

Care Management Group Limited

Care Management Group - Trafalgar House

Inspection report

9 Sutherland Avenue
Bexhill On Sea
East Sussex
TN39 3LT

Tel: 01424222911
Website: www.cmg.co.uk

Date of inspection visit:
14 March 2017

Date of publication:
25 April 2017

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●

Summary of findings

Overall summary

We carried out a comprehensive inspection of Trafalgar House on 13 and 14 January 2016. A breach of legal requirement was found in relation to safety and security. After the inspection the provider wrote to us with an action plan stating what they would do to meet legal requirement in relation to the breach of regulation.

We undertook this focused inspection on 14 March 2017 to check the provider had followed their plan and to confirm they now met legal requirements. We found improvements had been made and the provider was now meeting all legal requirements.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Trafalgar House on our website at www.cqc.org.uk

Trafalgar House provides accommodation and support for up to eight people. Accommodation is provided from a large detached house. The building is located within a residential area in Bexhill-on-Sea. The service provides care and support to people living with a range of learning disabilities and mental health diagnosis. People had a range of needs and all required some assistance. This included, personal care, communication and going out. Several people have been living at the service for over 12 years. There were eight people living at the service on the day of our inspection.

A registered manager was in post. 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 and associated Regulations about how the service is run.

The provider had taken steps to ensure people's safety in relation to previous concerns regarding security. The systems and checks which had been established to secure the garden were fully embedded within staff routines. People told us they felt safe living at Trafalgar House and staff were clear on their responsibilities associated with protecting people from harm both within the service and when out in the wider community.

The environment was routinely checked to ensure it was safe for people. Various in house checks were undertaken by staff in areas such as fire safety and water temperatures. Servicing and maintenance of fixed equipment such as boilers and hard wiring electrics were completed by external contractors. We have made a recommendation to the provider as to how they respond in a timely manner to requests from the registered manager in relation to where remedial works have been recommended following an external contractors visit.

People's care needs had been assessed and risks associated with supporting people living with complex behavioural needs were managed in line with these assessments. Assessments were detailed and up-to-date and had been completed for a wide range of daily living needs.

All aspects of medicine management were managed safely and in accordance with current regulations and guidance. Staff were knowledgeable about people's medicines and where to access support if they required additional guidance. Medicines were been stored, administered, audited and reviewed appropriately.

There were sufficient numbers of staff with the skills, knowledge and experience to support people. When staff were recruited, their employment history was checked, references obtained and comprehensive induction completed. Checks were also undertaken to ensure staff were safe to work within the care sector. Staff were knowledgeable and trained in safeguarding and knew what action they should take if they suspected abuse was taking place.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe was meeting the legal requirement that was previously in breach.

Risks associated with people's daily living routines had been carefully assessed and were well managed by staff.

Staff were trained in how to protect people from abuse and knew what to do if they suspected it had taken place.

Staffing numbers were sufficient to ensure people received a safe level of care. Recruitment records demonstrated there were systems in place to ensure staff were suitable to work within the care sector.

Medicines were stored appropriately and associated records showed that medicines were ordered, administered and disposed of in line with regulations.

Care Management Group - Trafalgar House

Detailed findings

Background to this inspection

We undertook an announced focused inspection of Trafalgar House on 27 February 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 23 April 2015 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service safe? The inspection was completed by one inspector.

Before the inspection we reviewed the information we held about the home, including previous inspection reports. We considered the information which had been shared with us by the local authority and other people, looked at safeguarding alerts which had been made and notifications which had been submitted. A notification is information about important events which the provider is required to tell us about by law.

We looked at all areas of the service, including people's bedrooms, bathrooms, communal lounges and dining area. During the inspection we reviewed the records of the home. These included accidents and incidents, quality audits and medicines. We also looked at two people's care documentation and risk assessments along with other relevant documentation to support our findings. We 'pathway tracked' people living at the home.

We met with people who lived at Trafalgar House and spoke with two care staff, the home's administrator and the registered manager. We observed the interaction between people and staff.

Is the service safe?

Our findings

We carried out a comprehensive inspection of Trafalgar House on 13 and 14 January 2016 where we found a breach of legal requirements in relation to safety and security. The provider sent us an action plan and told us they would address the issue by 16 March 2016. At this inspection we found improvements had been made and the provider was now meeting all legal requirements.

People living at Trafalgar House continued to tell us they felt safe. One person said, "It is a good place to live, yes I feel safe."

