkies	29/08/2023	TJ	Live	Walkie talkies introduced, however, require a procedure.	Signed by CEO. Final with LA to upload to vdrive	responsive, well led, effective, safe
O 23 Revisit plan to reopen CIPU flat	11/10/2023	TJ / SS	Live 8/1/24		SS to check date of last fire inspection and arrange further.	responsive, well led, effective, safe, caring
O 24 Complete outstanding Medical Gasses Policy		TJ	Live		With CEO. Update 05/2/24 TJ has now contacted vivisol to see if we can obtain a contract with them for out of hours. Policy remains in draft.	responsive, well led, effective, safe, caring
<b>TRAINING</b>						

T 14 Prepare for PSIRF			AM / LA	Live	All clinical facing staff assigned to complete level 1 AM LA EG completed level 2 AM & LA continue with Teams meetings every 2nd Wednesday with VHM PSIRF included in the Incident policy Dec 2023	To update following meeting 12/27/24 13:30 pm	safe, effective, well led, responsive
<b>ESTATES &amp; FACILITIES</b>							
EF 14 Janitorial sink to be purchased and fitted on CIPU	22/08/2023	TJ		Live 08/01/24	Sink purchased Part of IPC plan	SS to follow up costing	
EF 16 Implement regular Health & Safety meetings	11/12/2023	SS / TJ		ON HOLD from 22/1/24		Update 22/7/24 - placed on hold until the HSSMS manual has been signed off.	
<b>QUALITY &amp; GOVERNANCE</b>							
QG 15 Monitor actions following the completion of the Leadership Walkround	20/10/2023	AM / LA		Monitoring	Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log. Dates for 2024 circulated	Actions reviewed - log updated. Review end of Feb	safe, effective, well led, responsive

Update Date: W/C 26/02/2024 GREY - TBA when appropriate ORANGE - Update required RED - Requires attention / urgent GREEN - Completed / Closed	Date action was inputted to the SIL (Column added 22/8/23)	Person(s) assigned	Status	Locations of items / documents Notes to consider	Weekly Outcome and Updates Live / Ongoing Review following Walk the Wall	CQC Domain
<b>COMPLIANCE &amp; RISK</b>						
CR 13 Identify Corporate procedures and risk assessments through corporate IGG		LA from 12/12/23	CLOSED 26/2/24	Files have been set up on the drive NC:IGG log Flow chart of work - timescales.	NC:IGG is underway although in its infancy. Focus is procedures for retail, ops, estates, facilities, income generation and finance. All monitored the SIL. CEO and DoC agreed for action to be closed on the SIL	safe, effective, well led, responsive
CR 15 Action plan required should there be a power cut at BHC.		TJ / SS	CLOSED 26/2/24	It has been established that BHC is not backed up by NTEH HNS as initially informed. To be part of MIP once initial short term action plan has been devised.	Amendments made by LH & JE which are to be discussed at next CI:GG then to be noted at SIL. Following this, the action plan will be circulated to the management team to implement.	safe, effective, well led, responsive
CR 18 In line with the BCP - devise and implement and Major Incident Plan (MIP)	22/08/2023	AM / LA / TJ	Live	Clinical team have submitted action plans to TJ to include within the corporate plan	draft MIP resent to SS for reference. SS & TJ to compile combined draft. No update provided at SIL meeting - TJ to follow up this week.	safe, effective, well led, responsive
CR 21 Fire Policy to be reviewed following the revised Fire Procedure	29/08/2023	TJ / SS	Live		Fire policy sent to trustees for ratification	safe, effective, well led, responsive
CR 22 Review Short Term Service Model Operations to ensure milestones have been met	29/08/2023	AM / LA / LH	CLOSED 26/2/24		Meeting arranged for 27/2/24 and ongoing monitoring of this will continue with the group. Closed on the SIL	safe, effective, well led, responsive, caring
CR 23 Operations Team to devise and implement a Control of Contractors Procedure / policy	17/11/2023	SS / TJ	Live		Control of contractors with CEO	
<b>OPERATIONS</b>						
O 11 Review and update BHC Fire Procedure		TJ	CLOSED 26/2/24	Fire Action Signs Zone maps instu Once the combined procedure has been signed - clinical services to place a copy in sign in folders	uploaded to drive. Closed on SIL	safe, effective, well led, responsive
O 16 Uniform board to be designed and displayed		AM	CLOSED 26/2/24		Uniform board is in its final stages. Closed on SIL	responsive, well led, effective, safe, caring
O 18 Devise and implement responsibilities for locking up procedure / process	22/08/2023	TJ	CLOSED 26/2/24		uploaded to drive. Closed on SIL	responsive, well led, effective, safe
O 20 Relocate current archiving room to stationary room Updated action 12/2/24	22/08/2023	TJ / SS	Live	Cross shredders taken out of circulation along with shredding bags. Confidential waste disposal boxes now in place. Room CB identified as new archiving room but needs clearing	Skip has been purchased. TJ to communicate via email to the management team to obtain any items from the cupboard.	responsive, well led, effective, safe
O 21 Devised procedure for walkie talkies	29/08/2023	TJ	CLOSED 26/2/24	Walkie talkies introduced, however, require a procedure.	uploaded to drive. Closed on SIL	responsive, well led, effective, safe
O 23 Revisit plan to reopen CIPU flat	11/10/2023	TJ / SS	CLOSED 26/2/24		Wooleys have confirmed that there is no requirement to undertake a further inspection until Feb 2025. Flat is now re-open for use. Closed on SIL	responsive, well led, effective, safe, caring
O 24 Complete outstanding Medical Gasses Policy		TJ	Live		Remains in draft	responsive, well led, effective, safe, caring
<b>TRAINING</b>						

<p><b>T 14</b> Prepare for PSIRF</p>	<p>AM / LA</p>	<p>CLOSED 26/2/24</p>	<p>All clinical facing staff assigned to complete level 1 AM LA EG completed level 2 AM &amp; LA continue with Teams meetings every 2nd Wednesday with WH PSIRF included in the incident policy Dec 2023</p>	<p>Preparations have been completed however this is now an ongoing process. AM &amp; LA continue to attend the working group with all local hospices and in conjunction with WH at NTBH NHS Trust. Closed on SIL.</p>	<p>safe, effective, well led, responsive</p>
<p><b>ESTATES &amp; FACILITIES</b></p>					
<p><b>EF 14</b> Janitorial sink to be purchased and fitted on CIPU</p>	<p>TJ</p>	<p>Live 08/01/24</p>	<p>22/08/2023</p>	<p>Sink purchased Part of IPC plan</p>	<p>TJ has confirmed at the SIL meeting that this piece of work can be completed by in-house maintenance.</p>
<p><b>EF 16</b> Implement regular Health &amp; Safety meetings</p>	<p>SS / TJ</p>	<p>Live</p>	<p>11/12/2023</p>		<p>Will commence once the H&amp;SMS manual is implemented. This also remains open on the risk register</p>
<p><b>QUALITY &amp; GOVERNANCE</b></p>					
<p><b>QG 15</b> Monitor actions following the completion of the Leadership Walkround</p>	<p>AM / LA</p>	<p>CLOSED 26/2/24</p>	<p>20/10/2023</p>	<p>Monitoring of any actions identified during the leadership walkround. Leadership walkround outcomes reported monthly on the audit log. Dates for 2024 circulated</p>	<p>Outcomes of the walkrounds are monitored as part of the audit planner which is noted by SLT. Removed from SIL as this was only identified as monitoring only.</p>
<p>safe, effective, well led, responsive</p>					