

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.**

Account number	1-341611699
Our reference	INS2-17596762631
Location name	Doncaster Community Support

Regulated activity	Regulation
Personal care	Regulation 11 Need for consent
	How the regulation was not being met:
	<i>Consent to care and treatment and best interest decisions did not follow the principles of the Mental Capacity Act 2005</i>

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

- Service Managers will review Mencap's needs assessments and support plans for all people we support to consider whether there are any areas of support where there is reasonable doubt a person has the capacity to consent and make decisions. Where there is reason to doubt capacity, a thorough Mental Capacity assessment will be undertaken, which will include all relevant parties. For example, the person, a Mencap representative(s), next of kin and/or advocate, social worker and any relevant professional, i.e., financial appointee or medical professionals.
- All mental capacity assessments will be recorded under the person's profile on our What Matters Most (WMM) digital recording application.
 - Where the person is assessed to lack the mental capacity to understand or consent to the decision being made, a best interest meeting will be arranged and take place.
 - Any best interest meetings will take place in a private and appropriate environment, and will involve all relevant parties, as outlined above.
 - Service Managers will ensure that the best interest meeting record is completed and stored on the person's profile on the WMM application.
 - Service Managers and the Area Operations Manager to ensure that mental capacity assessments and best interest decisions are reviewed annually as a minimum requirement.
- Service Managers will ensure support plans are reviewed and reference where a person's capacity has been assessed, outcomes and any decisions have been made in the person's best interest.

- Each person who needs support to make decisions and provide consent, will have a stand-alone 'Choice and Consent' support plan and risk assessment. These will inform those supporting the individual of what support they need to make decisions, their ability to do so including their right to make unwise decisions where they have the capacity, and areas in which they have a best interest decision in place.
- Where we can support a person's understanding, skill, and ability to make decisions, a robust development plan will be documented and followed.
- Service Managers will review any existing deprivation of liberty (DoL) arrangements for each person and ensure the supervisory body (local authority) is aware of any restrictions in place where the acid test has been met and where a DoLS application has not been submitted to the Court of Protection.
- Service Managers will ensure that any restrictions are in line with the Mental Capacity Act and best interest decisions have been agreed upon and recorded.
- Service Managers will ensure any requests to the local authority or applications submitted are monitored using the DoLS tracker. This tracker will also be submitted to the local authority to help emphasise any delays to applications.
- Area Operations Manager/ Registered Manager to notify Mencap's internal CQC compliance team of authorised DoLS application/s and ensure that CQC is notified of any application outcomes.
- Service Managers to ensure that the authorised DoLS are reviewed annually as a minimum requirement unless an earlier review date is specified on the authorisation.
- Service Managers to ensure that people's support plans and risk assessments have details of authorised DoLS and what is covered in the authorisation.
- Where appropriate, we will undertake a restraint and restrictive practice audit within a service. This will help us to understand how we can reduce restrictions for people we support, and what we need to achieve in cases where we are unable to do this – for example, mental capacity assessments, best Interest decisions and applications for DoLS.

Who is responsible for the action?

Area Operations Manager/Registered Manager
Service Managers

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?

- To ensure all managers fully understand the Mencap Capacity Act and best interest decisions, our Quality team will support a learning session (in addition to mandatory training) to improve their understanding of consent and choice, MCA, best interest decisions and triggering the DoLS process on 17/01/2024. The Service Managers will then cascade this training to their teams during team meetings.
- The Registered Manager will also review CQC's guidance for providers on the Mental Capacity Act with the Service Managers in January.
- All staff members will be given a credit-card sized MCA prompt-card.

- We have implemented a registration wide improvement plan based on the findings of the recent CQC inspection report. We will review the improvement plan every 4 weeks during manager meetings to ensure progress is tracked and monitored. The actions based on these two regulatory breaches are of the highest priority and will be the initial focus of the improvement plan.
- Every Service Manager will have an accountability and supervision meeting with the Registered Manager at least every 8 weeks. During these meetings, individual objectives will be set using the improvement plan, and these will be closely monitored. Managers will be held to account on their performance against these set objectives.
- The Registered Manager will meet with her manager (Regional Operations Manager) every 4 weeks. The improvement plan, including the actions regarding the regulatory breaches, will be an ongoing agenda item at these meetings. The Registered Manager will be held to account on the progress towards achieving the identified actions.
- The Registered manager will complete 12-weekly service visits to all locations and validate actions that have been completed by the Service Managers.

Who is responsible?

Area Operations Manager/Registered Manager

What resources (if any) are needed to implement the change(s) and are these resources available?

- Mencap’s MCA and best interest forms – these are available.
- We require support from the Local Authority to ensure DoLS applications are made for all identified restrictions.
- We will need to liaise with all stakeholders in people we supports’ life to ensure the Mental Capacity Assessments and best interest decisions are undertaken with their input. Therefore, some of the actions are dependent upon their availability.
- Support from Mencap’s Quality team with delivering the manager training in January, support with monitoring the improvement plan, and support with validating any completed actions.
- MCA prompt-cards – these are available.

Date actions will be completed:

05/06/24

How will people who use the service(s) be affected by you not meeting this regulation until this date?

People we support may experience restrictions that are unlawful until we have completed all the relevant mental capacity assessments and best interest decision meetings and receive support from the local authority to make DoLS applications to the Court of Protection.

