

Acute Hospital Inspection Trust Documentation

Hospital:	
Submission by Date:	

Policies/Procedures/Protocols/Guidelines/Leaflets

- Please confirm if the following documentation is available

*Please highlight any policy/procedure/protocol/guideline/leaflet which has not been reviewed within the set timescale

Complaints Policy/ Procedure	<input type="checkbox"/>
DNAR Policy/Guidance	<input type="checkbox"/>
Food Fluids and Nutritional Care Policy/Guidance	<input type="checkbox"/>
Falls Reduction and Prevention Policy/Guidance	<input type="checkbox"/>
Incident Management Policy/ Procedure (should include the procedure for Serious Adverse Incidents)	<input type="checkbox"/>
Infection Control Policy/Guidance	<input type="checkbox"/>
Major Incident Plan and Escalation Plan to include Emergency Department	<input type="checkbox"/>
Medicine Management Policy/Guidance	<input type="checkbox"/>
Pain Management Policy/Guidance	<input type="checkbox"/>
Palliative Care/End Of Life Policy/Guidance	<input type="checkbox"/>
Pressure Ulcer Prevention/Management Policy/Guidance	<input type="checkbox"/>
Promotion of Continence and the Management of Incontinence <ul style="list-style-type: none"> • are integrated care pathways available • or in the process of being developed 	<input type="checkbox"/>
Safeguarding Policy/Guidance for Children and Adults (may include or may have a separate policy) <ul style="list-style-type: none"> • Children in Adult Wards 	<input type="checkbox"/>
Self-Administration of Medication Policy/Guidance	<input type="checkbox"/>
Self-Harm Protocols for Emergency Department	<input type="checkbox"/>

Whistleblowing Policy/ Procedure	<input type="checkbox"/>
General information leaflets for carers including safeguarding and infection prevention and control complaints procedure. Information available in various formats: Braille, sign language, different languages.	<input type="checkbox"/>

Trust Information

- Please provide copies of the following and any additional information provided to Trust Board to evidence improvement
- Information should be provided yearly or for the last quarter as appropriate

Trust Performance Report	<input type="checkbox"/>
Trust Quality Improvement Plan and monitoring arrangements	<input type="checkbox"/>
Directorate Improvement Plans and monitoring arrangements	<input type="checkbox"/>
Infection Prevention and Control – Infection Rates, Improvement Plan and monitoring arrangements	<input type="checkbox"/>
Terms of reference and sample minutes (x2 in last 6months) for professional forums (AHP, Nursing, Social Services, Medical)	<input type="checkbox"/>
Trust Incident Report (including SAI rate, never event rate, medication errors, potential under reporting)	<input type="checkbox"/>
Trust - Staff Survey and Action Plan	<input type="checkbox"/>
DoH – alert letters action plan	<input type="checkbox"/>
Trust Morbidity and Mortality meeting minutes	<input type="checkbox"/>
Patient Experience Survey/10,000 Voices Report	<input type="checkbox"/>
Emergency Department Quality Indicators Audit Report and monitoring arrangements	<input type="checkbox"/>
Financial Saving Plan and quality impact analysis of plan	<input type="checkbox"/>
Mandatory Surgical Site Infection Surveillance rates, MR tables, monitoring arrangements, minutes of meetings and action plans	<input type="checkbox"/>
Winter Pressure Plan	<input type="checkbox"/>

Submitted by

Form Completed by:	
Date of Completion:	