

# The London Borough of Hillingdon

## Colham Road

### Inspection report

3 Colham Road  
Hillingdon  
Uxbridge  
Middlesex  
UB8 3RD

Tel: 01895271245  
Website: [www.hillingdon.org.uk](http://www.hillingdon.org.uk)

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17 December 2015

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 9 and 10 September 2015. A breach of a legal requirement was found as there had been shortfalls in how some medicines were recorded, making it difficult to know that all the people using the service had safely received their medicines. After the inspection, the provider wrote to us to say what they would do to meet the legal requirement in relation to the breach.

We undertook this unannounced focused inspection to check that the Provider had followed their plan and to confirm that they now met the legal requirement. This report only covers our findings in relation to the requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Colham Road on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Colham Road is a care home that provides accommodation for up to 13 people who have learning and/or physical disabilities. The service comprises of four lodges all linked by a communal main entrance. People can move about between the different lodges. There were thirteen people using the service at the time of the inspection.

There was a registered manager in post. 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 our focused inspection on the 17 December 2015, we found that the provider had followed their plan of action which they had told us would be completed by 15 September 2015 and the legal requirement had been met.

Records were kept of the prescribed medicines delivered to the service and carried over from the previous cycle to ensure the amount at any one time in the service was correct. Only staff who had received medicine training administered medicines to people.

There had been an increase in the audits and spot checks on people's medicines to ensure people were safely receiving their medicines.

The registered manager had introduced a checklist and guidelines to remind staff of their roles and responsibilities when carrying out the task of working with and administering medicines.

Pain protocols were being completed to ensure staff were aware of how people might communicate when they were in pain and required pain relief.

Overall the systems in place for managing people's medicines had improved and minimised medicine errors

occurring.

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

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe. There was clearer information on people's medicine administration records. The medicine audits were taking place on a more regular basis and checks were also on all the medicines that were not in sealed blistered packs.

Information on people's prescribed medicines that was delivered to the service and what was carried forward from the previous cycle had been recorded.

Other checks and observations on staff member's competency and practices in carrying out medicine administration tasks were in place. This encouraged staff to reflect on their practice and to make improvements where necessary.

# Colham Road

## **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 Colham Road on 17 December 2015. This inspection was carried out to check that improvements to meet the legal requirement planned by the provider after our 9 and 10 September 2015 inspection had been made. The inspector inspected the service against one of the five questions we ask about services: is the service safe?

Before our inspection we reviewed the information we held about the service, this included the provider's action plan, which set out the action they would take to meet legal requirement.

The inspection was carried out by one inspector.

We spoke with the registered manager and a team leader.

We looked at the medicines administration records for seven people who use the service. We also looked at the various medicine audits and checks in place to ensure people safely received their medicines.

# Is the service safe?

## Our findings

At the previous inspection in September 2015 we found there were issues with how some people's medicines had been recorded on the medicine administration records. This made it difficult to know that every person had safely received their prescribed medicines.

We checked a sample of people's medicines in each of the four lodges. The records clearly showed a photograph of the person, how they liked or needed to receive their medicines and if they had any allergies. People's medicines were reviewed annually or sooner if there were issues. We saw for one person their medicines had been reviewed in September 2015. Pain protocols were also being completed to ensure staff were aware of how people might communicate when they were in pain and required pain relief.

We counted medicines that were in boxes for seven people and these all matched with what had been recorded as being administered to them. We also looked at the sealed blistered medicines for those people and these had also been administered correctly. The team leader explained that where possible the service did not have too much stock of people's medicines and that only medicines that needed to be ordered for that month were requested. This minimised errors occurring.

The registered manager had introduced a checklist and guidelines to remind staff of their roles and responsibilities when carrying out the task of working with and administering medicines.

Records were kept of the prescribed medicines delivered to the service and carried over from the previous cycle to ensure the amount at any one time in the service was correct.

There was also a handover sheet which team leaders had to confirm they had checked medicines and that other tasks relating to the storage and recording of medicines had taken place.

Only staff who had received medicine training administered medicines to people. Staff member's competency were assessed throughout the year. We saw records of these checks which would be a team leader observing another team leader to ensure they were following best practice. This included any agency team leaders who were working in the service. Any areas needing to be improved would then be discussed at the team leader's one to one meeting with the registered manager to ensure they considered ways to improve on carrying out tasks relating to medicine management.

There had been an increase since the last inspection in the audits and spot checks on people's medicines to ensure people were safely receiving their medicines. Team leaders were carrying out spot checks on people's medicines two or three times a week. The registered manager also carried out a monthly audit on medicines, this included checking the medicine administration records to ensure they were legible and accurately signed, ensuring that any boxed or liquid medicines had dates of opening and observing staff administering medicines to people in a safe way. We saw the last audit carried out by the registered manager was in November 2015.

Overall the systems now in place minimised the risk to people who relied on the staff team to administer their medicines to them safely.