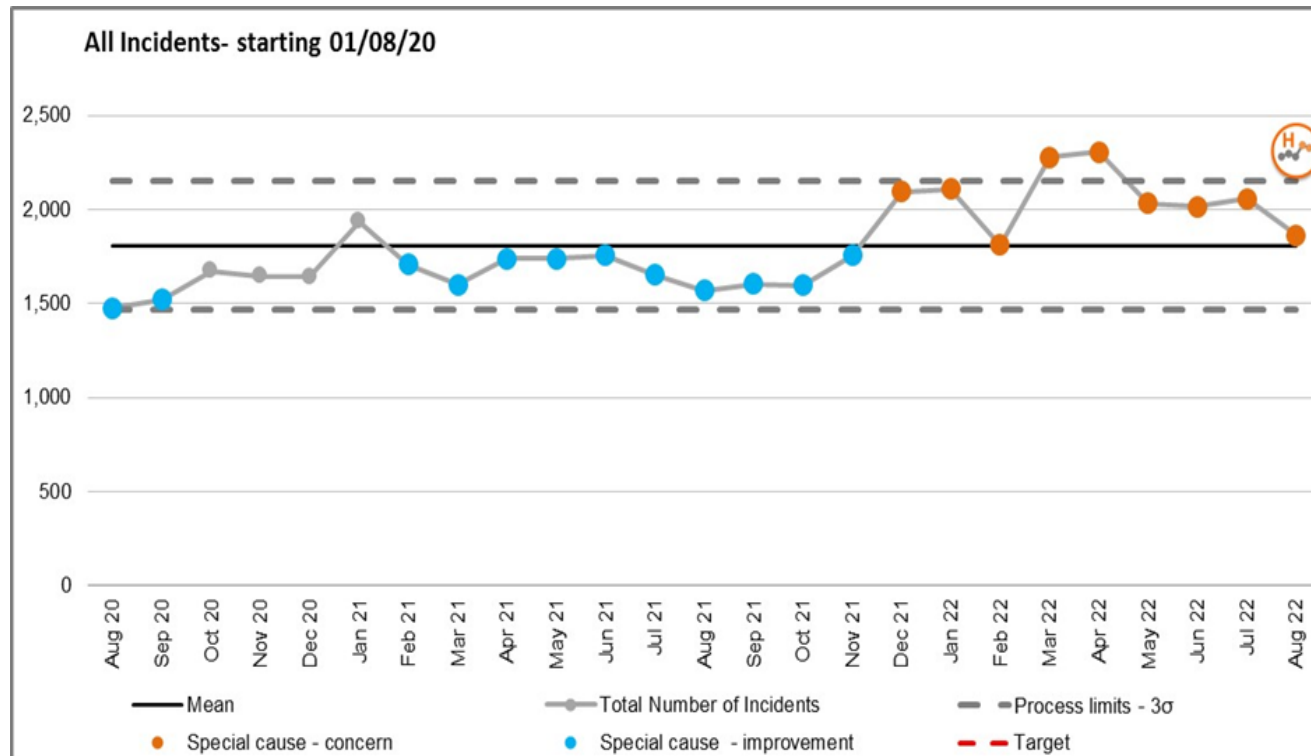


# Appendix 1

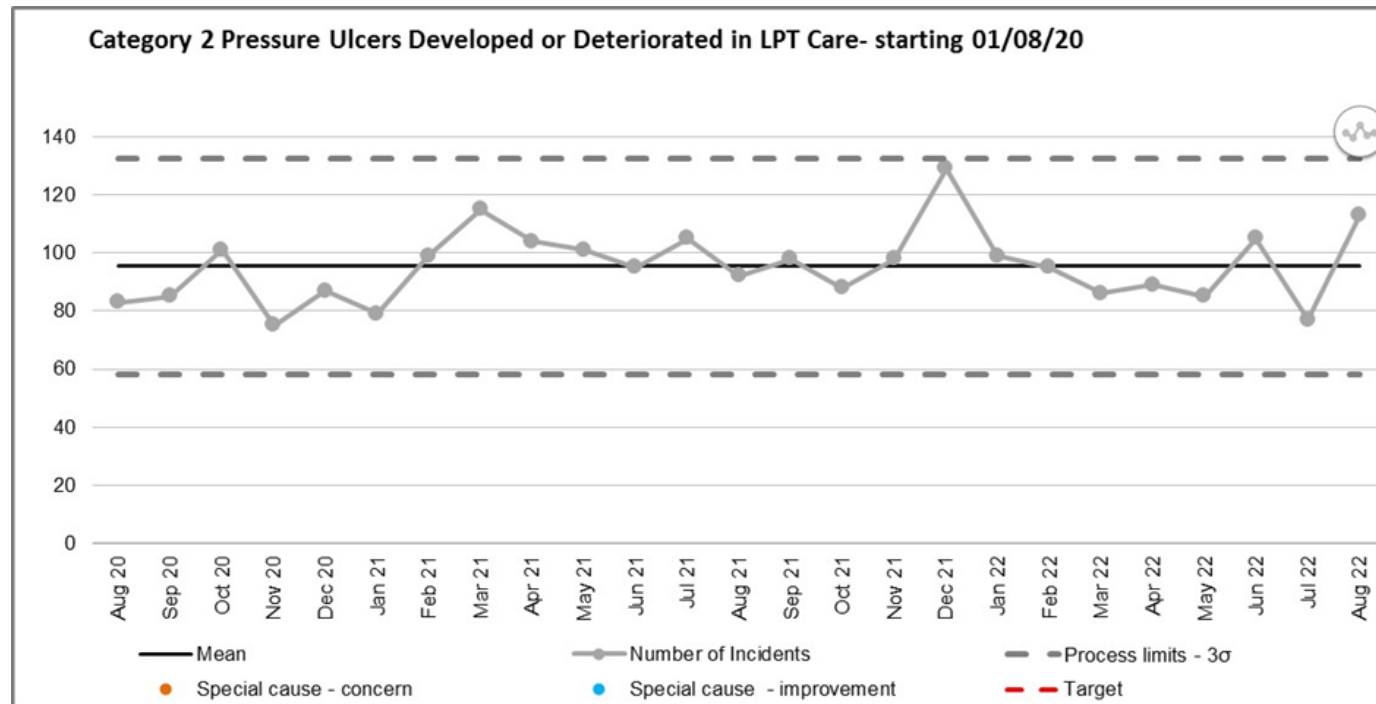
The following slides show Statistical Process Charts of incidents that have been reported by our staff during July & Aug 2022

Any detail that requires further clarity please contact the Corporate Patient Safety Team