At our previous inspection we found the provider had failed to ensure they effectively manage risks related to people leaving the service without staff knowledge. A side garden gate had been left open and unattended. At this inspection we found the provider had put systems in place which significantly reduced the risks of any person being able to leave the service without staff's knowledge. We saw all access in and out of the premises were secure and additional measures had been established to ensure staff routinely checked these gates.

A recent external electrical routine survey had identified some remedial works which required corrective action. The registered manager evidenced they had attempted on several occasions to liaise with the provider's facilities team to establish a date for the works to be completed. During our inspection the registered manager escalated the request to a more senior member of staff at the providers head office. The registered manager evidenced all remedial works had been completed within three days of our inspection.

We recommend the corporate provider considers how their head office function responds and communicates with the registered manager when future requests for remedial works are submitted.

There were effective systems in place to check the environment was safe for people. We saw routine health and safety checks were undertaken covering areas such as fire safety and water temperature. Outcomes from these were recorded clearly. Maintenance and servicing of equipment such as the fire alarm, portable electrical equipment (PAT) and boiler were seen to be regularly completed. The registered manager spoke positively about the provider's maintenance team and said they responded in a timely manner when maintenance request were raised.

At our last inspection we identified minor areas which required improvement in regard to medicine management. At this inspection we found all aspects of medicine management were safe and met people's needs. Each person had their own medicine profile. The profiles provided detailed information on people's medicine history and what each medicine they were prescribed was for. There was information available for staff on the potential side effects of medicines. Medicines in current use were stored in line with regulations in a secure staff area. We looked at a sample of MAR charts and found them competently completed. Medicines were ordered correctly and in a timely manner that ensured medicines were given as prescribed. Medicines which were out of date or no longer needed were disposed of appropriately. One staff member told us, "I feel very confident in assisting people with their medication, the training and support is very

good." There were robust systems in place to manage medicines which were PRN 'as required'. Individual medicines profiles identified clear lines of accountability as to when and who could administer these.

Staff continued to have good knowledge and awareness of different types of abuse and what actions they would take if they suspected abuse had taken place. There were up-to-date policies in place to ensure staff had guidance about how to respect people's rights and keep them safe from harm. These included clear systems on protecting people from abuse. We saw that safeguarding referrals had been made appropriately to the local authority safeguarding team in a timely fashion.

Most people who lived at Trafalgar House required support with complex behavioural support needs. The risks associated with these and all aspects of daily living for people had been managed well. Robust risk assessment had been completed for a wide range of areas; such as personal care, finances, eating and drinking. Risk assessments were cross referenced with people's detailed positive behaviour support plans. For example, one person had an assessed risk of 'hitting out' when they had raised anxiety; clear preventative strategies had been established to minimise the risks to people and staff should this person display these behaviours. Staff told us that some people's risk assessments were very detailed but they had been provided with time to familiarise themselves with these documents.

The provider had established effective systems for the safe management of incidents and accidents. Accident and incidents forms continued to be uploaded to the provider's electronic database. This ensured they were accessible by appropriate senior operations staff. Since our previous inspection the analysis of accidents and incident had improved and the registered manager was able to draw on this data when updating risk assessments and support plans. The registered manager said, "It is a really useful tool and it is being developed further which is really positive." Care staff were clear on the documentation they were required to complete and the associated timelines. One told us, "It's really important to be able to carefully track and record residents' behaviours and triggers so we can adapt to support them safely."

Since our previous inspection staffing levels had significantly increased. The registered manager said, "We have had several new residents and the staffing numbers reflect the increase in support needs." There were enough skilled and experienced staff to ensure the safety of people who lived at the home. The registered manager told us that people's dependency levels were reviewed as part of their support plan and adjustments in staffing levels would reflect any changes. The service published a rota which identified which senior staff were 'on call' when one was not in the building or during the night. Staff spoken with said that they felt the home was sufficiently staffed.

There were contingency plans in place in the event of an emergency. The service had an 'emergency grab bag' which contained information such as copy of people's key contact numbers and copies of people's medicine requirements. The registered manager was in the process of placing people's personal emergency evacuation plans (PEEP) in this at the time of our inspection. Records indicated that full 'mock evacuation' drills were undertaken four times a year. The provider had a reciprocal agreement with another of the providers nearby services should the need arise to evacuate people from the building.

Staff continued to be recruited in line with safe practice. Recruitment records contained staff responses to interview questions, full employment histories and previous employment references. Disclosure and Barring Service checks (DBS). The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.