# **ACME LIMITED**

#### **CQC INSPECTION AUDIT**



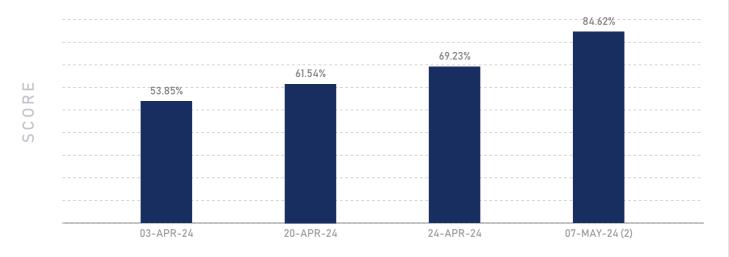
Porter Building | London, UK,

WEDNESDAY 8th May 2024

98.08%

(51.0/52.0)

HISTORY



## DESCRIPTION

Here you can add a standard description of this report, customized to the specific needs of your organization.

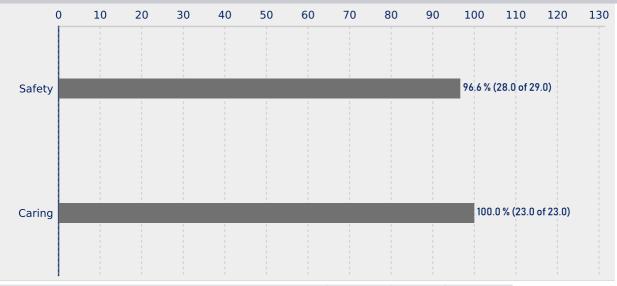
#### SUMMARY

I can observe evident progress compared to previous visits. However, clinical records of transferred residents is incomplete.

Plan of Action

Instruct the Administrator to maintain clinical records of transferred residents.

## **SCORE BY SECTION**



Section	Actual	Target	%
Safety	28.0	29.0	96.6
Caring	23.0	23.0	100.0

SAF	ETY			(28	3/29)	96.69	%	
Q#	QUESTION	SCORE	RESPONSE	PREVI	0US			
1	Systems, processes and practices keep people safe and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	safeguarded from abuse.			Yes	Yes	Yes	Yes	
2	Safety and safeguarding systems, processes and practices are	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	developed, implemented and communicated to staff.			Yes	Yes	Yes	No	
3	People are protected from discrimination (any abuse or cause of	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	psychological).			No	No	No	Yes	
4	Safety is promoted in recruitment practice, arrangements in place	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	to support staff, disciplinary procedures, and ongoing checks carried out.			Yes	Yes	Yes	No	
5	Staff receive effective training in safety systems, processes and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	practices.			Yes	Yes	Yes	Yes	
	Staff received effective training. They attend quarterly sessions.							
6	Staff understand their responsibilities and adhere to	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	safeguarding policies and procedures.			Yes	No	No	Yes	
7	If arrangements for using bank, agency and locum are made, you	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	ensure staff keep people safe at all times.			Yes	Yes	Yes	No	
8	Comprehensive risk assessments are carried out for people who	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	use services and risk management plans are developed in line with the national guidance.			No	Yes	No	Yes	
9	Impact on safety is assessed and monitored when carrying out	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	changes to the service or the staff.			Yes	No	Yes	No	
10	Residents have individual care records present (including clinical	(0/1)	NO	07.May	24.Apr	20.Apr	03.Apr	
	data, written and managed).			Yes	Yes	Yes	Yes	



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#### ${\bf Clinical\, records\, of\, transferred\, residents\, is\, incomplete}.$

 $\label{lem:action:lostruct} Action: Instruct the Administrator to maintain clinical records of transferred residents.$ 

11 All staff ensure the pro	All staff ensure the proper and safe use of medicines.	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
				Yes	Yes	No	No	
12	Medicines are appropriately prescribed, administered and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	supplied to residents.			Yes	No	Yes	Yes	
13 Care home ensures that residents receive their medicines as	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr		
	intended and recorded appropriately.			Yes	Yes	Yes	No	
14	Residents' medicines are regularly reviewed, including the use of	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	'when required' medicines.			Yes	Yes	No	Yes	
15	Care home ensures that residents' behaviour is not controlled by excessive or inappropriate use of medicines.	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	

Effe	ctive							
Q#	QUESTION	SCORE	RESPONSE	PREVI	0US			
6	Lessons are learned and improvements are made when things go	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	wrong.			No	Yes	Yes	Yes	
7	Technology and equipment is used to enhance the delivery of	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	effective care and treatment and to support residents' independence.			Yes	Yes	No	No	
8	Staff are aware of the MHA Code of Practice and the rights of	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	residents are protected by the Mental Health Act 1983.			Yes	No	Yes	Yes	
9	Information about the outcomes of residents' care and treatment	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	are routinely collected and monitored.			Yes	Yes	Yes	No	
20	Care home ensures that staff have the skills, knowledge and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	experience to deliver effective care and support.			No	Yes	No	Yes	
21	Residents have their assessed needs, preferences and choices	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	met by staff with the right skills and knowledge			Yes	No	Yes	No	
22	Staff are encouraged and given opportunities to develop.	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
				Yes	Yes	Yes	Yes	
23	Poor or variable staff performance is identified and managed.	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
				Yes	Yes	No	No	
24	All staff, including those in different teams, services and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	organisations are involved in assessing, planning and delivering appropriate care and treatment.			No	No	Yes	Yes	
25	Those residents who may need extra support are identified.	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
				Yes	Yes	Yes	No	
26	Residents are empowered and supported to manage their own	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	health, care and wellbeing and to maximise their independence.			Yes	Yes	No	Yes	

27 Consent to care and treatment is always sou	Consent to care and treatment is always sought in line with	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr
	legislation and guidance.			Yes	No	Yes	No
28	Staff understand the relevant consent and decision making	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr
	requirements of legislation and guidance (including the Mental			No	Yes	Yes	Yes
	Capacity Act 2005 and the Children's Acts 1989/2004).						
29	The process for seeking consent is monitored and reviewed to	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr
	ensure it meets legal requirements and follows relevant national			Yes	Yes	No	No
	guidance.						