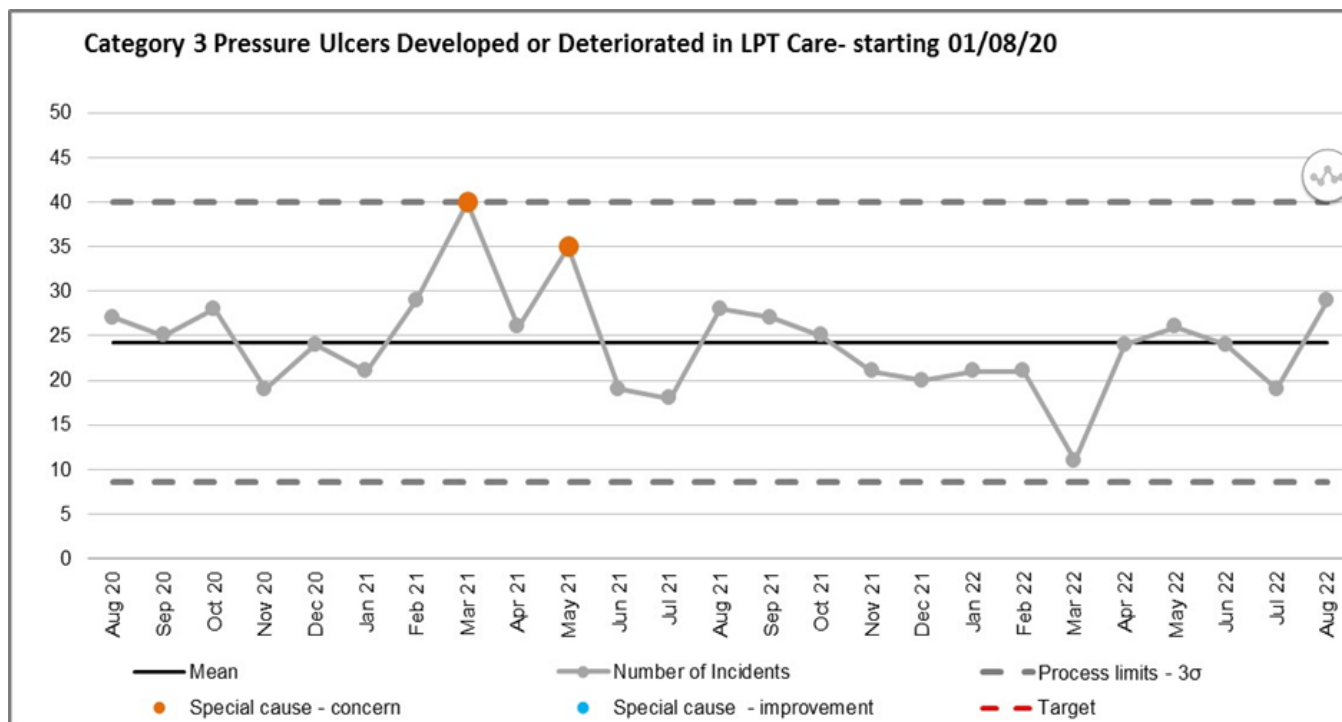
# 1. All incidents



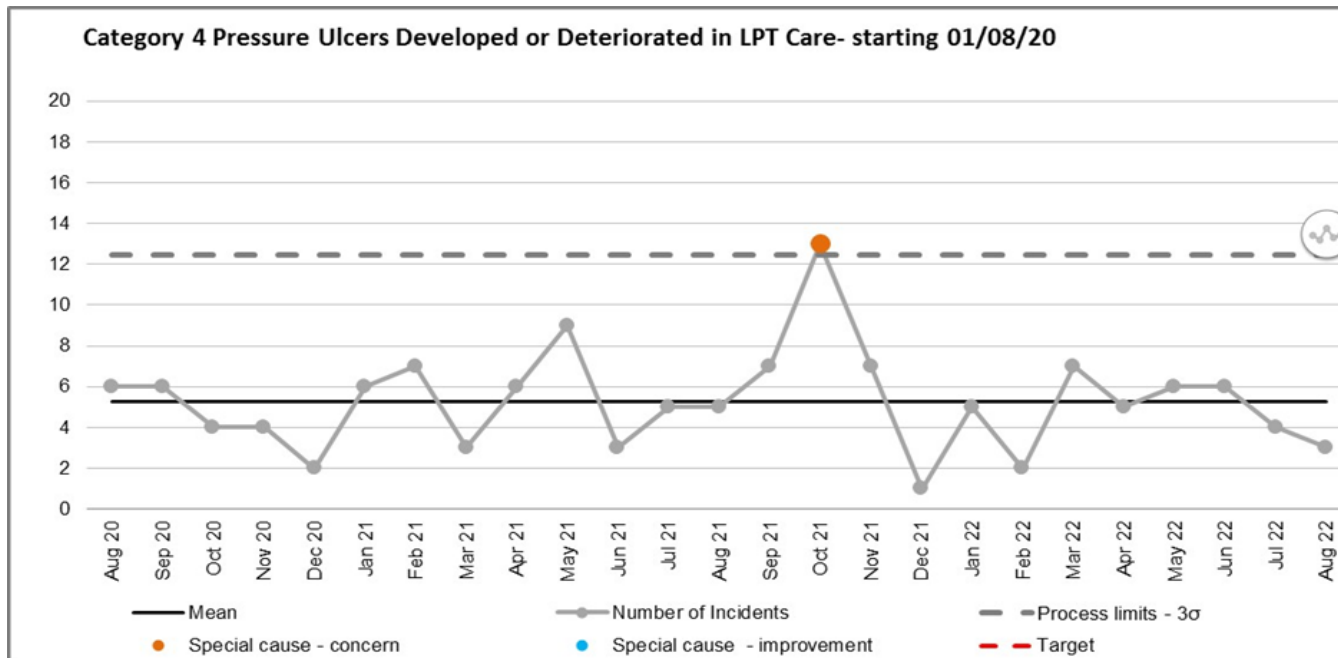
## 2. Category 2 Pressure Ulcers developed or deteriorated in LPT Care



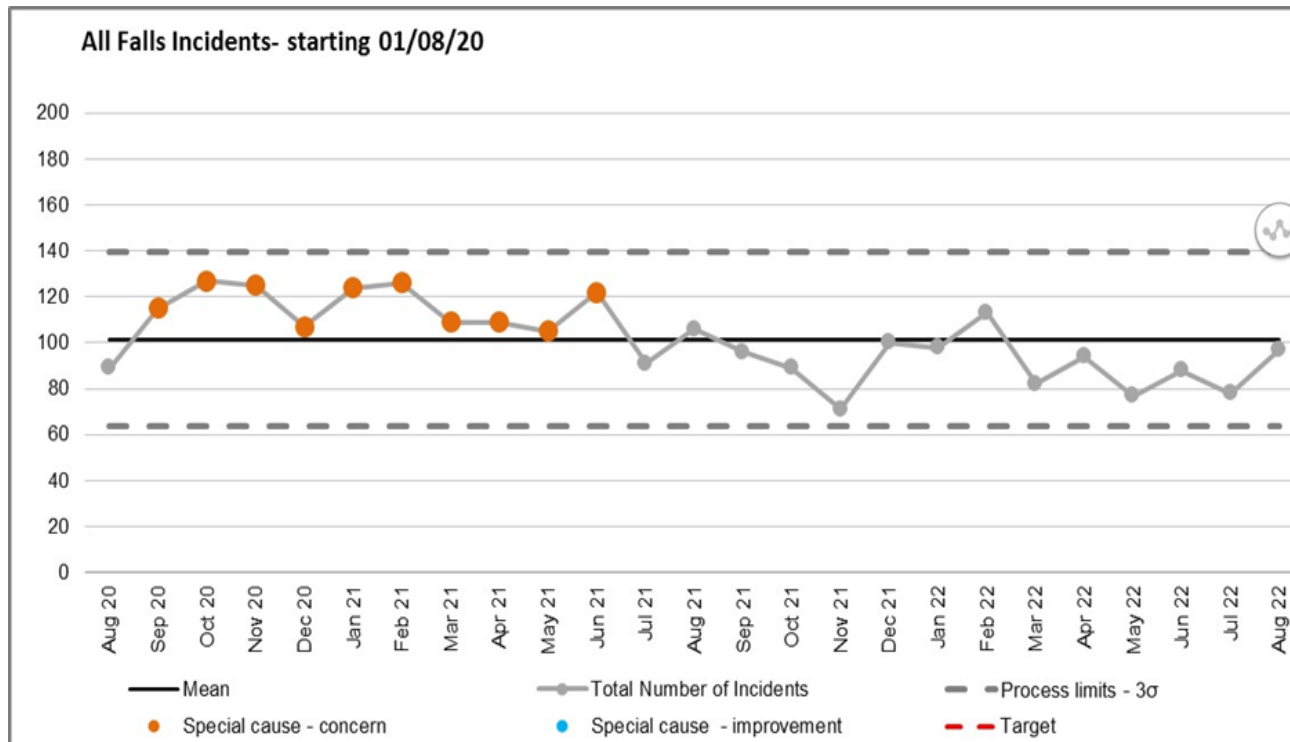
### 3. Category 3 Pressure Ulcers developed or deteriorated in LPT Care



