

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	1-2813137559
Our reference	INS2-4565421875
Location name	William and Patricia Venton Centre

Regulated activity	Regulation
Personal care	Regulation 17 Good governance
	How the regulation was not being met:
	<i>The provider had not ensured good governance had been maintained. Appropriate systems and processes were not in place to fully assess, monitor and improve the quality and safety of the service provided.</i> <i>17(1) (2a) (2b) (2c)</i>

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

A When Required Medication Guidance (Protocol) has been written and issued to staff since the inspection as well as a When Required (PRN) Medication Plan which informs the staff of the medication, strength, route of administration, the dose and minimum time between doses, special instructions and reason for administration. This will increase staff's confidence in administering and documenting when medication has been given.

Train the trainer medication training has been booked for the Registered Manager and Senior Care and Support Worker in February 2019 so regular training and workshops can be undertaken in house to improve confidence, medication awareness and improve recordings on MAR charts. The Senior has, since the Inspection been shown how to audit the MAR charts monthly and address any shortfalls, further guidance will be given to undertake full medication audits.

New coloured coded body map charts have now been introduced for staff applying topical creams to inform them of where the cream is to be applied.

Person Centred Care and Support Plans are now being completed for all clients and contain detailed information specifying exactly what support the client needs and their preferences on how the tasks are to be carried out. The office held files are being changed to mirror the client held files in order to ensure that all information held is current and up to date. The notes held on Care Planner are being updated so the information is consistent with paper copies. Staff have been informed of the new Person Centred Care and Support Plan and have been encouraged to let the office know if they feel there is anything to be updated.

One of the staff identified in the report who does not have access to a computer at home has

now completed all the on line training and has completed a classroom based Safeguarding course with ESCC. The other member of staff identified in the report has been allocated time to complete training in the office. The training is to be monitored closely and is a priority. The monthly Quality Audits will now include checking that the information held on clients file is the most up to date and that the on lines notes are consistent with the Care Plans.

Who is responsible for the action? | Amanda Kennedy

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?

A lot of the improvements have been made already and are sustainable as the Registered Manager has met with the Senior Care and Support Worker who is now responsible for auditing the medication paperwork and will be delivering medication training alongside the Registered Manager.

The Care Co ordinator is responsible for ensuring staff are completing the on line courses and booking them on to external training when available.

On the Monthly Quality Assurance report the Registered Manager will ask for a report on training and medication and will check on the accuracy of information held on client files and Care Planner system and reflect this in my report.

Who is responsible? | Amanda Kennedy, Tanya Martin and Jenni Obinkwo

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

External Train The Trainer is booked, no additional resources needed to implement the improvements.

Date actions will be completed: | 28 February 2019

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

As most of the improvements have been put in place already the clients who use our service will not be affected by the service not meeting regulation 17 (1) (2a) (2b) (2c) by the 28

February 2019.

Completed by: (please print name(s) in full)	Amanda Kennedy
Position(s):	Registered Manager & Nominated Individual
Date:	02 January 2019