

Action Plan to Prevent Future Deaths

Directors:	Manager Name:	
Areas of Concern:		
 Question & Answer tick box for risk assessments on the PCS system we use within our care homes 		
2. Risk assessments not making recommendations when risks have been identified		
3. Staff being unfamiliar with care plans and risk assessment		
4. Care plans and risk assessments not being updated		
5. PCS system not preserving old care plans/risk assessments and reviewing the system in place.		
 Discussions: 1. We have been using the PCS system (Person Centered Software) in all of care homes. Any risk assessments are person centered around the resident to identify risks. 2. We have checked with PCS and although risk assessments are archived residents care plans are not. This is due to care plans being reviewed on a monthly basis if not sooner depending on if circumstances change with that resident. 3. All staff use a handheld device where they have access to residents care plans and risk assessments. This will be part of our action plan to ensure that during inductions staff are shown how to access information on residents and use the devices effectively. 4. All care plans and risk assessments are reviewed and updated monthly. 5. As care plans are reviewed and updated regularly to reflect residents support we fill that it works effectively as the information on care plans are up to date. 		
Action Plan:	Completion Date:	
The prevention of future deaths in care facilities requires adherence to strict safety protocols and procedures. Here are some key measures we have taken to reduce the risk of future deaths: 1. Staff training and supervision: Ensure that all staff members undergo rigorous	Training and supervisions: All staff are up to date with training except new employee's who complete mandatory training before starting in their post and then they have 12 weeks to complete the rest of their training schedule. Care plans and risk assessments are	
training and are aware of the correct procedures for providing care and	reviewed monthly but sooner if changes	

responding to emergencies. Regularly	need to be made to support residents. This
assess and update staff knowledge and	will continue to be ongoing in the future.
skills. Provide adequate staffing levels to	
ensure proper supervision and monitoring	Staff are aware that any safeguarding
of residents.	concerns need to be reported to the
	manager straight away so that correct
2. Risk assessment: Conduct regular	procedures are followed. This is ongoing.
assessments of residents to identify any	procedures are followed. This is ongoing.
potential risks to their health and safety.	All staff have been trained on how to use
This includes assessing their physical and	the PCS device and where to find all
mental health needs, as well as their	relevant information on residents. This also
mobility and potential risks such as falls or	includes agency staff and new employees.
wandering.	PCS training has been added to our
wandering.	induction programme for new staff.
3. Safeguarding procedures: Implement	
robust safeguarding procedures to protect	All staff have access to a list of residents
residents from abuse, neglect, or	who are potentially at high risk of harm.
exploitation. Encourage staff to report any	The list is updated as and when and will
concerns or suspected incidents promptly.	continue to be ongoing.
Conduct thorough investigations and take	continue to be ongoing.
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appropriate action when incidents are	Manger, Deputy Manager, Team leaders
reported.	check documentation regularly and inform staff members if they need more detailed
4. We have implemented training on the	-
4. We have implemented training on the	documentation. This is ongoing.
PCS handheld devices during induction for	
staff. This will give all new members of the	
team the knowledge and skills on how to	
use the device correctly and effectively.	
C M/o hours implemented a list of residents	
5. We have implemented a list of residents	
who are high risk of falls to ensure that not	
only our regular staff and new staff but also	
agency staff know who are potentially at risk of harm	
6.Documentation will be checked on a	
regular basis to ensure staff are	
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documenting correctly and effectively.	