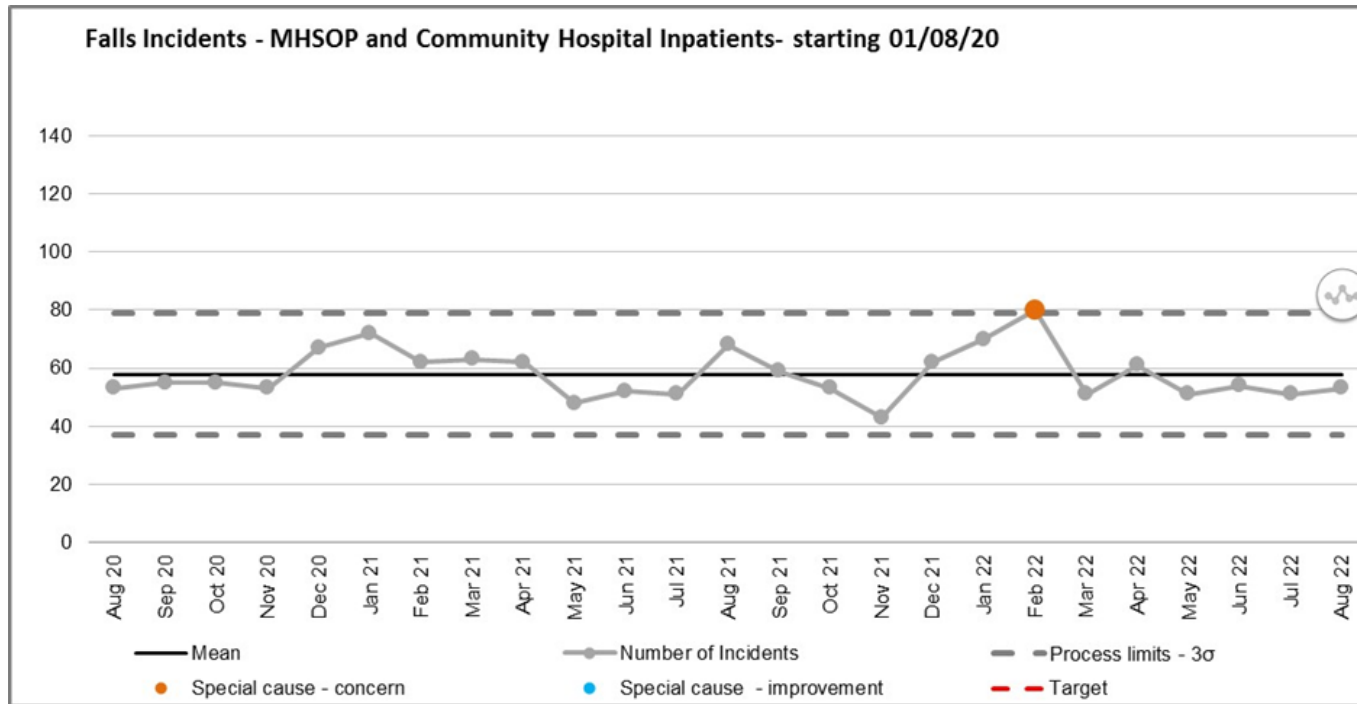
## 4. Category 4 Pressure Ulcers Developed or deteriorated in LPT Care