CARING						100.0	%	
Q#	QUESTION	SCORE	RESPONSE	PREVIOUS				
30	Care home ensures that people are treated with kindness,	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	respect, and compassion and that they are given emotional support when needed.			Yes	Yes	Yes	Yes	



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l and (1/1) e needs.	YES	07.May <b>Yes</b>	24.Apr Yes	20.Apr Yes	03.Apr	
vice and (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
ide to (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
		Yes	Yes	Yes	No	
r (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
		Yes	Yes	No	Yes	
(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
or		Yes	No	Yes	No	
with (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
ive		Yes	Yes	No	Yes	
and (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
		No	Yes	Yes	No	
lignity (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
		Yes	No	No	Yes	
vay (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
tional		Yes	Yes	Yes	No	
ted (1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
ion Act.		Yes	Yes	No	Yes	
	eneeds.  vice and (1/1) er.  de to (1/1)  r (1/1)  or  vith (1/1) ive  and (1/1)  dignity (1/1)  vay (1/1) tted (1/1)	e needs.  vice and (1/1) YES  er.  de to (1/1) YES  r (1/1) YES  (1/1) YES  or  vith (1/1) YES  and (1/1) YES  ignity (1/1) YES  vay (1/1) YES  ted (1/1) YES	rice and (1/1) YES 07.May r. Yes  de to (1/1) YES 07.May res  r (1/1) YES 07.May Yes  r (1/1) YES 07.May Yes  (1/1) YES 07.May Yes  with (1/1) YES 07.May ive Yes  and (1/1) YES 07.May No  rignity (1/1) YES 07.May Yes  res  res  res  res  res  res  res	re needs.  Yes  Yes  Yes  Yes  Yes  Yes  O7.May  24.Apr  Yes  Yes  Yes  O7.May  24.Apr  Yes  Yes  Yes  Yes  Yes  Yes  O7.May  24.Apr  Yes  Yes  Yes  Yes  O7.May  24.Apr  Yes  Yes  O7.May  Yes  Yes  O7.May  Yes  O7.May  Yes  No  Yes  O7.May  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye	re needs.  Yes Yes Yes  Yes Yes  Yes Yes  Yes Yes  Yes	Yes Yes No No Yes No No Yes Yes No No Yes Yes No Yes Yes No No Yes Yes No No Yes Yes No No Yes Yes Yes No No Yes Yes Yes No Yes Yes No No Yes Yes Yes Yes No No Yes Yes Yes Yes No No Yes Yes Yes Yes No No Yes Yes Yes Yes No No Yes Yes Yes No No Yes Yes Yes No No Yes Yes Yes Yes Yes No No Yes Yes Yes Yes Yes Yes No No Yes Yes Yes Yes Yes Yes Yes No No Yes

Res	oonsive							
Q#	QUESTION	SCORE	RESPONSE	PREVI	0US			
41	Residents receive personalised care that is responsive to their	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	needs.			Yes	No	Yes	Yes	
42	Facilities and premises are appropriate for the services that are	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	delivered.			Yes	Yes	No	Yes	

3	Care home identifies and meets the information and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	communication needs of people with a disability or sensory loss.			Yes	Yes	Yes	No	
4	Residents are supported during referral, transfer between	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	services and discharge.			Yes	No	No	Yes	
5	Reasonable adjustments are made so that residents with a	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	disability can access and use services on an equal basis to others.			No	Yes	Yes	No	
6	Care home takes into account the particular needs and choices of	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	different residents.			Yes	Yes	No	Yes	
7	Residents with the most urgent needs have their care and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	treatment prioritised.			Yes	No	Yes	No	
Residents' concerns and complaints are listened and responded	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr		
	to and used to improve the quality of care.			Yes	Yes	Yes	Yes	
9	Residents who use the service know how to make a complaint or	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	raise concerns.			Yes	Yes	No	No	
0	Is it easy for individuals to use the complaints process or raise a	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	concern?			Yes	No	Yes	Yes	
1	Are complaints effectively handled (ensure openness and	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	transparency, confidentiality, regular updates for the			Yes	Yes	No	No	
	complainant, a timely response and explanation of the outcome, and a formal record)?							
2	Are individuals who raise concerns or complaints protected from	(1/1)	YES	07.May	24.Apr	20.Apr	03.Apr	
	discrimination, harassment or disadvantage?			Yes	Yes	Yes	Yes	

## COMMENTS & ACTION PLAN

Safety >> Safety

and managed).

(AC10023) Residents have individual care records present (including clinical data, written DUE DATE **ASSIGNEE** 

**FINDINGS** 

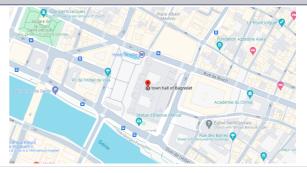
'No' - Clinical records of transferred residents is incomplete.

ACTION REQUIRED Instruct the Administrator to maintain clinical records of transferred residents.

#### DECLARATION

**Clinical Director** (Jane Williams)

Site Manager (Site Manager)



PRIORITY

Medium 09 May 24

John Doe

Here you can add a standard description of this report, customized to the specific needs of your organization.