



## **ACTIONS TAKEN FROM CQC INSPECTION (MARCH 2023)**

### **SAFE**

#### **Comment taken from inspection report dated March 2023:**

*"A staff member informed CQC they had told the manager that someone was not taking their medicines, and their health was declining. They didn't know if the Manager had done anything about it."*

#### **Response from ApproCare:**

The Registered Provider (Mrs Emma Lumsden) was not aware or made aware of this prior to this time however upon hearing this, steps taken were as follows:

1. Registered Provider emailed ALL staff directly to ask if they had any new or ongoing issues with clients – chased for responses from every member of staff even if it was just to confirm there were no issues.
2. The Registered Manager, who was employed at the time of inspection, is no longer employed by ApproCare and a DBS Barring application was made against this individual. Since December 2023 we have reverted back to the management structure we had previously and at times of all our previous 'good' CQC ratings.
3. At the time of the requires improvement inspection (March 2023), we were using a paper MAR system and paper based care notes. This resulted in manual paper based audits upon the retrieval of the paper based records that were kept in individuals homes. The Registered Manager was responsible for the auditing and monitoring of all MAR's.  
ApproCare have since adopted the use of digital social care records including eMAR's. This system alerts all the management team in real time if a medication is not taken and a reason why. We can also view the care records in real time including any changes to a person's needs. This has resulted in management being able to act promptly and engage with the relevant health professional (i.e. GP) if there are any concerns.

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#### **Comment taken from inspection report dated March 2023:**

*"Staff were not confident in identifying and reporting safeguarding concerns to external authorities"*

#### **Response from ApproCare:**

At the time of this inspection all policies and procedures were reviewed by the Registered Manager and were stored paper based in the ApproCare office. This meant staff could not always access them freely.

1. In the first instance of this report, The Registered Provider (Ms Emma Lumsden) ensured that all existing staff were emailed a copy of the policy reminding them of clear procedures regarding this, points of contact, etc.
2. Since this time, we have transferred policies and procedures online using our password protected all-round care management app for our staff that is linked with digital social care records, their rotas, etc. This also has a feature that staff can sign off when they have read the relevant policy/procedure evidencing their clear understanding. The staff member can refer back to these at any time within their employment.
3. This also forms part of our in-house training delivered by our designated Care Trainer employed by

ApproCare. Since this inspection there have been improvements to all staff training.

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**Comment taken from inspection report dated March 2023:**

*"A member of staff told CQC sometimes clients don't have care plans in their folder at their home so staff did not know how they were supposed to be supporting that person.*

*A member of staff told CQC if we get a new client we aren't told what to do or what's wrong with them and staff were not given additional time to review the persons care plan prior to the persons visit or during it.*

*Staff did not monitor people's food and fluids intake where required. Records show bowel movements were not passed for 4 days, [actions to be taken were not recorded in this instance]. The Registered Manager was unable to confirm if this presented a risk to the person or if this was a failure in staff recording practices"*

**Response from ApproCare:**

1. The Registered Manager who was employed at time of this inspection was responsible for ensuring assessments and care plans were completed and adhered to.
  2. The Registered Manager, who was employed at the time of inspection, is no longer employed by ApproCare and a DBS Barring application was made against this individual. Since December 2023 we have reverted back to the management structure we had previously and at times of all our previous 'good' CQC ratings.
  3. Assessments and care plans are now digital and more comprehensive. Staff members assigned to that individual can view the care plan prior to the visit. We also have a feature that shows us that the staff member has viewed the care plan of the individual they are attending.
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**WELL LED**

**Comment taken from inspection report dated March 2023:**

*"Daily notes completed by staff showed risks were not effectively identified, monitored, escalated and responded to. Records did not include actions taken by staff to reduce/manage risks of people not taking their medication, failing to have bowel movement for days or confirming people's food and/or fluid consumption.*

*Staff were not provided with quality training to meet the needs of all individuals using their service.*

*Effective systems were not in place to ensure staff were always up to date with their training.*

*The Registered Manager had not completed some safeguarding notifications [statutory notifications] as required".*

1. One of the main improvements we have seen in the well led domain is a change of leadership and management structure. The Registered Manager, who was employed at the time of inspection, is no longer employed by ApproCare and a DBS Barring application was made against this individual. Since December 2023 we have reverted back to the management structure we had previously and at times of all our previous 'good' CQC ratings.
2. One of the other main improvements is the introduction of digital social care records including eMAR, digital bowel/urine charts, digital diet/fluid charts – with alerts received to all management in real time of any concerns so they can be acted upon swiftly. We are also in the process of implementing photo based food and fluid charts to compliment the written information within the chart (so the staff member can upload a picture of the food/drink provided to the client as well as the amount consumed in the form of photographic evidence).
3. Training improvements - an overhaul of our training programme and the employment of a

designated in house Care Trainer (since December 2023) has seen dramatic improvements in this area. Feedback received on training evaluation forms are positive. Feedback received from stakeholders as a result of these changes has been positive.

4. The Registered Provider now completes any statutory notifications to CQC as necessary