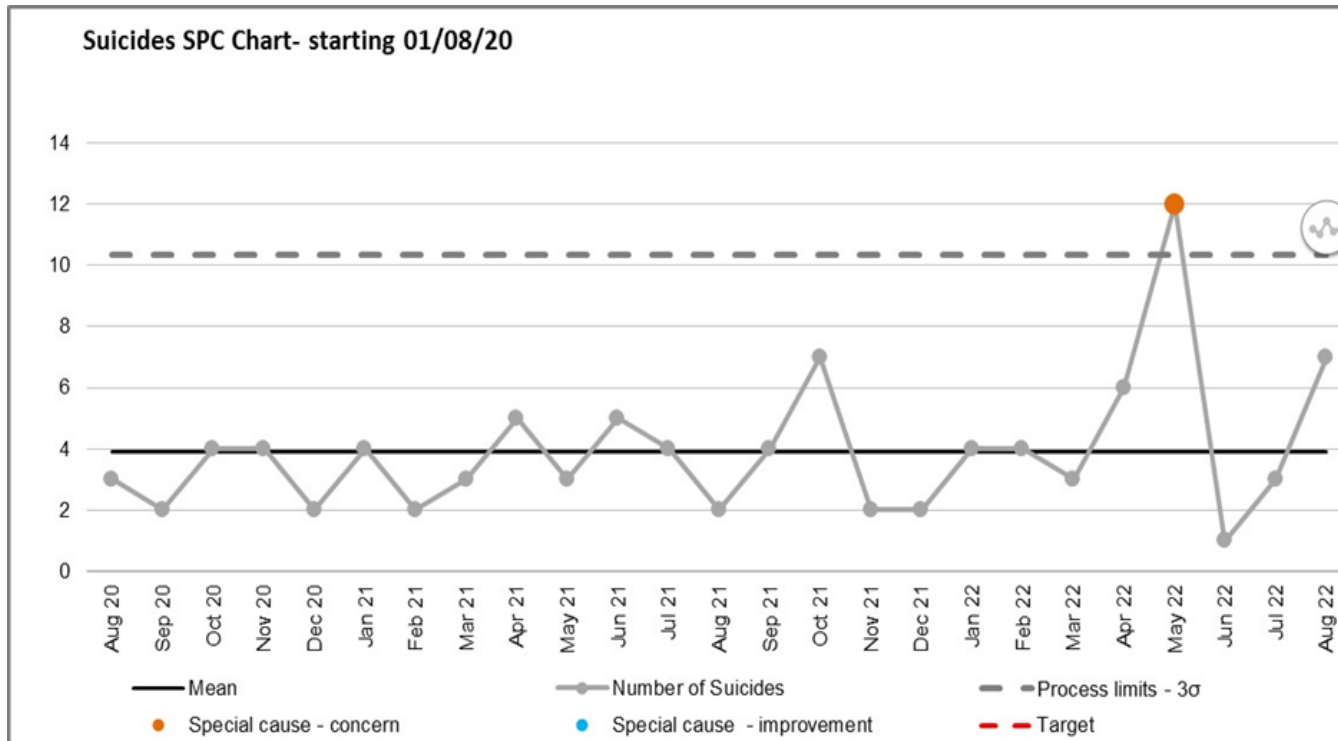
## 5. All falls incidents reported



## 6. Falls incidents reported – MHSOP and Community Inpatients

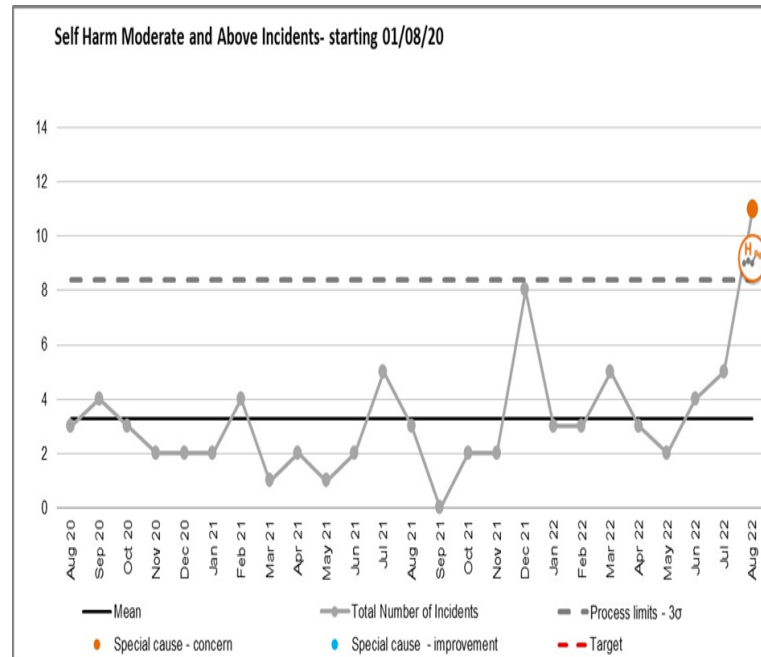
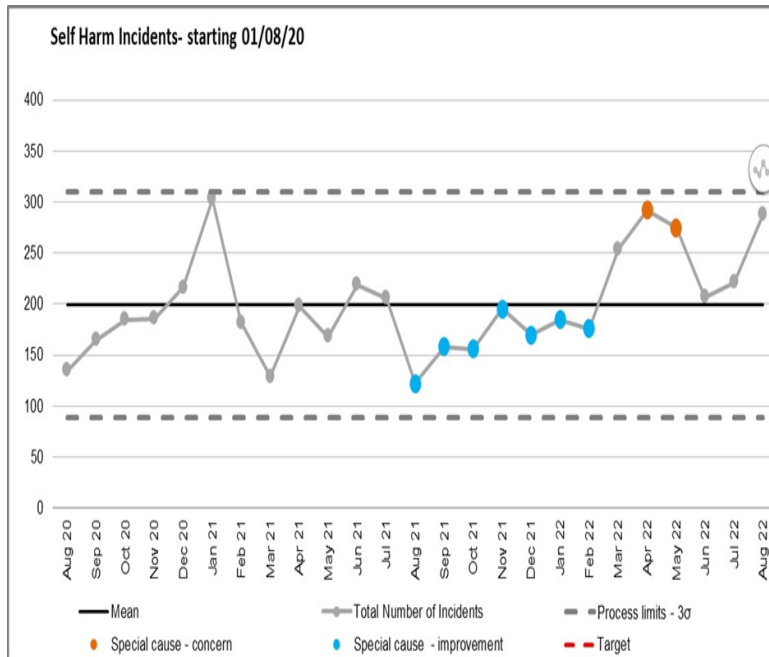


## 7. All reported Suicides

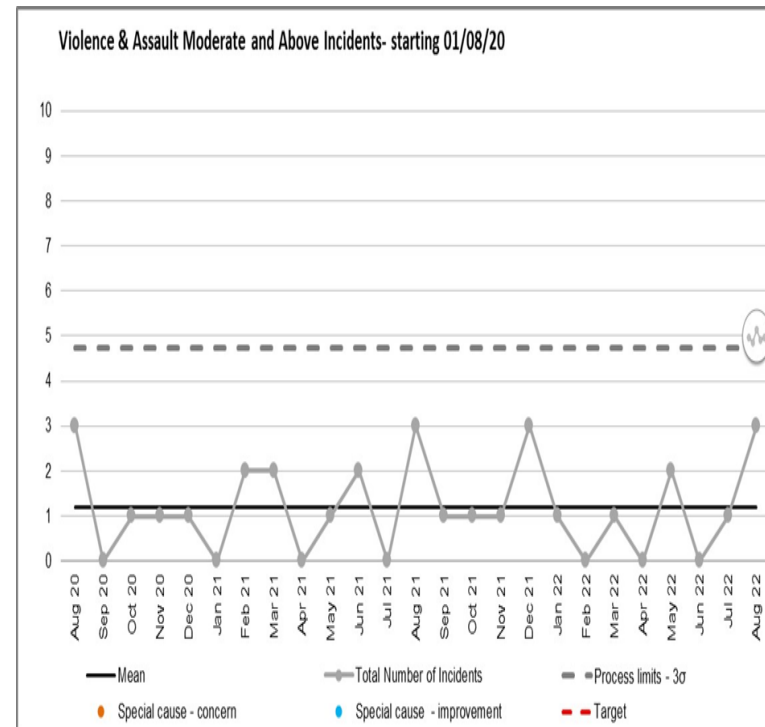
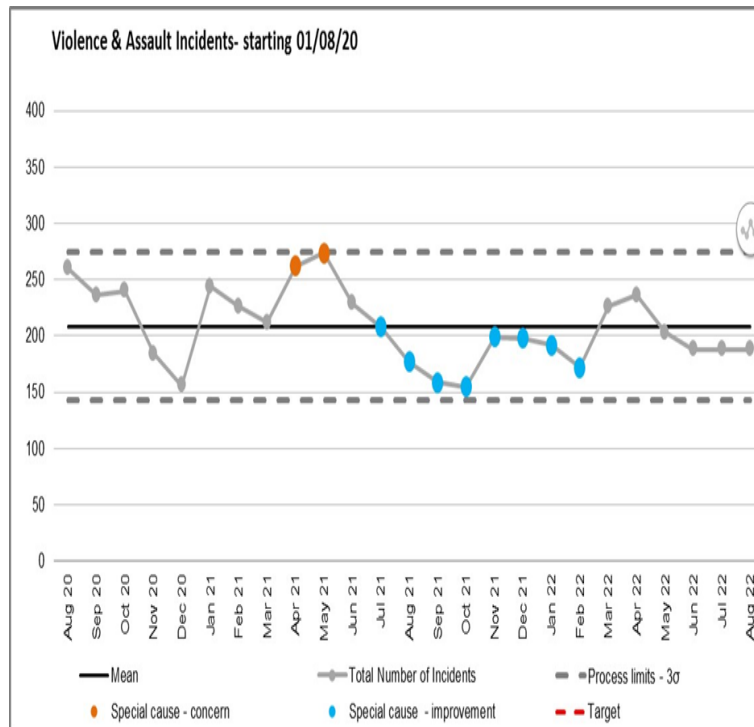




