



11th February 2022

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Dear Mr Fleming

Re: Inquest touching the death of Dilys Etchells

I write in response to the Regulation 28 report dated 23 December 2021, which was issued to Aden Court Care Home following the above inquest. In preparing this response, I have discussed the issues raised with colleagues and have provided information and assurance in relation to each point raised below.

The issues raised within the report are detailed below in bold and the response is laid out underneath.

Several changes have been made at Aden Court following Mrs Etchell's death. In addition to the changes outlined below, there has been a change in local leadership and since August 2021, [REDACTED] has been the Registered Manager of Aden Court. [REDACTED] is a Registered General Nurse and was in part recruited for the role because she has the necessary knowledge and skill base to provide clinical oversight. In addition, she was previously the Deputy Manager at Aden Court before taking up a Registered Manager role at another home. [REDACTED] therefore has prior knowledge of Aden Court, as well as previous experience as a Registered Manager during which she has demonstrated a proven track record of ensuring the provision of high quality, safe and effective care through effective leadership. Hill Care and the staff at Aden Court are committed to providing high quality care and continuous service development.

Please may I reiterate our sincere condolences to Mrs Etchell's family.

- 1. To review and reconsider the adequacy of the provision of crash and sensor mats and the means for properly documenting their use and reporting accidents when they take place.**

All new admissions to Aden Court are pre-assessed to determine whether their needs can be appropriately and safely met by the service. This is a detailed, holistic assessment which includes an assessment of an individual's level of mobility and falls risk. In undertaking the pre-admission assessment, care home staff will obtain a full and detailed understanding of an

individual's needs by reviewing relevant records and speaking with the individual, their family and social worker or hospital staff (if relevant).

If it is determined that a new service user requires any equipment (including tumble and sensor mats) to meet their assessed needs, it will be made available and be in situ before the new service user is admitted to the home; the service user will not be admitted until the equipment is available. Aden Court has an agreement in relation to service users funded by the Local Authority, whereby Kirklees Council will loan any required equipment that is needed to meet a service user's assessed needs. Meetings are held twice weekly between Aden Court and colleagues within the Local Authority's Discharge to Assess (D2A) Team, during which forthcoming admissions are discussed including any equipment needs. The Home Manager will attend these meetings on a weekly basis to ensure that the local management team have oversight of new admissions. As Regional Manager, I will also attend the meetings with the D2A team on a weekly basis to provide additional senior oversight. Privately funded service users are also reviewed and discussed prior to their admission, however, any additional equipment that they may need will be ordered and can be obtained within 24 hours. As outlined above, new residents are not admitted to Aden Court unless / until any necessary equipment is in place.

Staff at Aden Court also have access to a community nurse from the D2A team, who they can contact for advice and guidance or if they have any concerns about a service user. In addition, Hillcare has put in place clinical nurses at director level, for each home who provide an additional layer of clinical oversight and guidance for staff.

In addition, all care homes owned and operated by Hill Care have their own stock of tumble and sensor mats. This ensures that this equipment is immediately available should a resident's needs change at short notice. If the need for tumble and sensor mats exceeds the available stock within a home, additional equipment can be obtained urgently and within a 24 hour period.

In addition, equipment can also be transferred between homes in the same locality on a short term basis, whilst longer term arrangements are made (for example if service user's needs change suddenly following their admission and the stock equipment is already in use). Staff will also take steps to ensure that a service user's needs can be safely met in the meantime whilst any equipment is being obtained (for example, by moving rooms so that they can be closely supervised by staff). It is the responsibility of the care home manager to keep the stock level under regular review and ensure that it is sufficient.

Going forward, where new beds are ordered by Aden Court they will be replaced with high-low beds which can be used a regular profiling bed or, if a service user's needs change they can be lowered to help manage falls risk. This approach has also been introduced as a wider action across Hillcare.

Service users' equipment needs are documented in their individualised care plans; both within the main body of the document and also set out within the 'key risk summary' section, which is on the front page. This information is also documented in the daily handover sheets, which enable staff to check at each handover that each service user has the correct equipment in situ.

