

Shaw Healthcare (de Montfort) Limited

Victoria House

Inspection report

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Rushden
Northamptonshire
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Ratings

Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Is the service effective?

Requires improvement



Is the service well-led?

Requires improvement



Overall summary

Victoria House is a residential care home that provides personal care and accommodation for up to 47 older people including people living with dementia.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last comprehensive inspection on 28 November and 29 December 2014, we identified the following areas where the provider was required to take action to make improvements.

The registered person had failed to have suitable arrangements in place for obtaining and acting in

accordance with the consent of people in relation to the care and support provided for them in accordance with the Mental Capacity Act [MCA] 2005 and the Deprivation of Liberty Safeguards [DoLS]. This was a breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The registered person had failed to ensure that appropriate standards of cleanliness and hygiene were maintained. This was because equipment was not appropriately cleaned; floor coverings were heavily soiled and had an odour. Clean linen was stored on the floor in the linen cupboard. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The registered person had failed to ensure that accurate records were maintained for people. This was because

Summary of findings

food and fluid records were not appropriately maintained. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Following the inspection the provider sent us an action plan detailing the improvements they were going to make to meet the relevant legal requirements, and stated the improvements would be achieved by 31 May 2015.

This report only covers our findings in relation to the areas checked during the focused inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Victoria House on our website at www.cqc.org.uk

This focused inspection took place on the 16 July 2015 and was unannounced. The purpose of the inspection was to check that the provider had followed their action plan to meet the legal requirements and found the actions had been completed.

People were involved in planning their care, their choices and consent was sought by staff before they carried out their care.

People's care plans contained assessments of their mental capacity to make informed decisions and where people lacked the capacity to make some decisions 'best interest' decisions were made on the person's behalf following the Mental Capacity Act and Deprivation of Liberty codes of practice.

The home was clean and tidy and free from unpleasant odours.

Regular management audits were carried out and used to continually drive improvements and appropriate records were maintained.

While improvements had been made we have not revised the rating for these key questions; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for safe, effective and well-led at the next comprehensive inspection.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve safety.

The standard of hygiene, the cleanliness of the environment and equipment was appropriately maintained.

This meant that the provider was now meeting legal requirements.

We could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

Requires improvement



Is the service effective?

We found that action had been taken to improve effectiveness.

Mental Capacity Assessments (MCA) had been carried out and where it was considered to be in people's best interests Deprivation of Liberty Safeguards (DoLS) applications had been submitted to the statutory body.

This meant that the provider was now meeting legal requirements.

We could not improve the rating for effective from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

Requires improvement



Is the service well-led?

We found that action had been taken to improve well-led.

Records relating to people's food and fluid intake were appropriately recorded and maintained.

This meant that the provider was now meeting legal requirements.

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

Requires improvement



Victoria House

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 was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

At the last comprehensive inspection on 28 November and 29 December 2014, we asked the provider to make improvements to meet the legal requirements. These were in relation to, acting in accordance with the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). Keeping accurate monitoring records on people's food and fluid intake and maintaining the cleanliness of the home and equipment.

The provider sent us an action plan stating they planned to fully meet the relevant legal requirements by the 31 May 2015.

We undertook an unannounced focused inspection at Victoria House on 16 July 2015. The inspection was undertaken by one inspector. To check that improvements to meet the legal requirements, planned by the provider after our comprehensive inspection had been made.

We inspected the service against three of the five questions we ask about services: is the service safe, effective and well-led. This was because the service was not meeting some legal requirements.

Before our inspection we reviewed the information we held about the home, this included the provider's action plan, to meet the legal requirements. We also reviewed information we held about the service that included statutory notifications, which the provider had sent to us, a statutory notification is information about important events which the provider is required to send us by law.

During our inspection we spoke with six people living at the home. We also spoke with the registered manager, the area manager and six care staff.

We looked at the care records of three people living at the home to check whether their care needs were appropriately assessed and met. We also looked at records in relation to the management of the service.

Is the service safe?

Our findings

At our comprehensive inspection of Victoria House on 28 November and 29 December 2014 we found that suitable arrangements were not in place for ensuring the standards of cleanliness and hygiene were maintained. This was because equipment was not appropriately cleaned; floor coverings were heavily soiled and had an odour. Clean linen was stored on the floor in the linen cupboard.

This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection we found that suitable arrangements were in place for keeping the home clean and hygienic so that people were protected from acquired infections.

People using the service and staff commented on how clean and fresh the home now was. One person said, "They are always hoovering and dusting, they [staff] if anything, are too fussy about the home being clean and tidy."

The home was clean and free from unpleasant odours. New carpets had been laid within several of the lounges and corridor areas and laminated flooring to the dining areas. The manager said that plans were in hand to have all of the carpets replaced.

The manager told us a new steam cleaner had been purchased and a deep cleaning programme was in place for carpets and furnishings. Daily, weekly and monthly cleaning schedules were in place and the domestic staff recorded the areas that had been disinfected and cleaned on a daily basis.

The linen cupboards were clean and well organised. A cleaning schedule was in place for cleaning wheelchairs and we saw that all of the wheelchairs were clean and free from food debris.

Is the service effective?

Our findings

At our comprehensive inspection of Victoria House on 28 November and 29 December 2014 we found that suitable arrangements were not in place for obtaining and acting in accordance with the consent of people. This was in relation to the care and support provided for them in accordance with the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS).

This was a breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection we found that people's consent to care and treatment was sought in line with the relevant legislation and guidance. Written consent had been sought from people that used bed rails and people that lacked capacity to consent had best interest decisions made on their behalf, which was documented.

One person that used bed rails told us they were happy for them to be fitted to their bed the person said, "I was asked if I wanted them fitted to my bed, I said yes, they give me peace of mind that I'm safe from falling out." Bed rail risk assessments were in place and had been signed by the person or their representatives to declare their consent.

The manager and staff were aware of their responsibilities under the Mental Capacity Act 2005 (MCA 2005) and the Deprivation of Liberty Safeguards (DoLS) code of practice. People's care plans contained assessments of their capacity to make decisions for themselves and where

people lacked the capacity to make some decisions 'best interest' decisions were made on the person's behalf following the MCA and DoLS codes of practice.

Staff confirmed they had received training on the MCA. The manager said that 70% of staff had completed MCA training and plans were in hand to ensure all staff attend the training, the staff training plan identified which staff needed to complete the training. We saw posters were on display throughout the home reminding staff to always consider the five principles of the MCA that underpin all acts done and decisions taken in relation to those who lack capacity.

We saw records that confirmed DoLS applications had been submitted to the Local Authority statutory body, to protect people who would be at risk should they leave the building unescorted.

Is the service well-led?

Our findings

At our comprehensive inspection of Victoria House on 28 November and 29 December 2014 we found that accurate records were not maintained. This was because food and fluid records were not appropriately maintained.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection we found that records in relation to people's food and fluid intake were appropriately maintained. Food and fluid monitoring charts were

provided in bound books, so as to minimise the risks of pages being misplaced. We saw the charts were appropriately completed by staff and people's daily food and fluid intake was calculated and assessed daily, following the provider's procedures on nutritional monitoring.

We saw that monthly care management audits included reviewing the food and fluid charts. The audit findings demonstrated that staff were keeping consistent records and that appropriate action had been taken in response to any concerns identified through the monitoring process.