

Maria Mallaband Care Homes (2) Limited

Alexandra Court - Cleveleys

Inspection report

110 Victoria Road east
Thornton
Cleveleys
Lancashire
FY5 3SZ

Tel: 01253853645

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09 June 2017

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12 July 2017

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 in December 2015, at which we identified a breach of Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations (Safe care and treatment.) We identified that medicines were not managed safely. We found one person's medicines were not available and medicine administration records were not always accurate. Procedures for managing controlled drugs were not adhered to.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of regulation. We carried out this unannounced focused inspection on the 09 June 2017 to check they had followed their plan and to confirm they now met legal requirements. 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 'Alexandra Court – Cleveleys' on our website at www.cqc.org.uk.

Alexandra Court is registered to accommodate up to thirty seven people with personal care needs. At the time of the inspection there were thirty five people who lived at the home. Alexandra Court provides independence and privacy in individual apartments. Each apartment has its own lounge, kitchenette, bathroom and bedroom. Accommodation is provided over two floors, with a stair lift providing access to the first floor. There are a range of communal rooms, comprising of a lounge, a dining room and a conservatory. There are garden areas with seating for people to use during the summer months. Car parking is available at the home.

The service had a registered manager in place. 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 09 June 2017, we found improvements had been made. We found medicines were managed safely. We saw records related to medicines were accurate and people told us they received their medicines as prescribed.

At this inspection we only reviewed medicines to ensure improvements had been made. We did not review all aspects of the safe domain and therefore the rating will not be changed until our next planned comprehensive inspection.

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 how medicines were managed.

Medicines were managed safely.

At this inspection we only reviewed medicines to ensure improvements had been made. We did not review all aspects of the safe domain and therefore the rating will not be changed until our We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Alexandra Court - Cleveleys

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. We undertook this unannounced focused inspection of Alexandra Court -Cleveleys on 09 June 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection in December 2015 had been made. The team 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 some legal requirements.

The inspection team consisted of an adult social care inspector and a medicines inspector.

Prior to this inspection, we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are submitted to the Care Quality Commission and tell us about important events that the provider is required to send us.

We spoke with four people who lived at the home. We also spoke with the registered manager, and three care staff. We checked medicines documents in relation to fourteen people who lived at Alexandra Court - Cleveleys.

Is the service safe?

Our findings

At our comprehensive inspection of Alexandra Court -Cleveleys in December 2015, we found staff did not always sign medicine administration records (MAR) to indicate medicines and creams had been administered. We also found people did not always receive their medicines as prescribed and improvements were required in the administration of controlled drugs. This was a breach of Regulation 12 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 as medicines were not managed safely.

During this inspection carried out on 09 June 2017 we found improvements had been made. People told us they were happy with the way their medicines were managed. One person told us, "My medicines are completely satisfactory."

We observed some people receiving their morning medicines. We did this to check medicines were administered safely. We heard staff ask people if they needed pain relief and explain what medicines they were receiving, for example antibiotics. Administering staff ensured that time sensitive medicine had been given appropriately. Medicines were given discreetly and privacy and dignity was maintained. We found the staff member concentrated on their duties and checked the MAR (medicine and administration record) and the medicine prior to administering medicines. We saw the MAR was signed when people had taken their medicines. We were informed by the registered manager that following analysis of a dispensing error, a system had been introduced to ensure staff were not disturbed during the round. A 'do not disturb' tabard was worn and a separate member of staff had responsibility to answer any telephone calls. This helped minimise the risk of errors occurring.

We found that medicines were stored in a safe and secure manner. Improvements had recently been made following an audit by the pharmacy that provided the medicines. A new fridge had been purchased and a locked storage cupboard for waste medicine had been built. We found the clinic room where medicines were stored and the medicines fridge had the temperature monitored in accordance with national guidance. This helped ensure medicines were fit for use. During the inspection we discussed the storage of medicines when medicines were delivered to the home. We saw the area was secure, however there was no temperature monitoring in place. Prior to the inspection concluding the registered manager had addressed this.

We recommend the service seeks and implements best practice guidance in relation to the temperature monitoring of all medicines stored at the home.

We looked at the arrangements in place for the storage of controlled drugs. Medicines that are controlled drugs (medicines subject to stricter legal control because they are liable to be misused) were stored and recorded in the right way. There were no residents requiring controlled drugs at the time of the inspection.

We looked at records for seven people who required topical preparations such as creams. Staff applied people's prescribed creams and recorded this on their MAR. We saw these creams were applied regularly so

people's skin was cared for properly. Creams were stored safely in people's rooms and most had 'date opened' information to ensure a shortened expiry date was observed. This helps ensure medicines are fit for use.

We looked at fourteen people's medicine charts and all records had photographs and allergy status present. We did not see any 'gaps' in administration records and any handwritten entries were signed by two people. This helped minimise the risk of errors occurring. We viewed documentation which evidenced that additional stock counts and running balances were done to ensure stock was correct for medicines that were to be taken only 'when required'. Extra guidelines (protocols) were kept with the MAR explaining why this medicine had been prescribed and how it should be used so the person gained maximum benefit. This helped ensure people received their medicines safely when they needed it.

At the last inspection, we raised concerns about the arrangements for ordering medicine supplies. This had been resolved with a new supplier and additional training for staff. Medicines were received and checked with sufficient time to ensure omissions or out of stocks were received before they were needed. From the sample of medicines we inspected there were adequate supplies to meet the needs of people living at the service.

We viewed the policies, training procedures and audits relating to medicines and found the policies reflected current guidance. Five staff had undertaken medicines administration training and we saw competency audits for one of the staff, other staff told us about the training they had received. This evidenced staff were provided with training to enable them to administer medicines safely.

At this inspection we only reviewed medicines to ensure improvements had been made. We did not review all aspects of the safe domain and therefore the rating will not be changed until our We will check this during our next planned comprehensive inspection.