The Registered Manager undertakes regular audits. The Home Managers Weekly Audit includes consideration of the home environment, documentation, care plans, medication and equipment. In addition, specific equipment audits are carried out on a monthly basis to ensure that all service users have the equipment that they have been assessed as requiring. In preparing this response, I have reviewed the audit results and am assured that Aden Court is 100% compliant with the equipment audit. Any areas issues highlighted on audit are taken up with the member(s) of staff involved and feedback is provided to them by the Home Manager. Where appropriate, additional training will also be provided to members of staff (see below).

In the event that a service user has an accident, staff will complete an Accident Form. Staff are required to document the details surrounding the incident that has taken place. The form is then submitted to the Home Manager who will then undertake an investigation into the circumstances of the incident to determine its root cause and whether any action is required to prevent reoccurrence and / or improve service provision. This process is in addition to the service user being assessed by nursing staff to determine whether they require any medical care and treatment following the incident.

The Home Manager has daily flash meetings with care staff, in which they will ensure that staff are aware of the requirements surrounding accident reporting and the process for assessing new admissions and equipment needs etc. In addition, in my role as Regional Manager, I have weekly team meetings in which information is shared with care home staff to ensure that they are aware of the required processes and policies within the home. All Hillcare policies are easily accessible to staff within the home.

2. To review existing practices with regard to the adequacy of note taking and to consider protocols to ensure compliance with care plans.

There is a clear expectation that staff complete clear, accurate and up to date documentation. This is set out within Hill Care's policies and procedures, which staff should be familiar and comply with as part of their day to day practice.

All new starters receive induction training and will be 'buddied up' with an experienced colleague for the first few months of their new role. The induction training includes documentation.

In addition, I provided a training session to all the Registered General Nurses and Shift Leaders at Aden Court on 2 July 2021 (see below). Part of the session covered expectations around documentation and specifically how staff should complete Hill Care's standard proforma documentation including; admission documentation, care plans, initial wound assessment, body maps, consent to medical treatment form and return from hospital form. Following the session, all attendees confirmed that they were aware of and understood Hill Care's policies and procedures in relation to documentation and that they had received training on how documentation must be completed.

The Registered Manager of Aden Court undertakes regular care plan audits. If any non-compliance is highlighted as part of the audit process, feedback will be provided to staff within the flash meetings. All staff at Aden Court also have regular 1:1s with the management

team, which provides a further opportunity for feedback to be provided and learning to be disseminated. In addition, end of the month meetings take place which are an opportunity to examine and consider any lessons learned and action that may be needed.

Care plan training, sourced by our training development team, was delivered 2 and 3 November 2021.

As outlined above, all prospective service users must have a completed pre-admission assessment in place (which includes an initial care plan and risk assessments) before they can be admitted to Aden Court. Following admission, service users' risk assessments must be reviewed and updated within 12 hours and then again at 24 and 72 hours following their admission. Care plans and risk assessments are then reviewed and updated on a monthly basis or whenever a service user's presentation and/or needs change.

The Home Manager carries out a three weekly audit of service user's care plans to ensure that they are accurate, fully completed and have been reviewed and updated in line with Hill Care's policy. As Regional Manager, I carry out additional care plan audits on a monthly basis. Any non-compliance is addressed directly with the member(s) of staff involved by the Home Manager and where appropriate, additional training is arranged.

There are plans to further improve the service provision within Hill Care homes during the course of 2022 by i) putting in place a training planner in each care home and ii) implementing "e-care plans".

The training planner is now in place. Home Managers can log into it and see the training diary for the year ahead. Members of staff can log into the training planner and access e-learning sessions. The updated training system makes it easier for training to be provided and arranged and for training compliance to be monitored by the management team. The training planner covers all mandatory training, including documentation and care planning as well as addressing any additional training needs that may be identified.

The Registered Manager at Aden Court carries out regular staff observations to check the knowledge and understanding of members of staff and provide assurance that the correct practices are being adhered to. Again, any non-compliance or feedback is addressed within staff 1:1s and / or the flash meetings.

