

October 2021 Overall action plan & Report of Actions

Account Number:	1-128592554
CQC Reference:	INS2-11628929951
Location:	Green Lane

CQC inspection findings		Our response	Our immediate actions	Actions to be completed	Deadline for completion	Who is responsible for action?
<p>Safe</p> <p>Preventing and controlling infection</p> <p>We were not always assured that the provider was promoting safety through the layout and hygiene practices of the premises.</p> <p>We were not always assured that the provider was using PPE effectively and safely.</p> <p>(Inspection report-Page 7)</p>	<p>There was no clear cleaning schedule dedicated to the kitchen and food preparation areas.</p> <p>We recommend the provider ensures staff consistently complete cleaning rotas and maintain kitchen hygiene.</p>	<p>We have supported the staff to ensure that they record both when cleaning is scheduled and then the evidence that it has been completed. There will be meeting with staff and people living at the service to ensure that everyone understands why we are asking people to follow them</p>	<p>We have implemented a new cleaning schedule</p> <p>We were audited by Environmental Health 'Scores on the Doors' on 29/10/2021 and scored 5.</p>	<p>We are sourcing a contract with a cleaning company to both clean and also provide a deep cleaning schedule for the service</p>	<p>End of November 2021 to evidence success</p> <p>End of December for deep clean and new contractor schedule</p> <p>End of October for new staff cleaning recording</p>	<p>Cleaner to complete</p> <p>Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability</p> <p>Will be audited in November 2021 by the Head of Operations</p>
	<p>Checks had also not been completed on containers of food that had been opened and not "date stamped" so it was not possible to confirm when the food had been opened. This increased the risk of people not knowing when food was out of date.</p> <p>We recommend the provider ensures staff</p>	<p>We have supported the staff to ensure that they record both when food is put into the fridge and also when opened and when checked</p>	<p>We have implemented a new cleaning schedule and a new food safety checks with staff.</p> <p>New Date stickers have been purchased & are now being utilised</p> <p>We were audited by Environmental</p>		<p>Completed</p>	<p>Cook and Cleaner to complete</p> <p>Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability</p> <p>Will be audited in November 2021 by the Head of Operations</p>

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	consistently complete cleaning rotas and maintain kitchen hygiene.		Health 'Scores on the Doors' on 29/10/2021 and scored 5.				
	<p>There were no pedal bins for staff to dispose of personal protective equipment (PPE) in a safe way. Used masks and aprons were put in bins in the main office that did not have lids.</p> <p>We recommend the provider ensures staff consistently complete cleaning rotas and maintain kitchen hygiene.</p>	This was an oversight as the original bin was being used for other purposes.	A new bin has been purchased & is now used solely for the disposal of PPE & staff directed to the new working protocol	Completed	<p>Staff team to use Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability</p> <p>Will be audited in November 2021 by the Head of Operations</p>		
	One member of staff was seen to enter the building without a face mask and another member of staff were seen on occasions to wear face masks only covering their mouth area, this is not in line with government guidance. However, there had been one confirmed case of COVID-19 in the home and the staff had ensured that no	Staff have been reminded to correctly wear PPE at all times. This will include refresher training	Covid protocols have been reinforced & backed up by new information posters	All staff will have refresher training on PPE usage including 'Donning & Doffing'	12/11/2021	<p>Staff to do Service Management Team and the Operations and Development Manager (ODM) to complete checks and ensure sustainability</p> <p>Will be audited in November 2021 by the Head of Operations</p>	

