

The Action Plan Report

Lower Farm Nursing Home



11th January 2017



Lower Farm Nursing Home

126 Grimston Road
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IMALGO LIMITED

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The Lower Farm Nursing Home Action Plan

Introduction to this Report

The Action Plan is the foundation of a strategy to drive continuous improvement of the service provided to our residents at Lower Farm Nursing Home.

The first phase of the Action Plan is to implement the required changes to improve the service rating, as granted by the Care Quality Commission (CQC). The areas of development identified to achieve this have now been completed for the most part, however some actions will remain as “on-going” and any new issues identified will be added to the plan. For 2017, the focus of our care management is to ensure these improvements are sustainable in the long term.

The care management team at Lower Farm will continue to work with our staff, residents, relatives and the local authorities to ensure our service complies with the social care regulation and provides our residents with high quality care. The team will continue to update and send the Action Plan for review every 4 weeks, to the CQC and local authorities. ‘This’ report will be published to the public thereafter.



The Action Plan Team

The Lower Farm Management Team

The proprietor of Lower Farm Nursing Home (Imalgo Limited) have recruited a brand new care manager and improved the structure of management to ensure each area of development has complete focus.

Our new Registered Manager (RM) is Tina Moore (tina.moore@imalgo.com). Tina has experience in turning around nursing homes from an inadequate service rating to good and is now in charge of the Action Plan delivery.

While Tina will focus on operations and the home in general, Imalgo Limited have created a new sub-management role of “Clinical Lead”, who will be in-charge of ensuring our nurses and carers have the resources to deliver a high quality of service. We have promoted our own Sarah Tomkins (sarah.tomkins@imalgo.com) for this role.

Abdul Aziz Mukadam remains at Lower Farm as the Responsible Individual (RI) who will ensure the home operates to the expectations of the board of Imalgo Limited and the CQC.

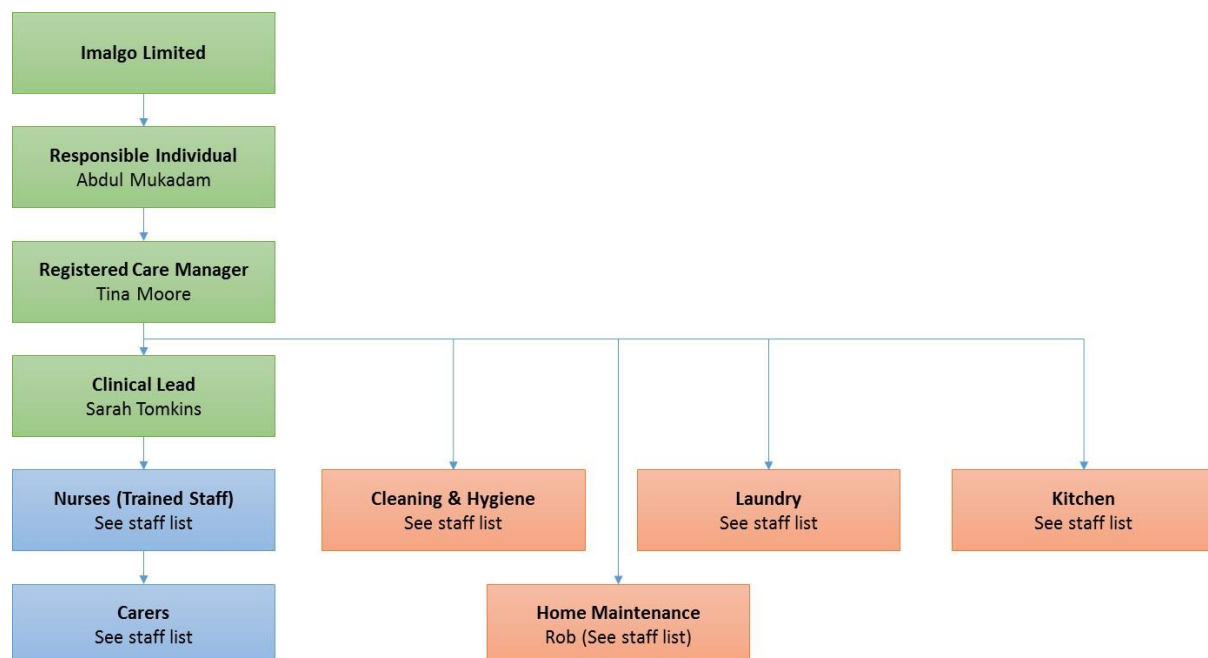


Figure 1: The new management structure at Lower Farm Nursing Home

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Robert Hammond (from Eastern Care Management Solutions) will continue to provide a consultancy service periodically to ensure the new team is on track to improve their service rating.