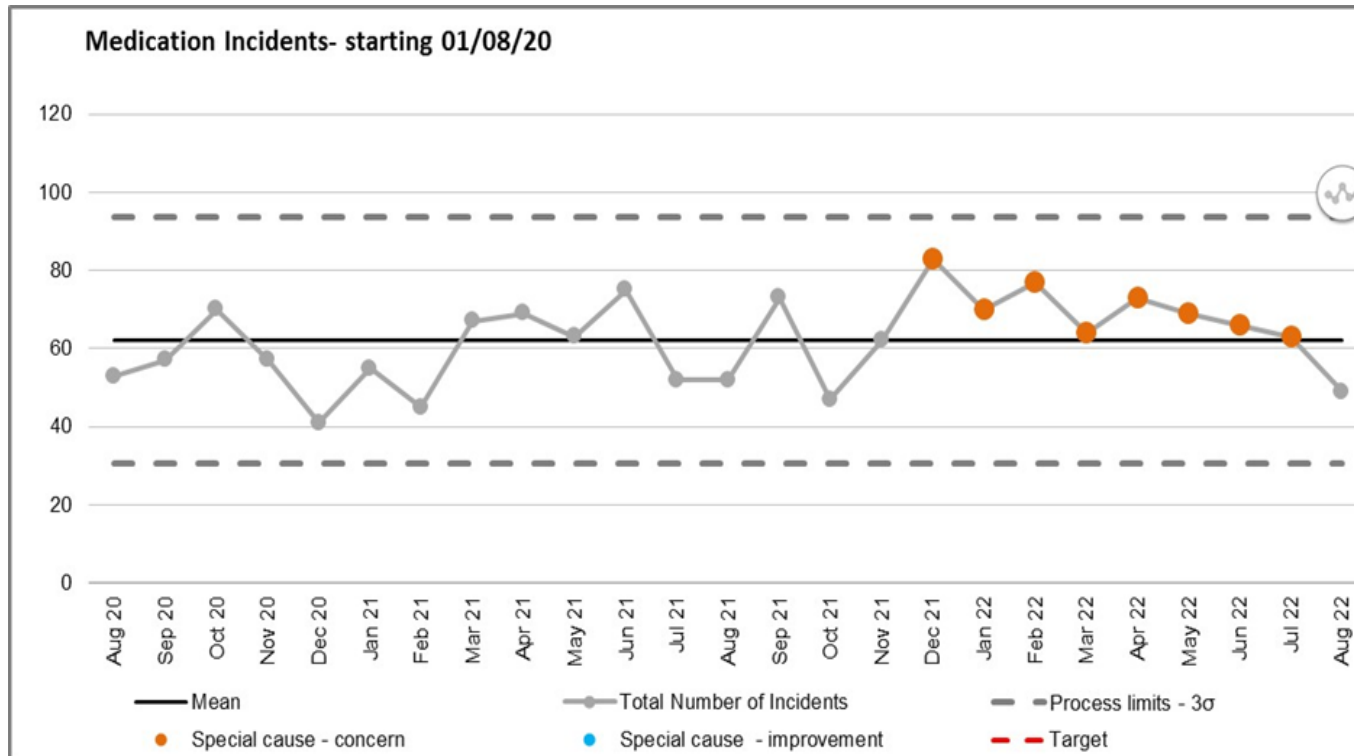
## 8. Self Harm reported Incidents



## 9. All Violence & Assaults reported Incidents



# 10. All Medication Incidents reported



# 11. Directorate Specialities describing Top 5 Incidents

**Table 1: Mental Health: Community**

Mental Health Non MHSOP Community - July	
Cause Group	Total
Self Harm	94
Violence/Assault	57
Infection Control	38
Case Notes & Records	24
Safeguarding (Adults)	24

**Table 2: Mental Health: Inpatients**

Mental Health Non MHSOP Inpatient - July	
Cause Group	Total
Violence/Assault	60
Self Harm	38
Clinical Condition	17
Missing Patient	17
Infection Control	16

Mental Health Non MHSOP Community - August	
Cause Group	Total
Self Harm	124
Violence/Assault	79
Patient Falls, Slips, And Trips	28
Safeguarding (Adults)	24
Clinical Condition	18

Mental Health Non MHSOP Inpatient - August	
Cause Group	Total
Self Harm	69
Violence/Assault	52
Access, Admission, Appts, Xfer, Discharge	22
Staffing	13
Missing Patient	12

# Directorate Specialities describing Top 5 Incidents

**Table 3: MHSOP – Inpatients**

MHSOP Inpatient - July	
Cause Group	Total
Patient Falls, Slips, And Trips	18
Violence/Assault	17
Infection Control	11
Clinical Condition	9
Hate/PREVENT Incident	4
Medication	4
MHSOP Inpatient - August	
Cause Group	Total
Clinical Condition	9
Patient Falls, Slips, And Trips	9
Case Notes & Records	6
Staffing	6
Self Harm	5
Violence/Assault	5

**Table 4: MHSOP – Community**

MHSOP Community - July	
Cause Group	Total
Patient Death	14
Infection Control	5
Case Notes & Records	4
Communication	2
Security	2
Self Harm	2
MHSOP Community - August	
Cause Group	Total
Patient Death	9
Self Harm	7
Case Notes & Records	3
Infection Control	3
Patient Falls, Slips, And Trips	2

# Directorate Specialities describing Top 5 Incidents

**Table 5: Learning Disability – In-Patient**

LD Agnes Unit - July	
Cause Group	Total
Violence/Assault	31
Allegations Against Staff	5
Clinical Condition	5
Staffing	5
IT Equipment / Systems	4
LD Agnes Unit - August	
Cause Group	Total
Violence/Assault	27
Self Harm	5
Confidentiality	3
Security	3
Staffing	2

**Table 6: Learning Disability - Community**

LD Community - July	
Cause Group	Total
Infection Control	16
Violence/Assault	7
Case Notes & Records	4
Self Harm	4
Missing Patient	3
LD Community - August	
Cause Group	Total
Violence/Assault	8
Safeguarding (Adults)	7
Self Harm	6
Confidentiality	3
Patient Falls, Slips, And Trips	3

## Directorate Specialities describing Top 5 Incidents

**Table 7: FYPC Inpatient CAMHS**

FYPC CAMHS Inpatient - July	
Cause Group	Total
Self Harm	68
Violence/Assault	18
Staffing	5
Clinical Condition	2
Infection Control	2
Medication	2
Missing Patient	2
FYPC CAMHS Inpatient - August	
Cause Group	Total
Self Harm	59
Violence/Assault	16
Staffing	4
Allegations Against Staff	3
Clinical Condition	2
Staff Falls, Slips, And Trips	2

**Table 8: FYPC non LD Non CAMHS**

FYPC Non LD Non CAMHS - July	
Cause Group	Total
Infection Control	62
Mental Health Act	52
Case Notes & Records	17
Communication	15
Self Harm	12
FYPC Non LD Non CAMHS - August	
Cause Group	Total
Mental Health Act	20
Case Notes & Records	18
Self Harm	14
Patient Death	12
Communication	9

# Directorate Specialities describing Top 5 Incidents

**Table 10: CHS In-Patient**

CHS Inpatient - July	
Cause Group	Total
Infection Control	54
Tissue Viability	47
Patient Falls, Slips, And Trips	33
Staffing	24
Medication	18
CHS Inpatient - August	
Cause Group	Total
Patient Falls, Slips, And Trips	45
Tissue Viability	34
Infection Control	21
Staffing	20
Clinical Condition	15