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	other people or care staff had been infected.					
Responsive Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them	People were not always supported with meaningful activities that were suited to their hobbies and preferences.	This has been impacted by a staffing pressures with most activities being 'In-House'. We are looking at ways to expand these opportunities.	We are proactively recruiting & Interviews were held (18-19 /10) and x2 RW & x1 RW (W/N) staff have been recruited (subject to paperwork).	X2 RW roles are outstanding & adverts will continue	Service staffed to current establishment by Feb 2022	ODM to complete with the Service Management Team and the Operations and Development Manager (ODM) to ensure sustainability Will be audited in March 2022 by the Head of Operations
	With an absence of a full-time activities co-ordinator staff did not always feel that they had time to follow up on meaningful activities.	We will review the establishment & look at how we can increase staff capacity whilst remaining financially viable.	We have reviewed the establishment	Submit new establishment in budget setting meeting (in the second week of November)	Increase the establishment to accurately reflect the needs of the current (& future) SU needs.	Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability Will be audited in November 2021 by the Head of Operations
Planning personalised care to ensure people have choice and control and to meet their needs and preferences	Some activities had been organised such as a trip to the driving range, the beach and Thorpe Park. One person said, "We have done a few activities but not really that much, I liked the driving range but we only did it once but I also realise the pandemic has played a part. I	As noted, staffing pressures have impacted the ability of staff to support SU's with activities in the community. New activities have been planned in the community.	These will include a Fireworks Display, Golf Day et al	A new Fire Rated Noticeboard has been ordered & a 'Brilliant Box' is in situ to provided better opportunities for SUs to suggest activity options & better communications about them.	Active now, & ongoing	Staff to organise further activities Service Management Team and the Operations and Development Manager(ODM) to implement time to do this and ensure sustainability Will be audited in November 2021 & March

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<p>(Inspection report Page 13)</p>	<p>would like to do more."</p> <p>We recommend the provider consider more frequent and meaningful activities for people.</p>					<p>2022 by the Head of Operations</p>
	<p>Care plans detailed people's preferences, however, this was not always reflected in certain areas of support provided to people. For example, the menu for the home did not reflect people's diet preferences and needs. The choice was also limited due to only being refreshed and changed approximately every four to six months. People had not been involved in the development of menus, and people were not frequently involved in preparation or cooking of meals.</p>	<p>We have supported the staff to ensure that they record both when food was offered and suggested based on personal preference and then the evidence of what was consumed. Access to the kitchen and time of people being involved in their food choices has started.</p>	<p>Dietary preferences meetings & menu suggestions will now form part of the Key-working process with the information shared with the cook.</p>	<p>A new menu suggestion board has been purchased in order to facilitate the ability for SUs to suggest dishes 'on the go'.</p>	<p>Nov 2021 - Initial meeting of the GL Food improvement Group (SU led) Dec 2021 - New Menus that include dietary choices rolled-out</p>	<p>Staff to record and complete</p> <p>Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability</p> <p>Will be audited in November 2021 & March 2022 by the Head of Operations</p>
	<p>People told us that they always enjoyed the food, however, due to the menu not</p>	<p>We will switch the Menus from the traditional Summer/Winter to a</p>	<p>A Food Hygiene Level 3 course has been sourced; this will give the cook</p>	<p>The snack station will be expanded to enable more food</p>	<p>Nov 2021 - Initial meeting of the GL Food improvement Group (SU led)</p>	<p>Service Management Team and the Operations and Development Manager</p>