While a number of these actions will be completed before 05/06/2024, we have agreed on this date to ensure the actions are embedded and to allow for two full cycles of the one-to-one meetings and one full cycle of the Registered Manager service visits. It also provides additional time for the Local Authority to complete the DoLS applications to the Court of Protection.

The Quality Improvement action plan developed following the CQC inspection, will also be completed by this time.

Completed by: (please print name(s) in full)	Area Operations Manager / Registered Manager
Position(s):	Area Operations Manager / Registered Manager
Date:	02/01/2024

Regulated activity	Regulation
Personal care	Regulation 17 Good governance
	How the regulation was not being met:
	<i>Quality assurance systems were not robust enough to improve quality and service user care.</i>

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

- The Registered Manager will book a full day visit at each service every 12 weeks. During these visits, she will complete environmental audits, sample people's finance records, medication records, support plans and risk assessments, and complete a culture and practice audit.
- We will roll out Mencap's new supervision/performance management process, 'MyMencap Review'. This now includes a requirement for all managers to meet with direct reports at least every 8 weeks and is embedded into Mencap's new accountability and leadership frameworks. During these meetings, we will review quality compliance data, and Service Managers will be held to account for any non-compliance. These meetings will also be used to discuss trends and learning, in addition to the managers' team meetings.
- Mencap has also recently rolled out a new procedure for any colleague who is non-compliant with their training. This can result in disciplinary action being taken against colleagues if they or their manager fails to complete their mandatory and compliance training.
- At Mencap we have a suite of themed audits, for example, restraint and restrictive practice. We will identify which services we support people with conditions that require a themed audit and will complete these.
- If a serious incident occurs in a service, we will seek support from the quality team to identify any other risks that may exist so we can address them without delay.
- Service Managers will ensure that the Manager's Assurance Tool (MAT) is reviewed and updated at least every 4 weeks and any identified actions are added to the MAT improvement plan. Registered Manager to review all MATs at least every 8-weeks to ensure data on the MATs is compliant and a plan is in place to address any non-compliance efficiently.
- Support worker teams will have team meetings at least every 6 weeks. During these meetings, they will discuss any matters arising in the services and work together to identify areas for improvement and make sure appropriate action is taken to address these. Actions identified will be added to the Continuous Improvement Plan on the MAT, to ensure actions are live until completed.
- We have now implemented a weekly call between the Registered manager and the Service Managers to ensure that commissioned hours are covered on every service rota. We have increased our agency usage to ensure that commissioned hours are delivered until we can fully recruit.
- We have implemented a new procedure regarding medical appointments. In summary, support

workers are now unable to cancel medical appointments for people we support due to short staffing. The team must contact a manager to report short staffing so this can be remedied to ensure the person can still attend their appointment.

- We are introducing a quarterly Coffee morning with staff, people we support and their family members to gain feedback on our service and put any learning into action.
- We are launching a new People We Support satisfaction survey in January 2024 and will re-launch the family survey in late-Spring 2024 due to a poor response in 2023.
- We will fully embed Mencap’s new Quality framework across the registration. This will ensure that colleagues in all roles understand what they are accountable for and provide the tools and resources they require to ensure high compliance.

Who is responsible for the action?

Area Operations Manager/Registered Manager

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?

- The Registered Manager will be visiting services every 12 weeks and will spend a longer amount of time at each service. This ensures they have more time to review quality compliance within each location and validate any completed actions.
- The Registered Manager will have one-to-one accountability meetings with their line manager (Regional Operations Manager) every 4-weeks to monitor actions and quality compliance.
- The data from our MAT and data dashboard will be used to measure success and progress regarding quality compliance. We also have data dashboards that evidence agency usage, recruitment and turnover statistics, staff utilisation and contract performance which will help with rota management.
- The data and levels of compliance held on our WMM digital recording app will be used to measure how we are performing.
- The new 8-weekly accountability and supervision meetings will ensure managers carry all actions forward from our continuous improvement plan. Where any actions have been red-RAG rated, these will be monitored during fortnightly continuous improvement meetings.
- The Registered Manager and Service Managers will regularly review the registration’s reporting data to identify any trends and themes.

Who is responsible?

Area Operations Manager/Registered Manager

What resources (if any) are needed to implement the change(s) and are these resources available?

- Time and performance management skills – the Registered Manager has scheduled one-to-one and management meetings with their direct reports for 2024, and guidance has been developed for the new supervision meetings.
- Support from Mencap’s internal quality team – this is already in place as we have a dedicated Quality Coordinator allocated for support.

Date actions will be completed:	05/06/24
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How will people who use the service(s) be affected by you not meeting this regulation until this date?

The standard of care and support provided to the people we support may not be at a standard the people we support, their families, Mencap, the local authority and CQC expect. This may result in a lack of trust and a loss of reputation with our key stakeholders.

While a number of these actions will be completed before 05/06/2024, we have agreed on this date to ensure the actions are embedded and to allow for two full cycles of the one-to-one meetings and one full cycle of the Registered Manager service visits.

The action plan for Sunnyside following its quality health check in September, will also be completed by this time.

The Quality Improvement action plan developed following the CQC inspection, will also be completed by this time.

Completed by: (please print name(s) in full)	Area Operations Manager / Registered Manager
Position(s):	Area Operations Manager / Registered Manager
Date:	02/01/2024