

### Shalom House Action Plan post HIW inspection Visit 29.05.2014

Regulation	Requirement	Timescale	Action Plan	Evidence No:
9 (1)	<b>Findings:</b> A number of policies were found to be out of date and required review and this work requires completion:	48 hours	All policies reviewed, revised & updated 01.06.2014 Documentary evidence forwarded to HIW	
9(1)(d) and 15 (5) (a) (b)	Medical Gases policy was not available	48 hours	Medical Gases Policy initiated 01.06.2014 Documentary evidence forwarded to HIW	A
9(1)(n) & (3) & 15(8)(c)	Laundry policy was not available	48 hours	Laundry policy initiated 01.06.2014 and now available. Documentary evidence forwarded to HIW	B
9(1)(c)(n)	Housekeeping policy was not found	48 hours	Housekeeping policy located. Documentary evidence forwarded to HIW	C
20(2)(a)(b)	Deprivation of Liberty policy was not found	48 hours	Deprivation of Liberty policy initiated 08.06.2014 and now available. Documentary evidence forwarded to HIW	D
9(m)& 20(2)(a)(b)	Mandatory training of staff was found to be out of date and incomplete and there were no records of training delivered to personnel.	Immediate & ongoing	Records in place. Mandatory training commenced/ updates and on-going.	
9(1)(b)(m) & 15(5)(a)(b)	There was no Medicines management policy	Immediate & ongoing	Medicine Management policy located. Documentary evidence forwarded to HIW	E
9(1)(e)(k)(n) & 15 (1)(b)	Storage areas require review as they were an infection control and safety risk to users. Cleaning supplies were not locked in cupboards	Immediate & ongoing	Clean and dirty area defined.	
8(a)	The Patients' Guide required review	48 hours	Complaints procedure added to document. Documentary evidence forwarded to HIW	F
9(1)(e) (f) & 16 (3)(a)	The Child Protection policy was not available	48 hours	Child Protection policy initiated. Documentary evidence forwarded to HIW	G
9(1)(e)(k)	The Lone working policy was not available	48 hours	Lone working policy located, reviewed and updated. Documentary evidence forwarded to HIW	H
9(1)(f)	Records Management Policy was found to be out of date and in need of review	48 hours	Records management policy updated and reviewed. 01.06.2014 Documentary evidence forwarded to HIW	I

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19(1)(a)(b) & 2(c)(d)(e)	Whistle blowing policy was found to be out of date and in need of review	48 hours	Whistle blowing policy updated and reviewed. See Policy 3.4 Documentary evidence forwarded to HIW	J
9(1)(e) (f) (o) & 15 (1)(c)	Clinical Governance Policy was not available	48 hours	Clinical Governance Policy located. Documentary evidence forwarded to HIW	K
16(1)(a) & 17 (1)	Consent policy was found to be out of date and in need of review	48 hours	Consent policy reviewed and updated 01.06.2014 Documentary evidence forwarded to HIW	L
9(1)(e)(k) & 15 (1) (b)	Health & Safety Policy was found to be out of date and in need of review	48 hours	Health & Safety policies updated & reviewed 02.06.2014. Documentary evidence forwarded to HIW	M
20(2)(a)	There were no records of staff appraisals having taken place	6 months	PPRDs initiated, recorded and ongoing.	
9(1)(e) (f)(h) & 21 (2)(d)	Human Resource policies were found to be out of date and in need of review	48 hours	Human resource policies updated & reviewed 1/6/2014 Documentary evidence forwarded to HIW	N
9(1)(e)(f)(k)	Manual Handling Policy was found to be out of date and in need of review	48 hours	Manual Handling policy reviewed and updated 02.06.2014 Documentary evidence forwarded to HIW	O
9(1)(b)(f) & 15 (1)(a)(b)(c)	Resuscitation Policy was not found	48 hours	Resuscitation policy located (01.06.2014) and reviewed.	P
9(1)(e) & 16(1)(a)(b) & 191(a)(b)	A risk management system was not evidenced	Immediate & ongoing	Risk Management System demonstrable as per policy 3.2 Documentary evidence forwarded to HIW	Q
9(1)(f) & 23 (1)(a)(i)	Patients records required review to ensure contemporaneous assessment, care planning & record keeping	Immediate & ongoing	Patient records have all been reviewed updated and scheduled reviews planned.	
9(1)(n)	A waste management policy was not available	48 hours	Waste management policy located. Documentary evidence forwarded to HIW	R
16(3)(a)	The Protection of vulnerable adults policy was not available	48 hours	Protection of vulnerable adults policy located. Documentary evidence forwarded to HIW	S
9(1)(e) & 15 (1)(b)	The Challenging Behaviour policy was not available.	48 hours	Challenging Behaviour policy located. Documentary evidence forwarded to HIW	T
9(1)(a)	Referral and Discharge policy was not available	48 hours	Referral and Discharge policy located. Documentary evidence forwarded to HIW	U
26(4)(e)	Arrange for periodic re-inspection of electrical wiring installation	2 weeks	Periodic Inspection completed 16.06.2014. Documentary evidence forwarded to HIW	V
26(4)(a)	Arrange for a full three hour discharge test for emergency lighting installation	2 weeks	Discharge test for emergency lighting completed and recorded.	

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26(4)(a) & (f)	Carry out an annual review of the Fire Risk Assessment and record findings accordingly	2 weeks	Fire risk assessment conducted and recorded 29.05.2014 Documentary evidence forwarded to HIW	W
26 (4)(a) & (e)	Ensure adequate testing of the fire alarm installation at 3/6 month and 12 month intervals	2 weeks	Fire alarm testing carried out at 3, 6 and 12 months and recorded.	
26 (4)(c)(d)	Carry out regular fire drills at 6 monthly intervals and record results.	2 weeks	Regular fire drills implemented and recorded.	