

## Report on actions you plan to take to meet Health and Social Care Act 2008, its associated regulations, or any other relevant legislation.

Please see the covering letter for the date by when you must send your report to us and where to send it. **Failure to send a report may lead to enforcement action.**

<b>Account number</b>	1-119188856
<b>Our reference</b>	INS2-5883415341
<b>Location name</b>	Lawnswood Avenue

Regulated activity	Regulation
<b>Accommodation for persons who require nursing or personal care</b>	<b>Regulation 12 Safe care and treatment</b>
	<b>How the regulation was not being met:</b>
	<i>Risk assessments did not reflect the guidance from healthcare professionals. The physical environment did not promote effective infection prevention and control measures or a safe living environment.</i>

### Please describe clearly the action you are going to take to meet the regulation and what you intend to achieve

*The breach of regulation 12 was issued because one of the care and support plans and risk assessment contained inconsistent information. These care plans and risk assessments had not been updated to include the latest information from the Speech and Language Therapy Department. The information was not passed to staff members to update their knowledge of the risks to YL on how to safely support them.*

Since the inspection, the Service Manager has implemented a clear discharge from hospital protocol. This ensures that when anyone is supported from hospital and is discharged back to the service, the team has a clear process to follow. This includes updating any support plans, risk assessments and SALT information, as well as notifying the team through the communication book of any changes. This is to ensure that information does not get lost during the discharge to home process.

At present, we have not yet had anyone discharged from hospital; however, two people are currently inpatients so the relevant paperwork is ready to use upon their discharge.

Staff were involved in the development of the new protocol. For any staff member who was not present at the time of its development, we ensured information on the new protocol has been added to the staff communication book, and a copy of the protocol has been pinned to the staff board for them to read.

A review of all SALT guidelines against current support plans and risk assessments has been

undertaken to ensure that these are correct and reflective of all the up to date needs of the individuals we support.

We have put more detailed information around the SALT requirements in place to support staff knowledge and understanding. These include the IDDIS guidelines, as well as the University Hospitals of North Midlands 'diet descriptors' and Nutricia pictorial thickening food guides.

We use our staff communication book and team meetings to support and guide staff to read and sign all updated support plans. This process has been used for the support plans we have reviewed, as well as updated risk assessments.

SALT training has now commenced at the service with a member of the local authority's SALT team. This training will support staff knowledge and understanding further. At present, 12 staff members have been trained, and the Service Manager is in the process of arranging a further session for the remaining staff.

We will ensure that people's support plans are updated to reflect any conditions made from the most recent review or professional appointment.

*The breach of regulation 12 was issued due to a number of environmental issues identified through the inspection. This included: sharp edges on door surrounds, rusting equipment in bathrooms, exposed piping, exposed radiator valves, open access to the boiler room, unlocked cosh cupboard, compromised flooring, dirty over chair tables, torn furniture, food items on the floor and compromised varnish on the kitchen table.*

Please also refer to our Warning Notice response for details about how we have complied with the environmental concerns identified during the inspection.

Since the inspection, the Service Manager has implemented a cleaning rota for the whole team to follow. The Service Manager has also implemented a monthly environmental and infection control audit that he undertakes. Any actions from this audit are added to the continuous improvement plan and the relevant parties are contacted in order for repairs to be undertaken. Since the inspection, the Service Manager has completed two audits; both audits did not identify any new concerns.

The COSHH cupboard has now been relocated to an internal locked cupboard. Along with the boiler room, all staff are aware of the need to ensure these are locked at all times. As part of the Area manager and Service manager's walk-rounds, they check this is strictly adhered to.

Where furniture was identified as being torn or inappropriate, we have now replaced and repaired the issues to ensure infection control guidance is followed. The dining table has now been sanded down and re-varnished and any food items have been removed from the floor.

All environmental concerns were raised with the landlord and have now been rectified. This includes: all rust areas, exposed pipes, compromised flooring and door surrounds.

We use our staff communication book and team meetings to reiterate these expectations and ensure staff understand the importance of reporting any issues in a timely manner in order for repairs to be reported and completed by the relevant body.

<b>Who is responsible for the action?</b>	Service Manager
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**How are you going to ensure that the improvements have been made and are sustainable? What measures are going to put in place to check this?**

During the Area Manager's visits to the service, they will ensure audits are undertaken regularly, all support plans and SALT guidance contain the most updated information, and the team have been made aware of any changes. This will be completed by reviewing the team communication book, observing and reviewing daily handovers, as well joining some team meetings and holding one-to-one meetings with individuals.

Our Quality team will continue to review and support the Service Manager to ensure he has a comprehensive knowledge of his responsibilities as a registered and Service Manager. Our Quality team are also supporting us to embed service improvements.

The Service Manager and the Area Operations Manager are also responsible for ensuring that the environmental audits and actions resulting from these are reported and acted upon in a timely manner and that a clear record is held to support and evidence this paper trail.

Accountability calls are undertaken with the Regional Manager where these actions will be monitored and reviewed.

<b>Who is responsible?</b>	Service Manager/ Area Operations Manager
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**What resources (if any) are needed to implement the change(s) and are these resources available?**

We have already actively developed and implemented the following:

- A discharge protocol to ensure information is not lost, but is accurately transferred to support plans and risk assessments.
- We have introduced better SALT resources to support the team in their understanding and this includes information and pictorial guidance.
- We have implemented additional infection control questions to the environmental audit that the service manager is now completing monthly.

<b>Date actions will be completed:</b>	29 <sup>th</sup> February 2020
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**How will people who use the service(s) be affected by you not meeting this regulation**

**until this date?**

While most of the actions have already been addressed, and all other actions are currently underway, we continue to work on ensuring all plans are reviewed monitored and updated and all actions are embedded fully within the service. We are holding a team meeting on the 30<sup>th</sup> January to discuss the changes made with the team.

We are currently in the process of typing up the support plans to evidence the updates and reviews undertaken.

There is little to no impact at present because we will ensure that there is always a member of staff trained in SALT on shift or looking after someone with SALT needs.

<b>Completed by:</b> (please print name(s) in full)	[Redacted]
<b>Position(s):</b>	Area Operations Manager and Service Manager
<b>Date:</b>	16.01.2020