**Table 11: CHS Community**

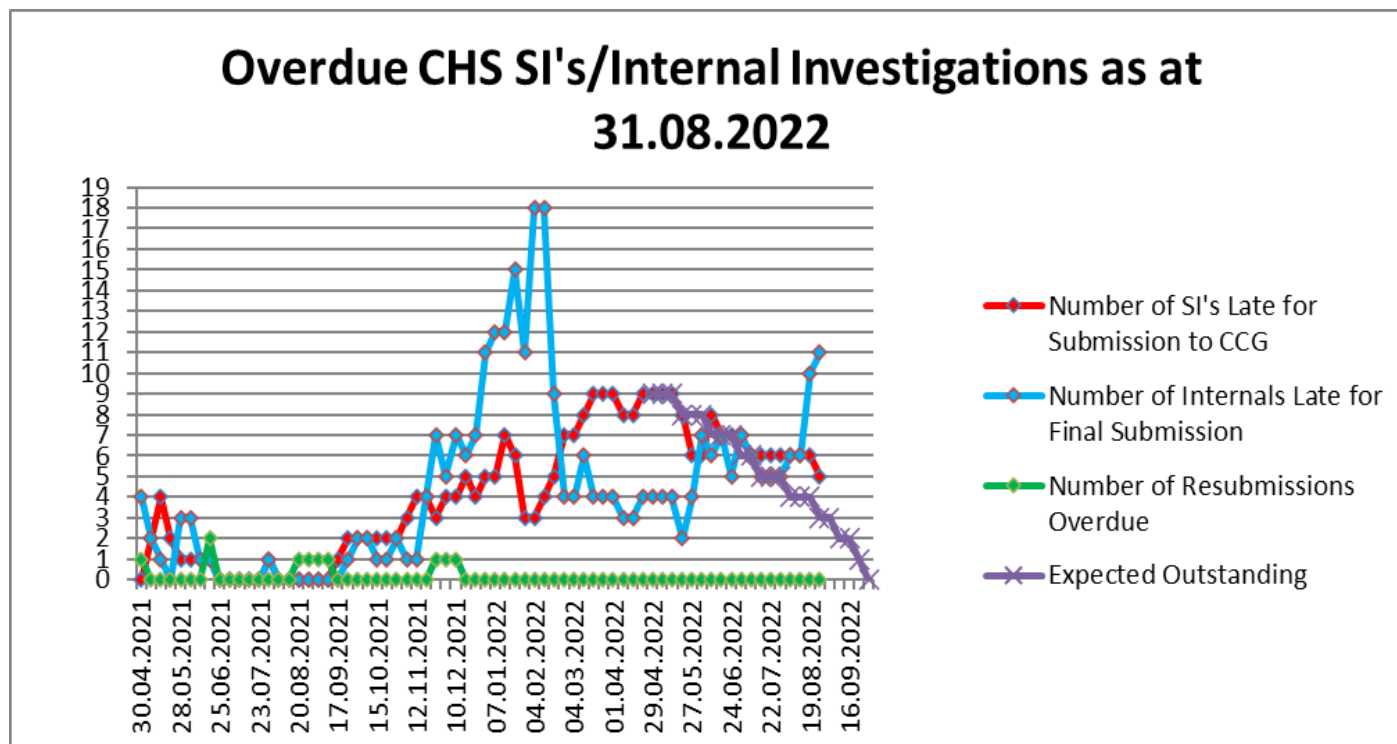
CHS Community - July	
Cause Group	Total
Tissue Viability	443
Infection Control	58
Medication	17
Non-Medical Equipment	7
Violence/Assault	7
CHS Community - August	
Cause Group	Total
Tissue Viability	482
Medication	18
Communication	11
Infection Control	9
Case Notes & Records	6
Violence/Assault	6



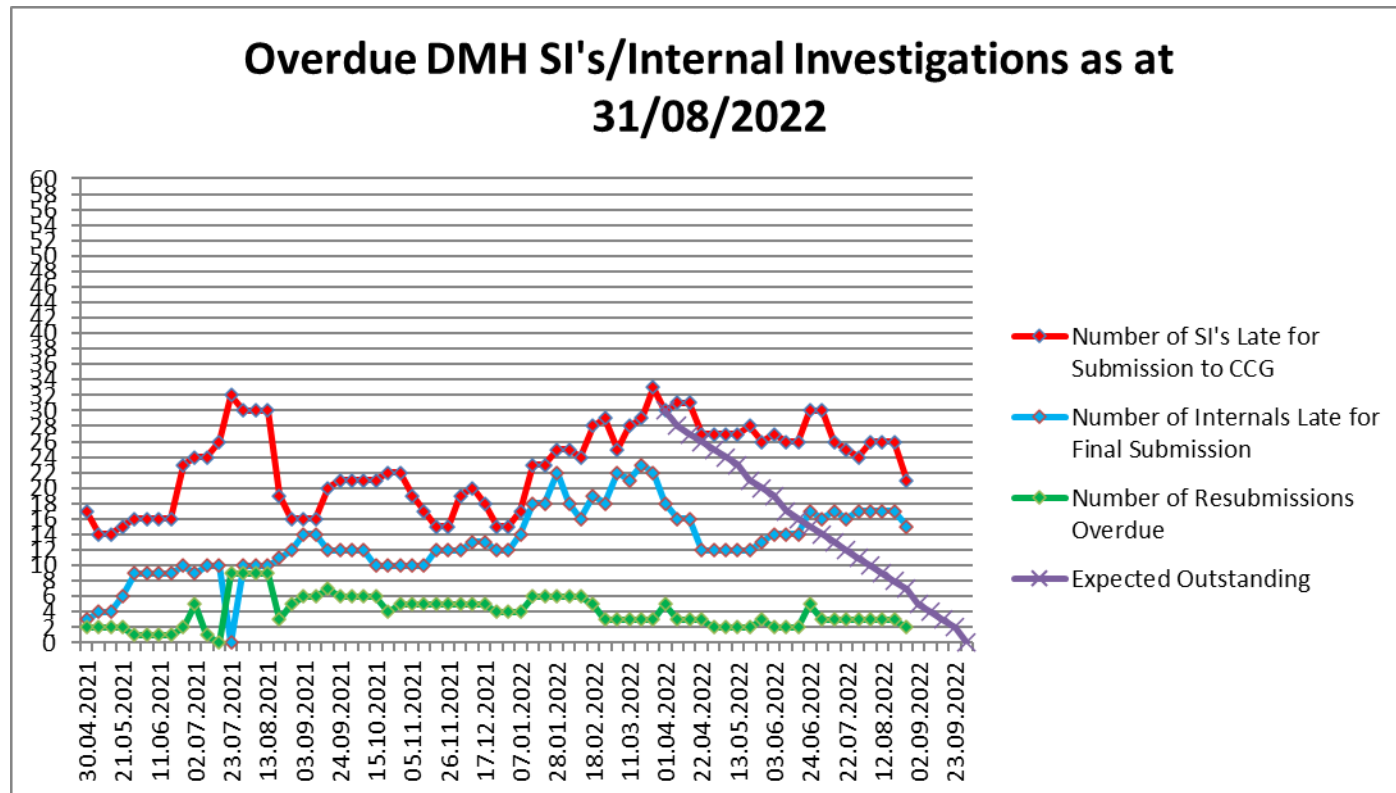
## 12. Ongoing - StEIS Notifications for Serious Incidents

2022/2023 - StEIS Notifications and Internal Investigations									
		StEIS Notifications	SI INVESTIGATIONS				Internal Investigations		
		Downgrade & removal requests	SIs declared DMH	SIs declared FYPC/LD	SIs declared CHS	Signed off in month	DMH	FYPC/LD	CHS
2022/23 Q1	April	0	2	0	2	10	3	3	3
	May	0	3	0	0	12	5	0	4
	June	0	4	1	2	7	2	1	3
2022/23 Q2	July	0	4	1	4	8	4	1	6
	August	0	7	1	1	7	5	2	2
	September								
2022/23 Q3	October								
	November								
	December								
2022/23 Q4	January								
	February								
	March								
YTD			20	3	9	44	19	7	18

