

PRN CQC Action Plan

Date: January 2020

	Areas Requiring Improvement	Action	Completed By	Date to be Completed
1	Safe/Effective – Personalised Care/managing risks Peoples care plans did not always have relevant information about risks associated with peoples diagnosed health conditions.	Care plans will be reviewed to include personalised guidance from health professionals regarding conditions and what are safe parameters for customers i.e. Blood sugar levels. Discussion with customers about how conditions manifest themselves and record this information on care plan. This assessment will also include specific dietary requirements which will ensure carers are promoting healthy food choices for individuals.	Provider manager and senior staff and carers.	This work has started for all existing customers and will be completed by June 2020. This will now be standard practice for any new customers.
2	Safe – Staffing and Recruitment. Full employment history was not always recorded on application forms.	Full employment history will be collected from existing staff and recorded on their application form. This will be standard practice for all new members of staff.	Manager and Office staff.	This work has been completed. Completion date: Jan 2020.
3	Effective – Mental Capacity Staff had not received standalone MCA training.	Staff to undertake Mental Capacity training using the WSCC Learning and Development Gateway.	All members of staff.	To be completed by May 2020, we will update again when the Liberty Safeguards are updated later this year.
4	Effective – Mental Capacity Decisions taken on behalf of people had not been recorded as part of the care planning process in accordance with the Mental Capacity Act.	Ensure that MCA assessments are completed to demonstrate capacity had been taken into consideration, following these assessments those that need	Provider Manager, Senior carers and carers.	To be completed by June 2020 and ongoing.

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		support to understand and make decisions are supported to do so, under best interest with least restriction possible. Decisions to be recorded appropriately.		
5	Effective – Deprivation of Liberty Did not recognise the need to request an assessment for a community Deprivation of Liberty Safeguard authorisation from the Local Authority.	Request has been made to the local authority for community DoL assessment.	Provider Manager	Completed. Completion date: Jan 2020
6	Responsive – Personalised care planning Care plans do not fully reflect people's life history's, hobbies, interest's, culture, religion and sexuality.	To ensure this is captured more information to be gained from customer's family and friends. This will be achieved by completing a 'This is Me' with each customer where appropriate. This will support staff and the personalised care that they are providing to customers.	Manager, senior carers and carers.	To be completed by August 2020 and will be on going.
7	Well led / Safe – Notifications Not all safeguard concerns were notified to CQC.	All safeguarding concerns to be notified to CQC as and when they are raised.	Manager or Provider.	Completed: All notifications have been sent to CQC following inspection. This will be ongoing.
8	Well Led – Auditing and governance. Quality assurance was not robust and lacked analysis and did not identify themes or trends.	Reports have now been assessed and amended to included analysis which will enable themes and trends to be identified.	Provider, Manager.	This work has been completed. Analysis will be on going to ensure the safe and effective delivery of care to our customer's.