

# Colten Care (1693) Limited AVON Cliff

#### **Inspection report**

50-52 Christchurch Road Bournemouth Dorset BH1 3PE Date of inspection visit: 29 June 2017

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Ratings

### Overall rating for this service

Is the service safe?

Good

Good

# Summary of findings

#### **Overall summary**

Avon Cliff is a purpose built care home which is registered to accommodate a maximum of 52 people who require nursing or personal care. There were 45 people living in the home are the time of our inspection.

This was an unannounced inspection that took place on 29 June 2017. At the last inspection in March 2016, the service was rated good overall, but the question 'Is the service safe?', was rated requires improvement.

The purpose of this inspection was to follow up on the actions taken by the service to address the breach of regulation in relation to the provision of safe care and treatment. This was because at the last inspection we found that; people had not always been protected against the risks associated with the unsafe management and use of medicines and the risks to people's health and safety had not been properly assessed and action had not been taken to mitigate any such risks. We also found that appropriate checks to ensure that new staff were suitable to work with vulnerable people had not always been completed.

At this inspection there were significant improvements. The provider had given the registered manager clinical and management support. Systems had been reviewed, assessed and improved. All actions included in the registered manager and provider's action plan had been met.

The people living at the home told us that they felt safe and well cared for. A visitor told us that they were very happy with the care provided for their relative. They said the staff were kind and caring as well as being supportive and respectful. They particularly commented that staff had taken time to find out about the person, what was important to them and about their past career. They had then used that to ensure that the person was engaged in meaningful activity. The visitor summed up the conversation telling us that they always feel they can go home knowing that their relative was happy in the home and well looked after. Staff in the home were also positive about the home and the service they provided. They were all aware of the shortfalls from the last inspection and had worked hard with the registered manager to rectify the issues.

At this inspection we changed the rating for the key question 'Is the service safe?' from Requires Improvement to Good. The overall rating for the service remained Good.

Further information about this inspection is in the detailed findings below. Our previous comprehensive inspection from March 2016 provides information about the other areas that have previously been inspected.

#### The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service safe?

The service was safe.

Medicines were managed safely and staff competence was checked.

Risks were properly assessed and action was taken to reduce or manage any identified hazards.

Systems were in place to protect people from harm and abuse. Staff knew how to recognise and report any concerns.

Staff were recruited safely and there were enough staff to make sure people had the care and support they needed

Good



# AVON Cliff Detailed findings

# Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014. This was a focussed inspection to check the domain of 'safe'.

The inspection took place on 29 June 2017 and was unannounced. One adult social care inspector visited the service.

The provider had completed a Provider Information Return (PIR) which we reviewed. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed all the other information we held about the service, including previous inspection reports and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law. We also contacted the local authority commissioners of the service to establish their view of the service.

As part of the inspection we spoke with three people who lived at the home to find out about their experiences of the care and support they received. We also spoke with six staff members, two managers and the registered manager. In addition, we spoke with two visitors to people living in the home.

We looked at three people's care plans in depth; these included risk assessments and medicine records. We also looked at records relating to the management of the service including audits, maintenance records, and two staff recruitment files.

# Our findings

At the last inspection we found that checks had not been consistently carried out to ensure that staff were suitable to work with vulnerable people. Following that inspection, the registered manager provided an action plan to show that measures had been taken to ensure checks were completed for all newly appointed staff.

At this inspection, recruitment records showed that the service had obtained proof of identity including a recent photograph, a satisfactory check from the Disclosure and Barring Service (previously known as a Criminal Records Bureau check) and evidence of suitable conduct in previous employment or of good character.

Also at the last inspection, we found that the systems in place for the management and administration of medicines were not always satisfactory. Of particular concern were gaps in the recording on medication administration records (MAR), lack of care plans for the administration of "as required" (PRN) medicines and that, where a variable dose of a medicine had been prescribed, it was not always clear how much of the medicine had been administered or why.

At this inspection, the registered manager and staff explained that assessments and care planning systems had been reviewed and new documentation had been put into place. Staff had also been given training about how to use the new documentation and the information that should be recorded.

There were systems in place to ensure medicines were obtained, stored, administered and disposed of safely. There were care plans in place for PRN and variable dose medicines. MAR charts were properly completed and no gaps were found.

Records showed that medicines were recorded on receipt, when they were administered and when any were returned to the pharmacy or destroyed. Regular audits were carried out and there were records showing that any issues identified through an audit were investigated and resolved. Staff confirmed that they had received regular training and competency checks.

Also at the last inspection, we found that the assessment and management of risks had not always been effective. This was particularly in relation to the prevention

and management of pressure sores. At this inspection we found that the service had reviewed the assessment and planning of care for people at risk of developing pressure sores or for people who had a pressure sore. Records prompted staff to document any issues or concerns as well as the action that had been taken to minimise the risk or manage the concern. There was clear information about the equipment used and how often people should be supported to change position. Records demonstrating when people were supported to change position and that equipment had been checked were up to date and showed that care plans and risk assessments were being followed.

Environmental risks were managed safely. These were regularly reviewed and updated. There were risk

assessments for each part of the home and for various systems such as the heating, hot water, electricity and gas supplies. There were comprehensive maintenance and servicing records for all of the equipment and fire prevention systems.

Arrangements were in place to keep people safe in an emergency and staff understood these and knew where to access the information. Each person had a personalised plan to evacuate them from the home and these were regularly reviewed. The home also had plans in place to manage interruptions to the power supply, breakdown of equipment or other emergencies.

There were satisfactory systems in place to safeguard people from abuse. Staff received regular training about safeguarding and minutes of staff meetings showed that the importance of this was regularly discussed. Records showed that the provider had notified the local authority and CQC of any safeguarding concerns or incidents and the registered manager had taken appropriate action when incidents had occurred to protect people and reduce the risk of repeated occurrences. Information about safeguarding adults was available on notice boards around the home and in the staff room to assist and prompt staff should they have any concerns.

There were enough staff employed to meet people's needs. The registered manager explained that the service had a staffing tool that gave a guide number of staff relevant to the number of people living in the home and their level of need. The people who lived in the home, visitors and staff all confirmed that they felt staffing levels were satisfactory.