

Mrs Helen Judith Christopher

The White House Falmouth

Inspection report

128 Dracaena Avenue Falmouth Cornwall TR11 2ER

Tel: 01326318318

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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 responsive?	Requires Improvement •

Summary of findings

Overall summary

The White House is a care home which provides accommodation for up to 17 older people who require personal care. At the time of the inspection 17 people were using the service. Some of the people who lived at The White House needed care and support due to dementia and some people had sensory and /or physical disabilities.

There was a registered manager at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

We previously carried out a comprehensive inspection of The White House on 8, 10 and 14 December 2015. At that inspection we identified three breaches of the legal requirements. This related to how medicines were managed; how the service assessed in accordance with the requirements of the Mental Capacity Act, and sought appropriate authorisation where peoples care plans were restrictive; and ensuring care was appropriate and met people's needs. We subsequently issued three requirements and told the provider to take action to address the three breaches of the regulations. The provider sent the Care Quality Commission an action plan following the publication of the report. We checked to see if the service had made the required improvements identified at that comprehensive inspection.

We carried out this focused inspection to check to see if the service had made the required improvements identified at that comprehensive inspection.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The White House on our website at www.cqc.org.uk

During this inspection people told us they received their medicines on time. Medicines were well organised, records kept to a good standard, and staff had received suitable training to administer medicines. Medicines which were not required, and needed to be returned to the pharmacist, were kept securely, and comprehensively recorded in a returns book.

We also found the service had appropriate systems in place to assess people's capacity in line with legislation and guidance, for example using the Mental Capacity Act (2005). For example care plans included information about, where appropriate, people's mental health needs, and their capacity. Where necessary applications had been submitted to the local authority to request people were assessed in accordance with the Mental Capacity Act 2005 and associated Deprivation of Liberty safeguards.

At the comprehensive inspection in December 2016 we found the majority of people were very well cared for. We did have concerns about restrictions placed on one person, and that these had not been assessed

and authorised in line with the Mental Capacity Act 2005. At this inspection we judged everyone was well cared for. Suitable care plans were in place, for example, in respect of the person we had previously had concerns about. Comments received from people included "It is a lovely place," "The staff are very good," "Everything is okay with me. No problems at all." A relative told us: "We think it is a safe environment with well-trained supportive staff that are helpful to us at all times in a happy place."

We could not improve the overall rating from 'requires improvement' because to do so requires the service to demonstrate consistent good practice over time. We will review the rating during our next planned comprehensive inspection which will occur in the next six months.

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. Improvements had been made to ensure medicines were suitably administered, managed and stored securely.

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?

The service was effective. Improvements had been made to ensure people's capacity to consent to care and treatment was assessed in line with legislation and guidance.

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 responsive?

The service was responsive. Improvements had been made to ensure people received personalised care and support responsive to their changing needs. Care plans were comprehensive, up to date and regularly reviewed.

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





The White House Falmouth

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 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 inspection took place on 6 July 2016. This was an unannounced inspection which meant the staff and provider did not know we would be visiting. The inspection team consisted of one inspector.

The inspection was to review what action had been taken to meet the breaches in regulation identified during the comprehensive inspection completed in December 2016.

Before the inspection we reviewed the action plan provided by the service following the last inspection, previous inspection reports and other information we held about the service. We also looked at notifications we had received from the service. A notification is information about important events, which the provider is required to tell us about by law.

During the inspection people we spoke with four people who used the service. We spoke with one visiting relative, and had contact with another relative by email. We looked around the premises and observed care practices. We spoke with the deputy manager of the service. We inspected three records relating to the care of individuals and the medicines system and records relating to it.

Requires Improvement



Is the service safe?

Our findings

At our inspection in December 2015 we found some medicines were not always stored or handled correctly. For example where eye drops needed to be disposed of after 28 days there was no date recorded on packaging to state when containers were opened. Where these medicines were administered after 28 days of opening they could be ineffective. We also found some medicines were on the shelf in the office, and in boxes on the floor of the office awaiting return to the pharmacist. Some controlled medicines (which under law require more secure storage) were not always stored securely.

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

At this inspection we found safe procedures about the handling of medicines were in place. People's medicines were administered by staff who were suitably trained to do so safely. Medicines were stored securely in locked cabinets, or in a locked medicines trolley. Records were completed appropriately. Eye and ear drops were dated when they began to be used. A suitable system for the return of unused medicines was in place. Medicines which required refrigeration were appropriately stored, and the temperature of the refrigerator was checked daily. There was no excessive stock of medicines.

Requires Improvement

Is the service effective?

Our findings

At our inspection in December 2015 we found people's capacity to consent to care and treatment was not assessed in line with legislation and guidance. This was in breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When people lack mental capacity to take particular decisions, any decisions made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

At this inspection we checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. We found care plans outlined if people had mental capacity or not. Where people were deemed as not having capacity this was outlined in their care plan. The registered manager had also submitted applications to the local authority, where they thought people may lack capacity, and actions staff needed to should it be deemed as depriving the person of their liberty. We discussed the care of people, where an application to the local authority had been submitted, and actions taken by staff were appropriate. A social worker had also reassessed the person concerned, and was satisfied that care procedures in place were appropriate.

We also discussed with the deputy manager training delivered or planned about the Mental Capacity Act and associated Deprivation of Liberty safeguards. Records showed there staff had received suitable training in these areas, or training was planned in the next six months.

Requires Improvement

Is the service responsive?

Our findings

At our inspection in December 2015 we care plans were not always accurate and kept up to date. This was in breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we discussed people's records with the deputy manager. We were told since the last inspection all care plans had been comprehensively reviewed, and where necessary rewritten. We inspected care plans, for people where we had concerns at the previous inspection. These all contained comprehensive information about the individual's needs. Care plans had all been discussed, where possible, with the individual concerned, or with the person's representative. Care plan reviews were detailed and occurred each month.

We discussed the care of one person for whom we had concerns at the previous inspection. The care the person received was appropriate for example records showed care was given as outlined in the person's care plan. We met with the person, and although they could not communicate with us, their personal care seemed to be provided to a good standard. For example the person looked like they had their personal care needs attended to, they were warm, and comfortable. We were told the service had received support from a social worker and a community psychiatric nurse to ensure support for the person was appropriate, and community professionals were happy with actions the service was taking.

People in their bedrooms had access to a call bell. Staff were observed to be attentive to their needs.

We observed care in the lounge and dining area of the home. Staff were seen talking with people, and helping people with any personal care needs and activities. There was a pleasant atmosphere, for example people were laughing and talking with each other. The people we spoke with were all happy with their care. For example comments we received included "It is a lovely place," "The staff are very good," "Everything is okay with me. No problems at all."