The Action Plan Focus

The First Phase

The Action Plan (Phase 1) is focussed on 2 key aspects:

1. Leadership (Is the service at Lower Farm well led?)
2. Safety (Is the service at Lower Farm safe?)

Each of these areas will have specific areas of development to ensure our service rating in these and other categories improves to a good and sustainable standard.

Leadership (Is the service well led?)

The leadership portion of the Action Plan will focus on the following areas:



Figure 2: Areas for improving leadership at Lower Farm

The aim of leadership is to demonstrate the provider and care management have systems in place to ensure the effective and safe delivery of care service to all our residents at Lower Farm Nursing Home.

Safety (Is the service safe?)

The safety portion of the Action Plan will focus on:

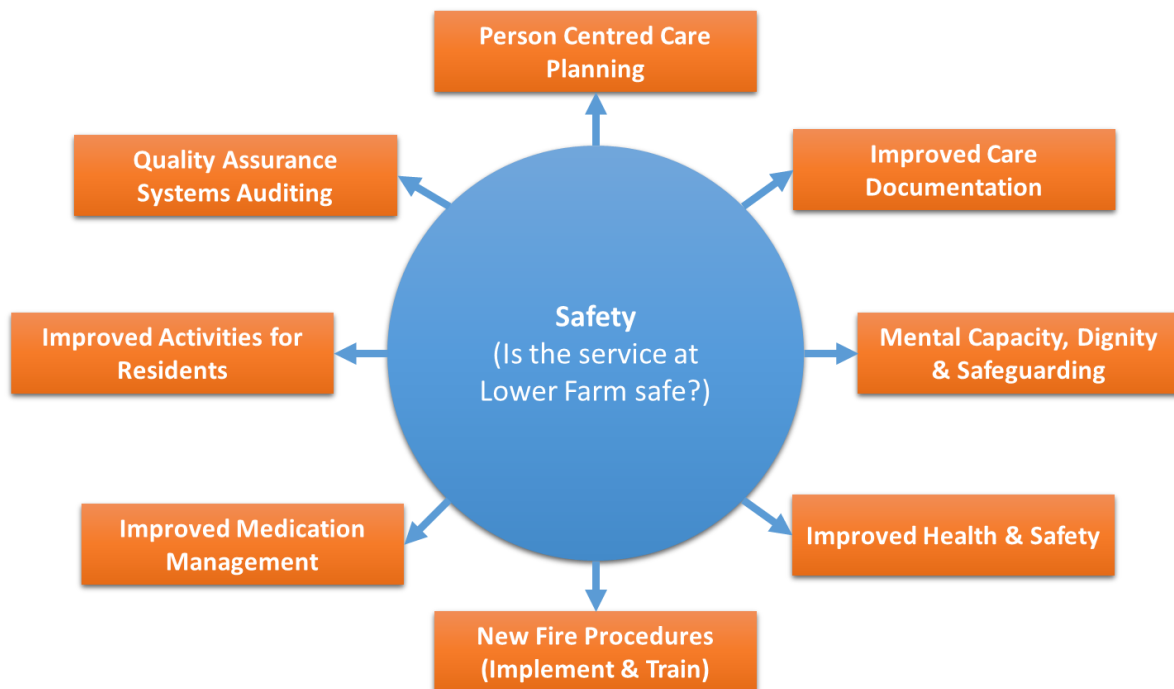


Figure 3: Areas for improving safety at Lower Farm Nursing Home

The aim of delivering an improved standard of safety is to demonstrate that the service provided at Lower Farm continues to reduce any risk to the physical and emotional wellbeing of our residents.

The Action Plan Progress

Progress to Date

Most of the areas of development stated in our initial Action Plan Report (dated 24th October 2016) have now been completed, with the exception of a few areas. Some actions such as recruitment will remain as “on-going” and any other defects identified in operations or quality of service will be added to the plan.

The keyword in 2017 is “sustainability”, to ensure the changes implemented are driven down to the front line and made sustainable for the long term.

Leadership

Recruitment of New Management Team

Actions Completed

- Recruited new Registered Manager (Tina Moore)
- Created new role of Clinical Lead (Sarah Tomkins)

Recruitment of New Nurses & Carers

Actions Completed

- Full-time day nurse appointed
- New nurse for night time shift
- 4 new carers appointed (to date)
- Informal interview conducted for new administrator

Actions in Progress

- Recruitment to continue in 2017

New Staff Structure & Roles

Actions Completed

- Ensure staffing levels are adequate for demand

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- Rota planned 4 weeks in advance
- New Nurse “role descriptions” to define specific responsibilities
- Improve daily structure and routines for nurses to deliver service
- Develop the role NVQ carers and provide training in new responsibilities to deliver care
- Implement new dependency assessment tool
- New annual leave and review policy
- Record current staffing ratios and implement procedure to take action when staff is inadequate for current demand