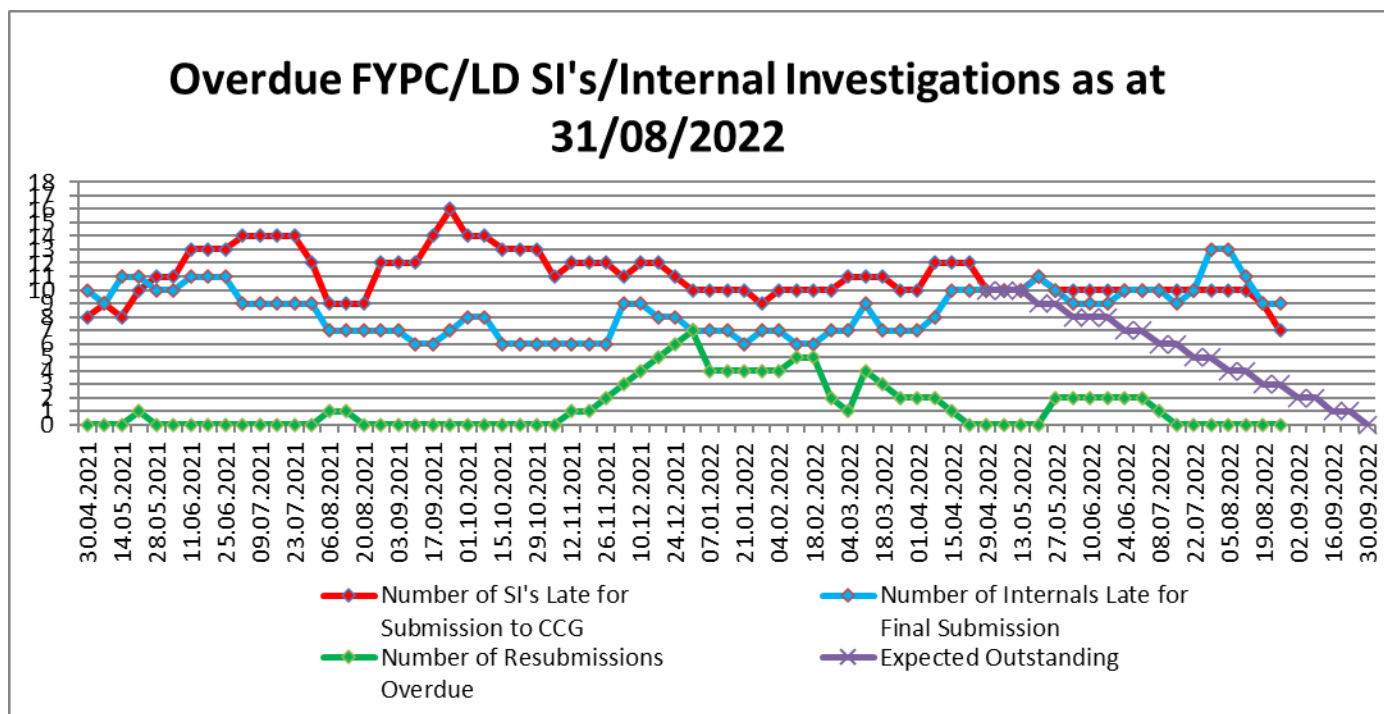
## 12a. Overdue Serious Incidents/Internal Investigation & CCG resubmissions(includes totals) - CHS



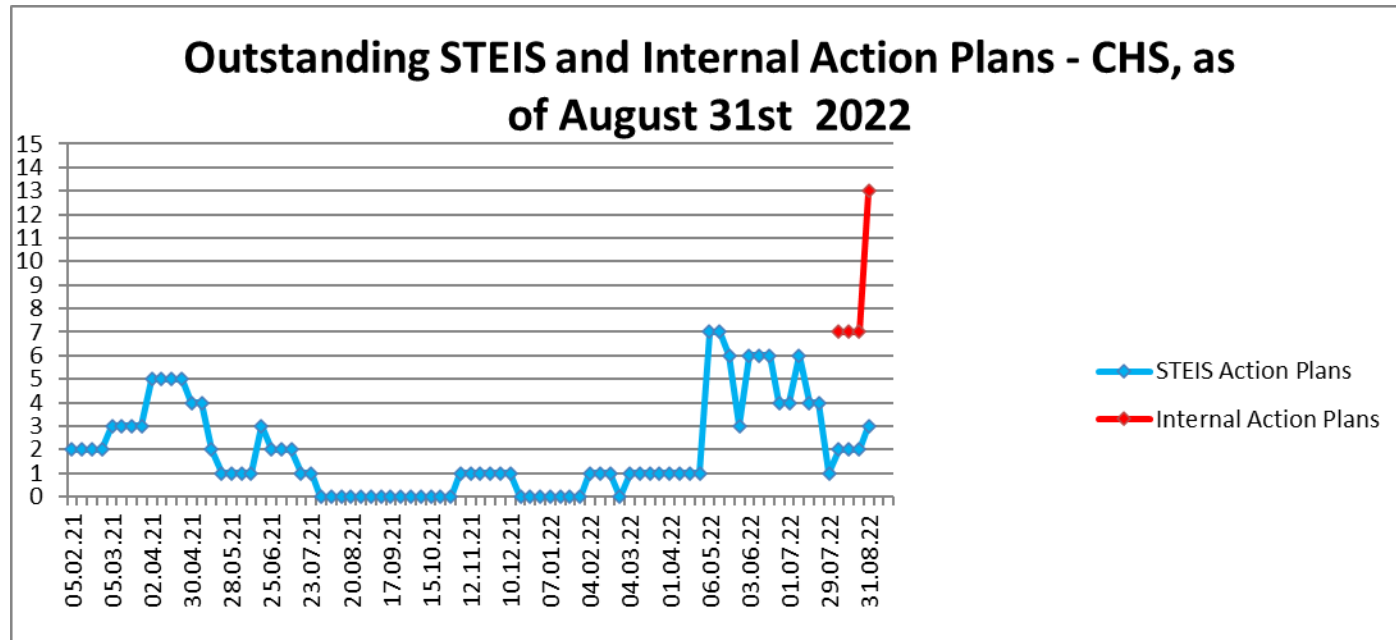
## 12a. Overdue Serious Incidents/Internal Investigation & CCG resubmissions (includes totals) - DMH



