

Lancashire County Council

Dolphinlee House Home for Older People

Inspection report

Patterdale Road
Ridge Estate
Lancaster
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20 March 2017

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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 in January 2016, at which we identified a breach of Regulation 12 (Safe care and treatment.) We identified that medicines were not managed safely. This was because medicines records were incomplete and people did not always receive their medicines as prescribed.

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 20 March 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 'Dolphinlee House Home for Older People' on our website at www.cqc.org.uk.

Dolphinlee House is situated in a residential area of Lancaster called Ridge Estate and accommodates up to forty-four people with residential care needs. The home consists of four units. Two units providing residential care. One providing dementia care and one dementia rehabilitation.

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 20 March 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.

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.

We could not improve the rating for safe from requires improvement because this was the only Key Line of Enquiry (KLOE) inspected within this domain. We will check other KLOE's during our next planned comprehensive inspection.

Requires Improvement



Dolphinlee House Home for Older People

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 Dolphinlee House Home for Older People on 20 March 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection in January 2016 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.

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 three people who lived at the home. We also spoke with the registered manager, the senior manager and three care staff. We checked medicines documents in relation to ten people who lived at Dolphinlee House Home for Older People.



Our findings

At our comprehensive inspection of Dolphinlee House Home for Older People in January 2016, 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. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 as medicines were not managed safely.

During this inspection carried out on 20 March 2017 we found improvements had been made. People told us they were happy with the way their medicines were managed. Comments we received included, "I always have my tablets." And, "I'm happy for the girls to give me my medicines. They get it right." Also, "I'm not worried about my medicine."

We observed medicines being administered. We did this to check medicines were administered safely. The staff member concentrated on their duties and checked the MAR and the medicine prior to administering medicines. We noted the staff member consulted with people and the MAR record was signed when people had taken their medicines.

We checked a sample of MAR records and medicines and found the quantities matched. This indicated people received their medicines as prescribed. We discussed the ordering and disposal of medicines with staff. The staff member we spoke with was able to explain the action to take if medicines required ordering or disposal. This helped ensure medicines were managed safely. We noted a MAR record related to one person had an incorrect date on it. This was rectified by the registered manager prior to the inspection visit concluding.

We found appropriate storage was in place that helped ensure the risk of medicines being misused was minimised. Access to medicines was restricted to staff who had completed training in the safe management of medicines. During this inspection visit, we viewed documentation which evidenced training in medicines had taken place.

We saw documentation which evidenced checks were carried out on the medicines. We viewed a sample of medicines audits and noted areas of improvement were identified. For example, we saw it had been identified that bottles of medicines were not always dated on opening. We checked to see this area of improvement had been communicated to staff. Staff told us they were aware of the requirement to date bottles of medicine on opening. One staff member commented, "We were picked up on not dating bottles

but we've remembered to do it now." During the inspection we checked a range of bottled medicines and found these were dated by staff when opened. This demonstrated there was a system in place to check medicines were managed safely.