Training & Supporting Staff

Actions Completed

- New sickness policy and procedure for calling sick
- Implement back-to-work interview and document
- Implement regular supervision and appraisals of staff
- Nurse competencies assessed regularly
- Issue new Staff Handbook (What is expected of all staff)
- Moving & handling “train the trainer” course completed to train staff (in-house) at Lower Farm
- New training matrix to audit staff training is up-to-date
- Training plan issued for each staff member

Reduce & Manage Agency Staff

Actions Completed

- Implement agency induction for carers and nurses to ensure they adhere to Lower Farm standards of practice
- Audit competency of agency team members
- Involve regular agency members in operational meetings and handovers

Improve Communications & Meetings

Actions Completed

- Monthly clinical meetings for nurses (trained staff)
- Quarterly meetings for support departments (kitchen, domestic, laundry & maintenance)
- Regular carers and activities meeting every quarter

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- New nurse handover procedure to include audit of daily checks

Actions in Progress

- Monthly management and owner meeting to track progress
- Weekly meetings with department heads to set weekly tasks

Develop Human Resources

Actions Completed

- Ensure all DBS records are on file for staff
- Audit HR files to identify risks and gaps
- Ensure all HR files have references
- Move files to new staff management office
- New format for staff files
- Procedure to record conversations with staff members, outside supervisions and appraisals
- New interview questions for nurses and carers
- Audit procedure to ensure qualifications and PIN numbers are up to date

Safety

Person Centred Care Planning

Actions Completed

- More detailed risk assessment for all residents
- Improve mental capacity assessments
- New instructional care plan index to guide nurses and carers
- New computer system and space to undertake care planning
- Transfer care plans to new format
- Review all care plans monthly and action any requirements
- New care plan audit system linked to new format

Improved Care Plan Documentation

Actions Completed

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- Review chart layouts and include nurse signatures and actions to be taken, to improve care plan auditing
- Implement record keeping awareness sessions to improve working practice culture
- Promote dignity and privacy of residents by employing new signage system
- Improved continence management by using new assessment tool

Mental Capacity, Dignity & Safeguarding

Actions Completed

- Ensure all Deprivation of Liberty Safeguarding (DoLS) applications are in place and practice is linked with care plan delivery
- Implement further training for staff regarding mental capacity
- Implement awareness sessions with staff and local safeguarding authorities, to improve working practice culture
- Pop-quiz to test staff awareness of mental capacity ready and to be implemented in January 2017
- Implement new mental capacity assessment tool and link to new care plan format

Improved Health & Safety

Actions Completed

- New Health & Safety Committee meets quarterly to review past and potential issues
- New generic risk assessment folder to ensure all areas of the home are evaluated
- New maintenance manual to include regular checks of the environment and equipment at set intervals
- New booklet to track maintenance jobs to be completed and signed off
- Sign post all COSHH (Control of Substances Hazardous to Health) storage areas
- Secure all sluice rooms with keypad
- Regular and documented checks of bath and shower temperatures
- Implement systems to audit slings used with hoists

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- Ensure mattresses and pressure relieving mattresses are checked daily by nurses
- Include risk assessment for residents who smoke
- Ensure staff respond to device alerts and medication

New Fire Procedures

Actions Completed

- New contingency plan to include fire, flood, issues with water, gas, heating, freezing temperature and infection outbreaks
- Fire training for all staff
- Pop-quiz to test staff regularly on fire evacuation procedures
- Regular fire drills to test staff performance
- Regular night fire drills to ensure night staff are trained and aware
- Personal Evacuation Plans for each resident, depending on personal mobility and health
- Purchase and train staff in new evacuation equipment
- Train and appoint several fire wardens so each shift is covered
- Review and implement new fire risk assessment (Ace Fire and local fire officer and helping to develop new procedures)

Improved Medication Management

Actions Completed

- New system by Boots Pharmacy to improve medication administration and audit to be implemented in January 2017
- New security grill for medication room
- Daily handovers to include medication audit for that day
- Continue monthly medication audit

Improved Activities for Residents

Actions Completed

- Plan activities for each month and advertise in notice areas
- Detailed job description for activities coordinator
- Ensure supervision and appraisal of activities coordinator
- Clear area for activities
- Implement "This is your life" type questionnaire for all residents, so staff have knowledge of their life that can be used in activities

Quality Assurance Systems Auditing

Actions Completed

- Regular management walk around to conduct spot checks
- Monthly provider visit to review and audit all areas of the home and operations
- Monitor response times to call bells
- Quarterly night visits (unannounced) to conduct spot checks during night shift
- Implement clinical audits to identify areas of improvement
- Quarterly Health & Safety Committee meetings
- Quarterly audit of Infection Control
- Quarterly care plan audit
- Quarterly dining experience audit
- Quarterly dignity and resident involvement audit
- Monthly kitchen spot checks
- Monthly domestic and laundry checks