

# Vista Care Limited Rockingham House

#### **Inspection report**

19 London Road Kettering Northamptonshire NN16 0EF Date of inspection visit: 11 November 2016

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Ratings

### Overall rating for this service

Is the service safe?

Good

Good

#### **Overall summary**

We carried out an unannounced comprehensive inspection of this service on 7 and 8 June 2016. The comprehensive inspection identified that improvements were required in relation to how people were protected from known risks as staff did not always follow people's individual plans of care that had been developed to mitigate people's assessed risks. During the comprehensive inspection on 7 and 8 June 2016 we found that the provider was in breach of Regulation 12 2(b), of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the comprehensive inspection on 7 and 8 June 2016 the provider submitted an action plan to the Care Quality Commission (CQC). This focussed inspection was carried out to ensure that the provider had implemented improvements in relation to how people were protected from known risks. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rockingham House on our website at www.cqc.org.uk.

This unannounced focused inspection took place on the 11 November 2016. This residential care service is registered to provide accommodation and personal care to support people with learning disabilities. Rockingham house provides care and support to up to four people. At the time of our inspection there were three people living at the home.

People's care and support needs were regularly monitored and reviewed to ensure that care was provided in the way that they needed and the risks to people were managed effectively. Staff were knowledgeable about the risks to people and followed the plans of care that had been implemented to manage these risks. People could be assured that they would receive their medicines safely and at the right time.

People were supported by sufficient numbers of staff that were experienced and supported to carry out their roles to meet the needs of people living at the home. Staff had received on-going training in key areas that enabled them to understand and meet the care needs of people living in the home. Robust recruitment procedures were followed and people were protected from receiving unsafe care from care staff unsuited to their role.

#### 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.

Risks were regularly reviewed and, where appropriate, acted upon with the involvement of other professionals so that people were kept safe.

People felt safe and staff were clear on their roles and responsibilities to safeguard them.

People received their care and support from sufficient numbers of staff that had been appropriately recruited and had the skills and experience to provide safe care.

People's medicines were appropriately managed and safely stored.

Good



# Rockingham House

# Background to this inspection

We undertook an unannounced focused inspection of Rockingham House on 11 November 2016. This inspection was carried out to check that the provider had implemented improvements in relation to how people were protected from known risks.

This inspection was carried out by one inspector. Before the inspection we contacted local health and social care commissioners who place and monitor the care of people living at Rockingham House. We also reviewed the information we held about the service, including statutory notifications that the provider had sent us. A statutory notification is information about important events which the provider is required to send us by law.

We spent time observing the care that people living in the service received to help us understand the experiences of people living in the home. We reviewed the care records of two people living in the home and the recruitment records for three members of staff. We spoke to the operations manager who was overseeing the management of the home whilst a new permanent manager was recruited. We also reviewed records relating to the management of medicines and staffing levels of the service.

# Our findings

During our last inspection in June 2016 we concluded that this domain required improvement. This is because the provider was in breach of Regulation 12 2(b), of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We found that staff were not always aware of the plans of care that had been developed to mitigate known risks to people which had resulted in people being placed at the risk of harm.

During this inspection we found that the provider had implemented improvements which had ensured that staff were knowledgeable about people's plans of care that had been developed to mitigate their known risks. People's risks were assessed and effective measures were implemented to manage their identified risks. Staff were knowledgeable about the risks to people and followed the plans of care that were in place to address these risks. People's known risks and the strategies that had been implemented to mitigate these risks were discussed within staff meetings to ensure that all staff understood the actions they should take to protect people from the risk of harm.

People's needs were regularly reviewed and acted upon as their needs changed. The provider had worked closely with people's allocated healthcare professionals and care managers to develop effective strategies to manage people's known risks. For example, clear guidelines were in place for staff to follow if people absconded from the home. Records showed that staff had followed these guidelines and had taken appropriate action to protect people from the risk of harm.

People's medicines were managed appropriately. Records in relation to people's medicines were well maintained and regular audits were in place to ensure that all systems were being safely managed. People had plans of care in place providing guidance for staff in how to administer their medicines. People's medicines were managed safely and people received their medicines at the right time. Staff had received training in how to administer people's medicines safely and had their competency to do this assessed prior to administrating medicines independently.

People were supported by staff that recognised when people were at risk of harm and knew what action they should take to keep people safe. We saw that when required alerts had been made to the local authority and that the management of the service had worked closely with other professionals to complete investigations. Staff were knowledgeable about the steps to take if they felt people were at risk. All staff had received training in how to safeguard people from harm and were confident in applying the learning from this training.

There were sufficient numbers of staff working to meet the needs of people living in the home and to provide safe care and support. The majority of people living in the service received 1:1 support during the day and records confirmed that the provider had sufficient numbers of staff available to provide this support.

People were safeguarded against the risk of being cared for by staff that were unsuitable to work in a care home. The staff recruitment procedures explored gaps in employment histories, obtained written references

and checked whether staff had any criminal convictions.