House Of Light Trust Limited

# The Cornerstone

**Inspection report**

115 Doncaster Road
Rotherham
South Yorkshire
S65 2BN
Tel: 01709 365387

Date of inspection visit: 30 June 2015
Date of publication: 23/07/2015

## Ratings

| Overall rating for this service | Good |
|---|---|
| Is the service safe? | **Requires improvement** |

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 3 February 2015 in which a breach of the legal requirement was found. This was because people were not protected against the risks associated with the unsafe use and management of medicines. This was a breach of Regulation13 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to Regulation 12 (g) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook an unannounced focused inspection on 30 June 2015 to check that they had made the improvements in regard this breach.

You can read the report from our last inspections, by selecting the 'all reports' link for 'The Cornerstone' on our website at www.cqc.org.uk.'

The Cornerstone is a care home without nursing. It provides care for up to eight people with learning disabilities or autistic spectrum disorders. The home is situated close to Rotherham town centre.

The service had a registered manager in post at the time of our inspection. 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 this inspection we found the provider had made appropriate changes to manage medicines safely, although these required embedding in to practice. The provider's medication policy and procedure had been updated, however still needed to reflect the procedure for medicines given on an 'as required' basis.

# 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.

The provider had appropriate arrangements in place to manage medicines. However these needed to be embedded in to practice.

We will review our rating for this domain at our next comprehensive inspection to ensure the improvements made and planned continue to be implemented and have been embedded into practice.

**Requires improvement**

# The Cornerstone

**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 checked 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.

The inspection took place on the 30 June 2015 and was unannounced and the inspection team consisted of an adult social care inspector.

Before our inspection, we reviewed all the information we held about the home.

We spoke with the local authority and Healthwatch Rotherham to gain further information about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We spoke with the senior on duty. We looked at the systems used to manage people's medication, including the storage and records kept.

Requires improvement

# Is the service safe?

## Our findings

At our previous inspection we found the management of medicines was not safe. This was a breach of Regulation13 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to Regulation 12 (g) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We asked the provider to send us an action plan. The provider did this and said they would be compliant by 1 April 2015. At this focused inspection we found improvements had been made.

We checked to see if medicines were ordered, administered, stored and disposed of safely. We looked at the MAR sheets for the eight people who used the service. We saw some gaps in the charts where there were no signature and no code to say if the medicine had been given or why it was not given. We spoke with the senior care worker who told us they had noticed this as they were administering today's medicines. The senior also told us and showed us that the tablets were not in the monitored dose system so she felt they must have been given but not signed for. The senior told us they would follow this up with the person involved and their manager.

At our previous inspection we saw medicines were not always stored in line with current regulations. On our inspection of 30 June 2015 we saw this had improved.

Controlled drugs were stored in a metal drug cabinet separate to other medicines kept at the home. We saw a controlled drugs record and checked this medicine and found it to be correct. Items which required storing in a fridge were now stored in a fridge for this purpose. The fridge was located in the office space and accessed by the senior care worker on duty. We saw temperatures were taken on a daily basis of the fridge and the room were medicines were stored. This meant the storage of medicines was appropriate.

The provider had appropriate arrangements in place to manage medicines. The provider's medication policy and procedure now included instruction for the safe management of controlled drugs. However, there were no reference in the policy about medication which was given as required. We spoke with the senior who could explain the process and evidence what happened when this type on medicine were administered.

Medicines were delivered on a weekly basis and booked in using the Medicine Administration Record (MAR). There was a record available for the disposal or returned medicines to pharmacy.

Each person had a front sheet in the medication book, which had a photo, name, date of birth and any known allergies. Each person also had a list of medicines they were taking along with what they were used for and how the medicine was to be taken.