

# Colten Care Limited

# Newstone House

## Inspection report

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## Ratings

Is the service effective?

Requires improvement



## Overall summary

We carried out an unannounced comprehensive inspection of this service on 19 and 20 January 2015, at which a breach of legal requirements was found.

Some people required restrictions on their liberty to keep them safe. We saw the correct processes were not always carried out which meant people's legal and human rights were not being upheld.

After the inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on the 11 August 2015 to check that they had completed the actions.

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 'Newstone House' on our website at [www.cqc.org.uk](http://www.cqc.org.uk). We will review ratings at our next comprehensive inspection.

Newstone House provides accommodation and nursing care for up to 59 older adults including people living with dementia. There were 59 people living in the home when we inspected.

The home's registered manager has worked in this role since February 2013. 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 and associated Regulations about how the service is run.

At our focused inspection on the 11 August 2015, we found that the provider had followed their plan which they had told us would be completed by the May 2015 and legal requirements had been met.

People had their legal and human rights upheld. Staff had made applications to the appropriate supervisory authority for people whose liberty was being restricted, in order for them to receive the appropriate care and treatment. There was a record of all applications, dates of assessment, the outcome and a review date. Pre admission and admission paper work had been updated to include a checklist, to prompt staff to assess the persons capacity and if they needed any restrictions.

# 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 effective?**

We found that action had been taken and the correct legal processes were being followed when a person was being restricted of their liberty.

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 at the next comprehensive inspection

**Requires improvement**



# Newstone House

## 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 a focused inspection of Newstone House on 11 August 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection 19 and 20 January 2015 had been made. We inspected the service against a specific key line of enquiry within one of the five questions we ask about services: is the service effective. We

looked to see if consent to care and treatment was being sought in line with legislation and guidance. This is because the service was not meeting legal requirements in relation to that question.

The inspection was carried out 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. We contacted a representative of the local authority's contract monitoring team and the clinical commissioning group involved in the care of people living at the home to obtain their views on the service.

At our visit we spoke with three care workers, the head of care and the registered manager. We looked at five sets of care records and saw other records kept to monitor the use of Deprivation of Liberty Safeguards (DoLs). We spoke with a representative from the local mental capacity act team.

# Is the service effective?

## Our findings

At our comprehensive inspection on 19 and 20 January 2015 some people did not have their legal and human rights upheld because staff had not always followed the correct legal processes. Some people required restrictions in place to keep them safe.

This was a breach of regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection 11 August 2015 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 13 described above.

People who lacked capacity to consent to appropriate care and treatment, had their rights protected by appropriate use of the Deprivation of Liberty Safeguards (DoLs). These safeguards apply to people who have a mental disorder (such as dementia) and are unable to consent to the arrangements made for their safe care and treatment. Some people lacked capacity to make decisions about where they lived in order to receive the care and treatment they needed to keep them safe. In order to protect them from harm there needed to be restrictions on their liberty. There are processes which must be followed to ensure people's legal rights are protected. The registered manager and head of care understood when an application should be made for a DoLs and how to submit one. The local mental capacity team confirmed that appropriate applications had been received and they were adequately completed.

A record was kept and updated to map the progress of an application for a DoLs. The record included the date of the assessment by the local authority and detailed what the outcome was including a review date. There was also a record of any conditions that might apply to the DoLs. For example one condition stated that the person required a referral to the local community mental health team. The care records reflected the conditions of the DoLs had been met.

The registered manager had sent notifications, required by law to the Care Quality Commission to inform us of the outcome of the DoLs application.

Most staff (82%) had received training in the Mental Capacity Act (2005) and DoLs, the remaining staff were booked to do training on 10 September 2015. Staff were able to describe the principles of the act and understood how it applied to their work. For example one care worker told us that when a person lacks capacity it is vital decisions are made in the persons' best interests, following the correct legal processes. They were able to explain what the legal processes were. Other care workers told us they would talk with a senior member of the team if they were unsure.

People who had their liberty restricted maintained some freedom to move around within the confines of the home environment. For example the connecting doors between two of the suites had been opened to maximise the space for people living with dementia. On the first and second floors there was access to outside space, via a balcony, however people needed to be supervised for safety reasons. There was a garden which was accessible from the ground floor; people from the first and second floor were able to use the garden with staff or family support. There were activity staff who arranged activities for people across the home. Some people (who were subject to a DoLs) from the first and second floor were either out on a day trip or were on the ground floor involved in activities. Some people came downstairs for their meals.

Documentation had been amended to ensure staff asked about people's capacity prior to them moving into the home. Consideration was made whether the person would be restricted of their liberty if they moved into the home. Further checks were made on the day of admission. For example one person was identified as needing to have their liberty restricted on the first day of living in the home, a DoLs application was completed. There was a policy to support and give guidance to staff on the use of the Mental Capacity Act and DoLs.