

STATUTORY REQUIREMENTS				
No.	Standard	Regulation	Action being taken to address requirements	Timescale for action
1	OP3	14(1) 17(1)(a) Sch1(a)	Our pre-admission assessment tool is enclosed. This is used for all assessments before a decision to admit from home, hospital or another care home is made.	Completed
2	OP4	13(4) 14(4)(2), 15(1)(2)	All the key workers are aware and are assessing those at risk of falling; using the format you have seen.	
3	OP7	15(2)	Care plans and risk assessments are now reviewed monthly	Completed
4	60P 8,26,30,38	13(3), 18(1)(A), 24(1)	<p>Following your last unannounced inspection we have purchased blue and white aprons. One colour code for feeding and general care and the other for toileting.</p> <p>Our residents are not generally infectious, neither do they have communicable diseases nor are any “barrier nursed” at the moment.</p> <p>Latex gloves are in constant use as is hand washing at all times. Hand washing prevents any potential cross-infection between residents.</p> <p>There is a balance between infection control and resident dignity. Staff have now been told that if they are in contact with body fluids – faeces, urine, vomit, blood being the most likely – that they would automatically dispose of gloves. There is no need to wear gloves for general care of residents and feeding.</p>	
5	OP9	13(2)	I have heard from Lloyds Pharmacy that they now have a Waste Management License. Whilst I am still awaiting a response to my letters of concern regarding this issue from my MP and from CSCI Pharmacist who has not acknowledged my email. I am not happy that our service users receiving personal care will be penalised and the fact that it is the owner of the medication that is the issue and not the medication itself. I will wait for a response from DOH.	
6	OP37 OP16, 37	17(2) Sch. 4, 11	Our records of complaints and compliments is now up to date; including the latest CSCI investigation	Completed

7	OP 18, 29	19	This has been rectified.	Completed
8	OP 29, 37	19 Sch. 2.1, 2.2, 2.6	Recent photographs will be taken and included on files of current staff. New staff will have a photo taken upon commencement. The current Staff Application Form is amended to include a 10 year Employment History chart; with dates of commencement and leaving and reason for leaving. Any gaps in employment history can be checked. There are now forms for recording CRB information (taken from the Pro-forma pdf file on the CSCI website). The actual CRB disclosure forms are shredded in accordance to the CRB and DPA policies.	Ongoing
9	OP33	24(1)(a) (b)	We are repeating the Quality Assurance exercise of February 2005, by sending out relative questionnaires and others to professionals visiting the home. Other Quality Assurance controls will be made.	Ongoing

No.	Refer to Standard	Action being taken to address recommendations
1	OP38	Notwithstanding that this issue has been resurrected, and then “laid to rest” many times by Inspectors. We are now building up the sides of the brick structure which stores the yellow bags, and fitting a LID to it; therefore making the container TOTALLY enclosed on all planes. This lid should fulfil your recommendations without us having to use a wheeled “paladin”.