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	being changed regularly that element of choice was not always available for people to try new recipes.	'Week Prior' system that will enable greater rotation & choice. We will offer x3 choices for the main meal each day & the choices will be led by SU preferences.	the qualification to support SUs develop their individual cooking skills.	choices to be available. ODM & Green Lane SRW have a meeting planned with the cook at Clifton House (09/11) to gain from her knowledge & experience.	Dec 2021 - New Menus that include dietary choices rolled-out	(ODM) to implement and ensure sustainability Will be audited in November 2021 & March 2022 by the Head of Operations
Well-led Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements (Inspection report- Page 15)	<p>The registered manager had been absent from the home for an extended period of time and then had left their post just before our inspection. This had led to some management "walk around" style audits not being completed. This was highlighted in the kitchen cleaning and food hygiene checks not being completed consistently, and records not being completed accurately to ensure safe practices.</p>	<p>New forms have been designed & will be used until a more efficient system can be implemented that gives a higher-level overview. This will be reviewed with any new manager for oversight</p> <p>NB The organisation is completing a systems review regarding all levels of electronic recording. We hope to implement any of its actions in 2022/23</p>	<p>New, more detailed forms have been developed for the interim as dedicated H&S (including IPC) systems are explored.</p> <p>(Forms attached)</p>	<p>New system implemented</p>	<p>Nov 2021 – Scoping exercise of suitable systems commences Jan 2022 - Short list of suitable digital systems to be submitted to SLT for consideration.</p> <p>April 2022 - Trial started of chosen system.</p>	<p>Operations and Development Manager (ODM) to implement and ensure sustainability</p>
	<p>There were cleaning schedules in place in the home. However, these were not consistently</p>	<p>This has now been reiterated to all staff & It is hoped that now we have recruited x3 staff</p>	<p>Recruitment efforts continue & this will, over time, reduce our over reliance on Agency staff.</p>	<p>Service staffed to current establishment by Feb 2022</p>	<p>Service Management Team and the Operations and Development Manager</p>	

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	<p>completed by some agency and weekend staff. This meant that it was not possible to establish whether certain cleaning responsibilities had been completed. If these had not been completed, the risk was increased for the potential of infection spreading.</p>	<p>(including a Waking Night worker) a better understanding of responsibilities will evolve as the reliance on Agency workers reduces.</p>			<p>(ODM) to implement and ensure sustainability</p> <p>Will be audited in March 2022 by the Head of Operations</p>
	<p>The concerns we had found regarding meaningful activities had not been highlighted as there was no permanent registered manager in post. This meant that people were not receiving care responsive to all of their needs and which took into account their preferences.</p>	<p>We are advertising for a Registered Manager through a number of channels. We have adjusted the pay rate upwards to make the position more attractive to potential candidates as our previous recruitment via agency fixed term in September and October was not successful (via 10 agencies).</p>	<p>This will continue until we have recruited a Registered Manager in post</p>	<p>W/C 22/11 – shortlisting W/C 06/12 - Interviews Jan 2022 – Registered Manager in place</p>	<p>Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability</p> <p>Will be audited in March 2022 by the Head of Operations</p>
	<p>The provider completed quality assurance audits, however, these had not identified the concerns found at the inspection.</p>	<p>We are in the process of reviewing our auditing systems</p>	<p>We will source alternative Auditing tools that provide better oversight</p>	<p>Nov 2021 – Scoping exercise of suitable systems commences Jan 2022 - Short list of suitable digital systems to be submitted to our Senior Leadership</p>	<p>Service Management Team and the Operations and Development Manager (ODM) to implement and ensure sustainability</p>

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				Team for consideration. April 2022 - Trial started of chosen system.	Will be audited in March 2022 by the Head of Operations
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Regulated activity	Good governance	Provider Actions	Who is responsible for this?
<p>Regulation Accommodation for persons who require nursing or personal care Regulation 17 HSCA RA Regulations 2014</p> <p>(Inspection report- Page 17)</p>	<p>The registered provider had failed to establish effective systems to assess, monitor and improve the quality and safety of the service.</p>	<p>We have been actively sourcing a Registered Manager from an agency since summer 2021- as well as looking for day to day oversight at the service from within our management team across our organisation and have approached multiple candidates. National recruitment issues are impacting our search for a manager and the ten agencies we have contacted do not have suitable staff.</p> <p>We have increased the salary offer to ensure that the role is competitive and attracts candidates. Our timeline is as follows-</p> <p>W/C 18/11 - relisted advert W/C 22/11 - shortlisting W/C 06/12 - interviews Jan 2022 - Registered Manager in place</p>	<p>Operations and Development Manager (ODM) to implement and ensure sustainability</p> <p>Will be audited in March 2022 by the Head of Operations</p>

Completed by the Head of Operations and Development (Nominated Individual) Sarah Thompson Turvey

28/10/2021