Hill Care will be implementing e-care plans by Summer 2022. It had been planned that the move to electronic care plans would be sooner, but unfortunately this development was delayed because it was necessary to focus on the management of our response to the Covid-19 pandemic. The move towards electronic care plans will mean that there will no longer be any issues with regards to the legibility of entries. The new electronic system will also make it quicker to audit documentation, enabling any necessary action to be taken swiftly to rectify any identified non-compliance. The system will also provide staff with prompts to complete relevant care plans and in circumstances where a care plan requires review, it will not allow the user to move onto the next page unless and until that care plan has been reviewed and updated.

I delivered a training session on 2 July 2021, which was attended by all the Registered General Nurses and Shift Leaders at Aden Court. The session covered the use of Hill Care's standard proforma documentation including; the correct completion of admission documentation, care plans, initial wound assessment, body maps, consent to medical treatment form and return from hospital form.

In addition, external training on care plans was sourced by Hill Care's training development team and provided to staff on 2 and 3 November 2022. The training session focused on person centred care plans and how they should not be seen as static documents but rather continually kept under review, updated and developed during a service user's admission.

There are plans to put in place a training planner at each home, including Aden Court. This will be kept under review by the home managers, to ensure that staff are up to date with their training requirements.

Compliance with documentation, including care plans is monitored by the care home managers who carry out a three-weekly audit. In addition, in my role as Regional Manager, I undertake a care plan audit on a monthly basis. If any non-compliance is identified by the audit, the home manager will take this up with the individual member of staff involved. This will include a 1:1 session with the home manager to provide feedback and reiterate the importance of good documentation and may also include additional training if considered necessary.

Hill Care will be implementing e-care plans by Summer 2022. It had been planned that the move to electronic care plans would be sooner, but unfortunately this development was delayed because it was necessary to focus on the management of our response to the Covid-19 pandemic. The move towards electronic care plans will mean that there will no longer be any issues with regards to the legibility of entries. The new electronic system will also make it quicker to audit documentation, enabling any necessary action to be taken swiftly to rectify any identified non-compliance. The system will also provide staff with prompts to complete relevant care plans and in circumstances where a care plan requires review, it will not allow the user to move onto the next page unless and until that care plan has been reviewed and updated.

3. To give consideration to staff training with respect to visual checks at handover to ensure residents' needs are met in accordance with the care plans.

As outlined in my witness statement dated 11 November 2021, handovers are now carried out as 'walk around' handovers rather than taking place in an office. The walk around handovers take place twice a day and are attended by the Home Manager, Registered General Nurses and Shift Leaders, ensuring that senior staff see all the service users face to face.

Handover sheets have been developed to ensure that all relevant information is passed on and checks completed as part of the handover process, including: name of the resident, date of the handover, outgoing / incoming member of staff with responsibility for the resident, the residents assessed needs and any equipment that they require to meet their assessed needs. There are two tailored handover sheets; one for residential service users and another for nursing service users.

The change in the way that handovers are carried out has been reflected in Hill Care's Quality and Governance Programme and it is the responsibility of the home manager to ensure that handovers take place in this way.

The Registered General Nurses and Shift Leaders have been informed of the new handover process by the Home Manager during weekly team meetings. To ensure that this change becomes embedded in day to day practice, the Home Manager carries out audits of the handover sheets as part of the weekly quality programme to ensure that the documented information accords with the detailed care plan and that the handover sheet has been fully completed. In my role as Regional Manager, I also undertake monthly audits of the handover sheet and process for further organisational assurance that the correct process is being following by members of staff.

In addition, as outlined in my witness statement a full audit of all equipment was carried out on 7 July 2021 to ensure that all items of equipment stipulated as being required by service users' care plans were in fact in place. The outcome of this audit was reassuring, with 100% of the audited service users having the necessary equipment in place to meet their assessed needs. Since September 2021, the equipment audit has been undertaken on a monthly basis to provide ongoing organisational assurance that the provision on equipment matches assessed needs documented on care plans. As outlined above, Aden Court has obtained 100% compliance in meeting service user's equipment needs.

Where any non-compliance or deviation from policy requirements is highlighted by an audit, this is taken up directly by the Home Manager with the member(s) of staff concerned and actioned immediately. If necessary, additional training will be provided.

4. Consider the adequacy of the supporting documentation with regard to visual checks on residents in their rooms.

As outlined above, handover sheets have been developed to ensure thorough handover of information (including the outcome of visual checks) as part of the twice daily handover process.

