

R.M.D. Enterprises Limited

Manor Lodge

Inspection report

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18 August 2016

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 15 March 2016 at which a breach of legal requirements was found. This was because the provider did not always ensure the proper and safe management of medicines.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook an unannounced focused inspection on the 18 August 2016 to check they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Manor Lodge on our website at www.cqc.org.uk

Manor Lodge provides accommodation and personal care for up to 16 older people some of whom have dementia. There were 16 people living at the home at the time of our inspection.

At the time of our inspection the home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission [CQC] 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 our focused inspection on the 18 August 2016, we found that the provider had followed their plan and legal requirements had been met. The provider had taken action to address our concerns about some aspects of the way medicines were managed by the service. The provider had made improvements to the storage of medicines. They had also carried out medicines competency assessments of staff who administered medicines and provided staff with additional medicines training.

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 action had been taken to improve the safety of the service. Medicines were stored safely and staff administering medicines had been assessed as competent to do so and received further medicines training.

This meant that the provider was now meeting legal requirements.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.

We will review our rating for safe at the next comprehensive inspection.

Requires Improvement ●

Manor Lodge

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.

We undertook an unannounced focused inspection of Manor Lodge on 18 August 2016 to check that the provider had made improvements to meet legal requirements after our inspection on 15 March 2016. We inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting legal requirements in relation to that question.

The inspection was undertaken by one inspector. Before our inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements.

At the visit to the home we spoke with 3 people using the service, one visitor, the registered manager, and a care worker.

During our inspection we checked the storage and administration of medicines. We also looked at a range of documentation, including four people's care files, records that related to medicines, including staff medicines training records and staff medicines competency assessments records.

We also observed staff engagement with people whilst they provided people using the service with care and support.

Is the service safe?

Our findings

At our comprehensive inspection on the 15 March 2016 we found that the storage of some medicines including Controlled Drugs [CDs, prescription medicines which have strict legal controls on their supply to prevent them being obtained illegally] did not ensure they were safe and met legislation requirements. Care workers that administered medicines had received medicines training but records did not show that they had completed an assessment of their competency to administer medicines to people using the service.

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

At our focused inspection 18 August 2016 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 12 described above.

We found that CDs were stored in a specific medicines cabinet that complied with requirements laid out in Misuse of Drugs regulations which included being fixed securely to a solid wall. Records showed appropriate records of the receipt and administration of CDs were maintained. A record of the running balance of each CD was in place and records showed regular checks of the storage and administration of CDs were carried out by the registered manager.

Records showed that care workers who administered medicines had received an assessment of their competency to carry out this task safely. A care worker spoke in a positive manner about the medicines assessment and training they had received. Records showed medicines training carried out by a pharmacist had been completed by staff in March 2016.

We observed medicines being administered in a safe manner by a care worker. The care worker locked the medicines trolley each time they administered medicines to a person using the service. This ensured that the medicines in the trolley were secure. Whilst administering medicines the care worker spoke to each person about their medicines and waited until they had consumed them before they completed a record of the medicines they had administered. This ensured medicines administration records [MAR] were accurate. People were provided with a drink to help them with swallowing their medicines and MAR showed people received the medicines they had been prescribed. Two people using the service told us they received their medicines at the right time. A person told us about the medicines they were prescribed.

The four care plans we looked at showed that each person using the service had a medicines' care plan which included information about the person's medicines and described the assistance they needed with taking their medicines.

The service had a medicines policy which had recently been reviewed and was located on the medicines trolley so it was easily accessible by care workers who administered medicines to people. We noted that the policy for the administration of covert medicines was in a separate file to the main medicines' policy so was not easily accessible to staff. The registered manager addressed this during the inspection so both policies

were equally easily accessible to staff.

Records of medicines received from and returned to the pharmacist were in place. An audit of the management and administration of medicines had been carried out in March 2016 by the pharmacist who dispensed the medicines received by the service. The registered manager also carried out regular medicines checks and had recently completed an audit of the management and administration of medicines by the service.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.