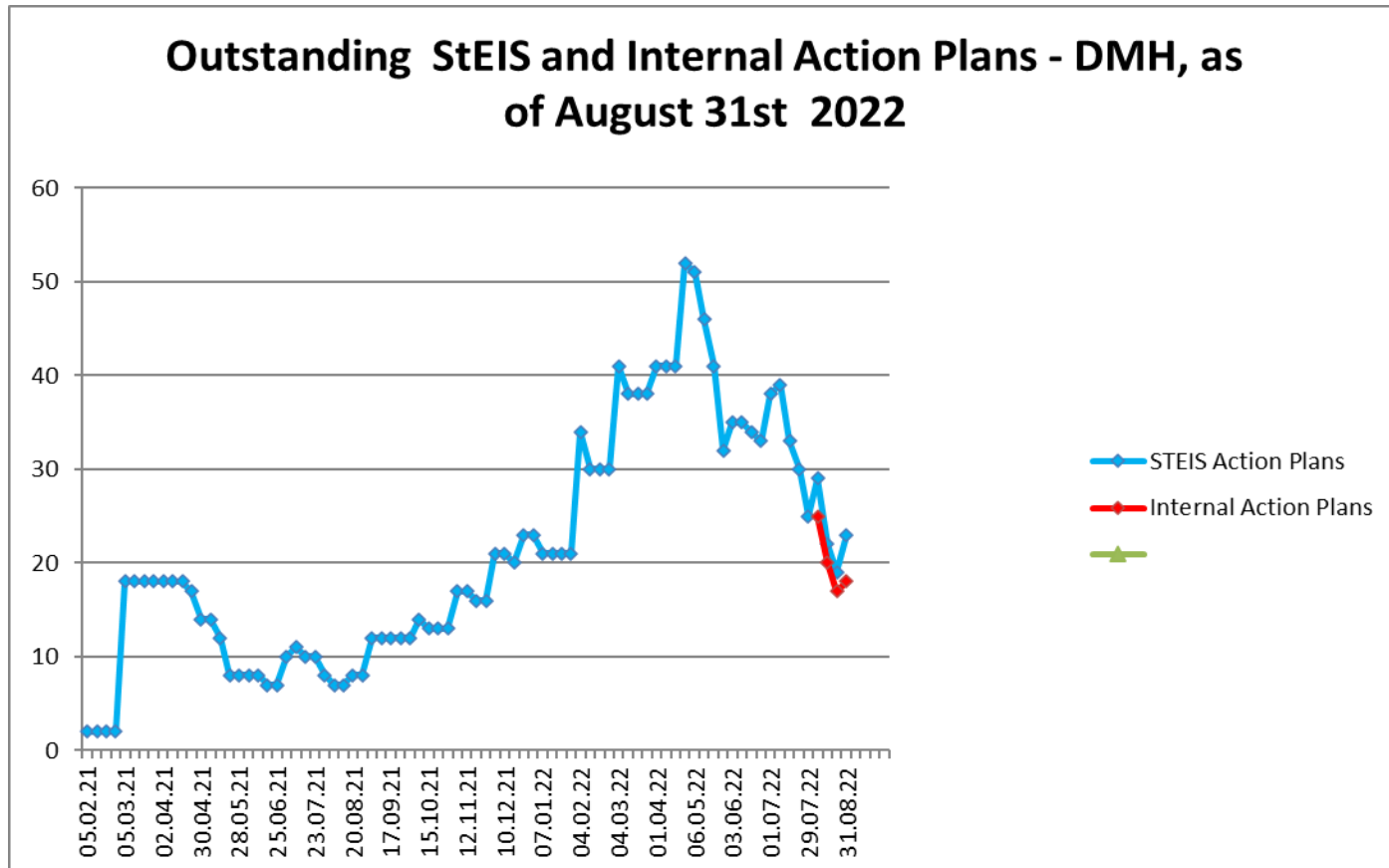
## 12a. Overdue Serious Incidents/Internal Investigations & CCG resubmissions (includes totals) - FYPCLD



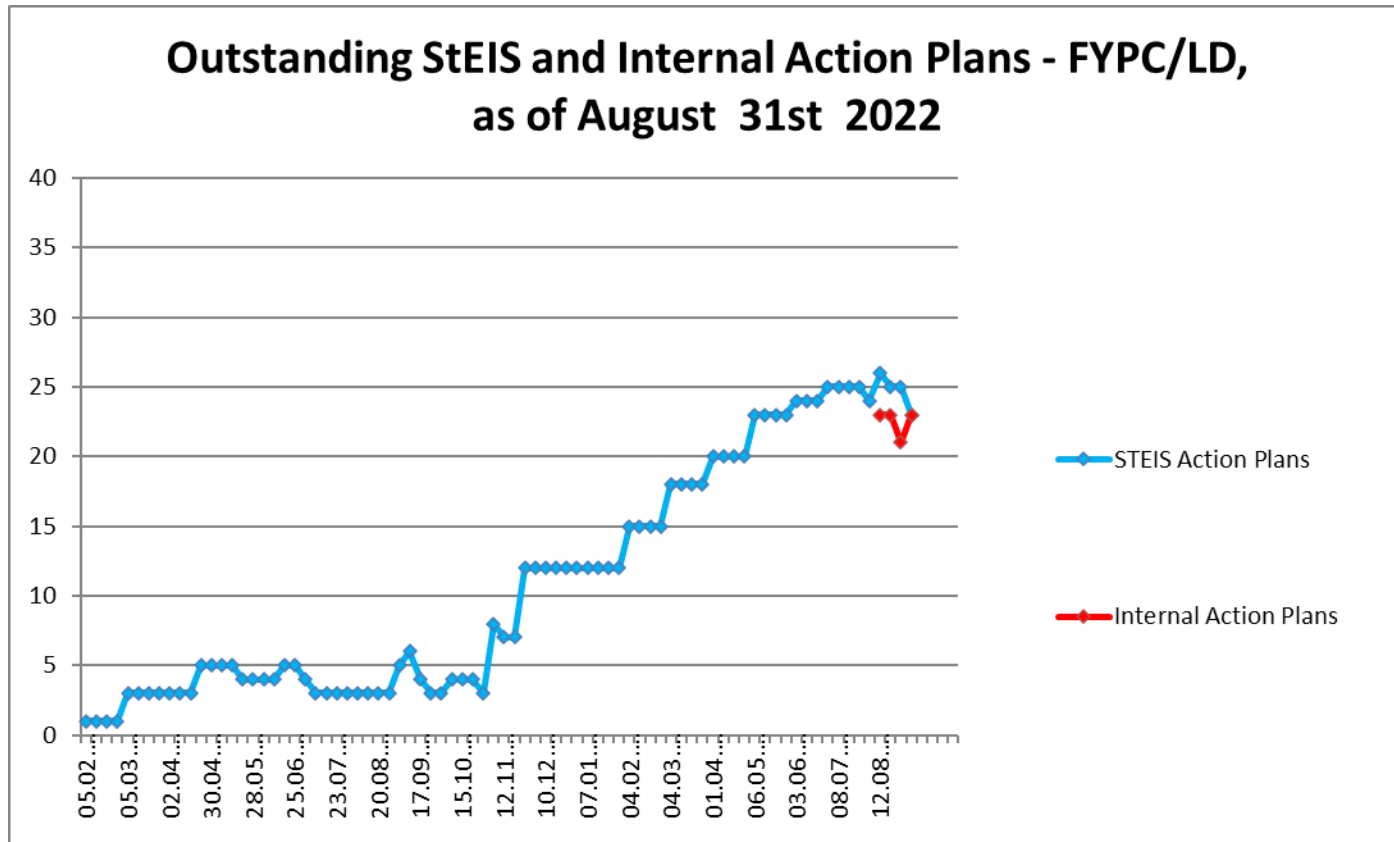
# 12.b Directorate SI Action Plan Compliance CHS Status 2020/21 to date



# 12.b Directorate SI Action Plan Compliance DMH Status 2020/21 to date



## 12b. Directorate SI Action Plan Compliance FYPCLD Status 2020/21 to date



# 12. Learning

## Serious & Internal Incidents Emerging & Recurring Themes

- Continual lack of communication and joined up approach between teams or sharing of information with other agencies where more than one service involved. **Action: Ongoing need for all and knowledge gained from Safeguarding Level 3 will assist staff to think more holistically**
- Continued Mental Capacity Assessments & overall care plans and risk assessments not considered or completed – this remains a theme across all adult areas. **Action: Planned Safeguarding Level 3 for roll out that will help address the importance of using MCA's & upskill workforce**
- Temporary workforce access to electronic records/training standards/competencies. **Action: Task and finish work across operational teams and workforce link**
- Continued record keeping and timely completion of assessments to inform care: **Action: directorate promotion of record keeping reviews as part of supervision/audit and leadership oversight**