In addition to the visual checks that now form part of the handover process, service users are checked on an hourly basis throughout the day if they are in their rooms. If service users decide to spend time in one of the communal areas, specific hourly checks are not undertaken as they are 'cohorted' with other service users. The hourly checks and cohorting supervision are in addition to any observations or interventions that may be required from a nursing perspective (for example in relation to an incontinent individual).

Staff are required to document the outcome of the hourly checks in the notes. All staff have been reminded of the need to ensure that hourly visual checks are carried out in relation to service users in their rooms and that a contemporaneous note is made. Compliance with this requirement will be audited by the Home Manager as part of their regular care plan audits outlined above and any non-adherence will be addressed directly with the member(s) of staff involved.

5. To consider the necessity of staff training with regard to communications at handover and dealing with correspondence received from the hospital with regard to patient care.

Following Mrs Etchell's death, the handover process was reviewed and updated to ensure that information is effectively communicated as part of that process. As outlined above, handover sheets have been developed which set out what information must be handed over and what checks must be undertaken at handover either by the Registered Nurses or Shift Leaders.

Following the walk around handover, senior staff members will then provide an update to their junior team members so that they are aware of the information discussed at handover. During regular team meetings, the Home Manager has informed all members of staff in relation to the new two-stage handover process and what is expected from them as part of that process. Compliance with the new process will be monitored by way of ongoing regular audits, as outlined above.

Since October 2021, where consent is provided service users' post is opened by the Home Manager and admin staff. If correspondence relates to hospital outpatients' appointments, the appointments are noted in the diary and in the service user's individual care plan. If any information is provided relating to patient care, this is also documented in the care plan. The Registered General Nurses and Shift Leaders review the diary as part of the daily handover process to ensure that no appointments are missed. Any patient care advice will inform the care plan, which as outlined above are regularly reviewed and audited.

In addition, we are currently liaising with the hospital's Tissue Viability Team to develop a care plan for patients who are discharged to our care. This will be in addition to the wider individualised care plans that will be put in place for all new admissions (or re-admissions following a hospital admission). Staff are also encouraged to contact ward staff if they have any questions or concerns regarding the management of service users who have recently been in hospital or have been seen in outpatients' clinic.

6. To review existing protocols governing wound management, completion of admission documentation, care plans, initial wound assessment, body maps, consent to medical treatment form and the return from hospital form.

There are clear protocols in place within Aden Court in relation to wound management, admission documentation, care plans, initial wound assessment, body maps, consent to medical treatment form and the return from hospital form. As outlined above, I provided a training session for all the Registered General Nurses and Shift Leaders on 2 July 2021. The session covered wound management, completion of admission documentation, care plans, initial wound assessment, body maps, consent to medical treatment form and the return from hospital form to ensure that they were aware of the protocols in place within Aden Court. Compliance is monitored through an ongoing, regular and thorough audit process. I have provided more detail below.

The Registered Manager carries out weekly wound audits, which look at wound management and assessment. The use of body maps is reviewed as part of the weekly care management review that is also undertaken by the Registered Manager.

Hill Care's protocol in relation to the completion and review of admission documentation and care plans is outlined above. The Registered Manager will carry out a full review of the admission documentation and initial care plans to ensure that they are full and thorough and accurately document the service user's needs. Care plans are then kept under review and monitored through the regular and ongoing care management review process, during the course of a service user's admission.

On admission, service users with capacity will sign the consent to medical treatment form. Otherwise a Power of Attorney will be appointed or treatment provided in their best interests, having undertaken the best interests decision making process under the Mental Capacity Act.

Service users returning from hospital will be discussed in the flash meetings to ensure that the discharge summary has been provided by the hospital, as well as any medication and / or follow up advice and guidance. Aden Court has been liaising with hospital staff in relation to service users returning or being admitted to home with a cast in situ and it has been agreed that hospital staff will produce initial care plans, setting out advice and guidance for care home staff in relation to how to manage the cast and the service user following their discharge from hospital.

I trust this letter has addressed the concerns raised. However, please do not hesitate to contact me should there be any outstanding issues.

Yours sincerely,



Regional Manager