

Mission Care Elmwood

Inspection report

42 Southborough Road
Bickley
BR1 2EN
Tel: 020 8289 7925
Website: www.missioncare.org.uk

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Ratings

Overall rating for this service

Good 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

We carried out a comprehensive inspection of this service on 28 and 29 July 2014. Two breaches of legal requirements were found. This was because aspects of the service were not safe. The service did not always follow good practice around the storage and recording of medicines. There were no personalised emergency evacuation plans available to guide staff or emergency services in the need for any evacuation in an emergency.

After the comprehensive inspection, the provider sent us an action plan to say what they would do to meet legal requirements in relation to this breach. They told us they

would complete the action required by 31 January 2015. We undertook this focused inspection on the 01 July 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

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

Elmwood provides accommodation nursing and personal care for up to 70 people. There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage

Summary of findings

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. The registered manager understood their responsibilities as a registered manager.

At this inspection on 01 July 2015 we did not ask people for their views about these legal requirements. We looked around the premises and saw there were personal emergency evacuation plans in place. We looked at the systems for the storage and recording of medicines and found the issues identified at the previous inspection had been rectified.

While improvements have been made we have not been able to revise the rating for this key question; to improve the rating to 'Good.' This was because at the previous inspection we found, although the provider met legal requirements, we did not inspect all areas of the key question 'is the service safe?' at this inspection and our previous inspection had been almost 12 months ago. We will review all of our ratings 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?

The service was safe. At this inspection we found the provider had taken action to address the problems identified at the previous inspection with medicines and with fire safety. They therefore met all legal requirements in this key question.

While improvements had been made we have not been able to improve the rating to 'Good' as we did not inspect all the lines of enquiry under safe at this inspection. The previous inspection took place almost 12 months previously and we could not be sure that the other lines of enquiry in this key question remained 'Good' as they had been at the previous inspection. We will review our ratings at the next comprehensive inspection.

Requires Improvement



Elmwood

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 and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Elmwood on 01 July 2015. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 28 and 29 July 2014 had been made. We inspected the service against

part of 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 at the last inspection.

The inspection was undertaken by two inspectors and a pharmacy inspector. It was unannounced. Before the 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. During the inspection we spoke with the manager, the clinical director and six members of staff. We looked around the premises and we looked at records held by the service including 12 care plans and records in relation to planning for emergencies and medicines.

Is the service safe?

Our findings

At our inspection on 28 and 29 July 2014 we had found two breaches of regulations in respect of medicines management and plans for emergencies in particular in relation to fire safety as there were no emergency evacuation plans. The provider sent us an action plan telling us how they would take action to rectify the breaches. We carried out this inspection to check that the necessary action had been taken. We did not ask people for their views in relation to this inspection

At our inspection in July 2014, we found that although there were some areas of good practice with medicines, the service did not always follow safe practice around storage and recording of medicines. At this inspection, we looked at the actions taken by the provider in respect of the issues we had found.

We found the provider had made improvements to all the identified concerns. People were being better protected against the risks associated with the unsafe storage and recording of medicines.

A policy for as required or “PRN” medicines was now in place, and individual protocols had been written for people prescribed these medicines including sedating medicines. This meant staff now had sufficient instructions about when to administer a dose. We looked at the medicine records for the two people prescribed these PRN medicines, and saw that staff were now recording the reasons whenever they administered a dose, so we were able to check that these medicines were being used in appropriate circumstances. Referrals were made to the community mental health team for assessments and reviews of people’s condition where there had been an increase in the frequency of PRN administration because they were needing this medicine regularly and their situation had changed.

At the previous inspection there had been some discrepancies in the balances for some sedating medicines. At this inspection we checked supplies of these medicines and there were no discrepancies. Therefore the use of sedating medicines for agitation was now better and safely managed.

At the previous inspection we had identified concerns about the use and recording of topical medicines such as creams. At this inspection we found the process for use and recording of topical medicines had improved. When care staff applied topical medicines, clear records were now kept.

Previously we had found concerns about the storage of medicines at higher than recommended temperatures. At this inspection medicines were now stored at the correct temperatures. Following the last inspection air cooling units had been obtained for each of the medicines rooms. Medicines rooms and medicines fridge temperatures were checked and recorded daily and records of these checks showed that medicines requiring storage at room temperature were now stored at the correct temperatures to remain suitable for use. Despite the very hot weather at the time of inspection, temperatures were within recommended levels for safe storage. However we noted on one floor that although the temperature of the medicines fridge had been checked and recorded, the maximum and minimum temperature had not been recorded to confirm that medicines were kept at safe temperatures at all times. This was discussed and addressed at the inspection.

We spoke with six members of staff who told us what they would do in a fire emergency. They told us they took part in regular drills and practised using fire evacuation equipment. We saw a new system had been put in place with two people assigned on each shift as wardens to cover any emergencies. Care plans we looked at had a completed fire evacuation plan to guide staff or the emergency services in the need for evacuation. We saw these were personalised and contained useful information such as if someone had limited vision to alert staff or emergency services to potential communication issues. The evacuation plans were not easily and readily available at the start of the inspection as they were located in peoples care records. We discussed this with the clinical director who arranged for copies of them to be placed in a secure but readily accessible place for an emergency and ensured that staff were aware of this.