

# Action plan for Oulton Park



Dear Sir or Madam,

We thought it might be useful to residents, potential residents, their relatives and friends to summarise our response to the Care Quality Commission's latest inspection report, carried out in November 2018.

We were grateful that the Care Quality Commission noted good practice in many areas, including rating us 'good' for being 'effective' and 'caring'. For example they noted that: 'People and their relatives told us that staff were caring and treated them with kindness and compassion. One person said, "The care is really good. There was a nurse [relative] never took to but she has gone now. The others are really caring, [relative] has been really well looked after." A relative told us, "[Relatives'] care. I can't fault it. They are there if you need anything. They are so accommodating...' 'People's right to privacy and to be treated with dignity was respected. People's care plans reflected human rights and values such as people's right to privacy, dignity, independence and choice.'

The Care Quality Commission's overall rating for Oulton Park was that it 'requires improvement', however, singling out three areas at the time of their inspection. We value the Care Quality Commission's view of how we deliver care and recognise that we need to do better in some specific areas.

We are already addressing issues identified in the report but there are areas in which ongoing work is needed, and we want to reassure you that we are taking appropriate actions. We believe that setting out these actions will help understanding of the inspection report and how we are improving the care we offer.

## Report findings and actions

*The Care Quality Commission asked us to ensure that medication is always managed and administered safely.*

To ensure that we improve in this area:

- We have revisited staff competencies in line with the organisation policy and involved Clinical Development Nurses in addressing training needs.
- We are working closely with a pharmacist and a Medicines Optimisation Pharmacy Technician from the local Clinical Commissioning Group, who are providing additional training and support for all medication trained staff. Alongside our



internal weekly checks this highlights the need for reflective supervision for those staff identified, to ensure the nurse is aware of and responding to her responsibility.

- Our local Boots pharmacy provide us with training and regular audits as well as completing our own monthly Barchester audits. Audit findings have been reviewed to identify and share good practice, and actions implemented to address identified issues.
- We have also introduced an additional Medication Administration Record chart check in line with our 'Resident of the Day' initiative, which helps identify medicines management issues.
- We are monitoring completion of medication administration documentation, ensuring that all hand written entries and disposal of medication is signed off by two people, and that all medication is dated on opening. We will continue to monitor this action plan monthly to ensure improvement in this area is sustained.
- The Head of Unit is carrying out random daily medication checks, ensuring nurses have understood the importance of medication management.
- The General Manager has supplied the unit with pocket alarms for the timed medications, there are also laminated reminders in with the MAR charts.
- The General Manager is reviewing the use of medication trained care Practitioners to support nurse when administering medication.
- There is now a Head of Unit and Senior Nurse for Beech and a Head of Unit and a Senior Nurse to oversee the management of Hawthorn and Poplar. With new structures in place, Heads of Unit now take control of the units and medication management. Daily 'walk arounds' and internal audits evidence improvements.
- External audit of progress will continue to be provided by Boots and the CCG. We have regular visits from our Quality Improvement team who will also look closely at this area.

*The Care Quality Commission asked us to ensure that care plans always reflect appropriate risk assessments.*

To ensure that we improve in this area:

- All staff involved in completing resident care profiles are reminded of the importance of completing full and accurate risk assessments according to individually assessed resident risks. Staff are also reminded of the need to review and revisit risk assessments at regular intervals and/or when resident's need change. This is discussed at staff and clinical governance meetings.
- The General Manager and Deputy Manager are carrying out more frequent documentation checks, along with regular internal audits from Barchester's support services (Clinical Development Nurses, Quality Improvement Teams and Regulation Managers).
- Documentation has been simplified and support staff are receiving more in-depth training on its importance. This training is coordinated by the General Manager, provided by the Clinical Development Nurses and external professional pharmacy partners.



- The General Manager and Deputy Manager are carrying out daily walk rounds, during which documentation is checked
- Clinical Development Nurses and the training department are providing training.
- Support staff have been given the Barchester documentation workbook and are discussing it at supervision.

### ***Accountability for change***

We are pleased that the Care Quality Commission noted good practice in important areas of our work at Oulton Park, rating it 'good' in terms of being 'effective' and 'caring'. We were pleased that they recorded that: 'People told us they believed staff had the knowledge to carry out their role. One person said, "They are all nice girls. I think they know what they are doing." All staff we spoke with told us they were provided with training and support that enabled them to do their job and meet people's needs.' And: 'People told us that they received support to access healthcare. One person said, "If I need to see a doctor I will see one... We spoke with care staff from the local GP surgery who visited the service once a week. They described a positive relationship with the service and a good working relationship.

They also said: 'We spoke with people about how they were supported with choice in their daily lives. The majority of the feedback was positive with one person saying "I get choice, me meals, drink, I go to bed when I like and in the morning, I can lay in if I want. They wash me every day and I can have a shower if I want." Another person said, "I can lay in if I want and go to bed when I want." However, one person said, "Well each morning someone gets me up, I don't have any choice, it's the system. I have to accept the care I'm given." We discussed these comments with the management team. They explained recent problems with staffing in the service which had been addressed. They believed that changes which had been made were resulting in improved care - which was demonstrated by the positive comments we received.'

We believe we can demonstrate we are making progress and that quality of life for residents increasingly reflects the dedication and skills of our staff. However, we know that we need to improve in some specific areas. We are working to ensure that we meet Care Quality Commission requirements. We are monitoring our progress carefully, audited through regular visits from senior managers: our progress will also be monitored by the Care Quality Commission.

As the newly appointed General Manager for Oulton Park Care Centre these actions are currently accountable to me. If you would like to talk about any of the issues this raises I and my team would be pleased to do so.

Sincerely,

Agnes Flynn,

General Manager

31/01/2019

