

Turning Point

Turning Point Hagden Lane

Inspection report

336-338 Hagden Lane
Watford
Hertfordshire
WD18 7SH

Tel: 01923213015

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16 January 2017

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10 February 2017

Ratings

Overall rating for this service

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 16 August 2016. A breach of legal requirements was found.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to systems being in place to ensure the quality of the service were up to date with regard to, 'when required' PRN medicines, staff training, fire drills and environmental aspects of the house that required attention.

We undertook this focused inspection to check that they had followed their plan and to confirm that they continue to work to meet 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 Turning Point Hagden lane on our website at www.cqc.org.uk

Turning Point Hagden Lane provides personal care and support in a supported living environment of two adjacent houses for up to six people who have learning disabilities and mental health needs. There were six people living at the service at the time of the inspection.

The registered manager left the service in October 2016. A registered manager from another Turning Point service was carrying out the day to day running of the supported living with the support of senior staff.

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 16 January 2017, we found that the provider had followed their plan which they had told us would be completed by the 10 January 2017 and legal requirements had been met with further measures put in place to strengthen the management of PRN (as needed) medicines following this inspection.

People who used the service and the staff knew what to do in the event of a fire.

The staff were clear about their training needs and the importance of keeping up to date.

Improvements had been made to the fabric of the house and further improvements had been planned.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found that action had been taken to monitor and improve the quality of the service.

There was a system in place to monitor staff training and all staff were aware of their training needs and they were up to date.

Improvements had been made to the supported living environment and clear plans for future work had been put in place.

A fire drill had taken place and future ones were planned.

There was an audit of PRN (as needed) medicines but further improvements were necessary to make it fully effective

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 for well led at the next comprehensive inspection.

Requires Improvement ●

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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 an unannounced focused inspection Turning Point Hagden Lane on 16 January 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 16 August 2016 inspection 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 was undertaken by one inspector. Before the inspection we reviewed the action plan completed by the provider. During the inspection we spoke with three people who used the service, two staff members, We looked at documents relating to how the service operated, including monitoring data, training records and toured the buildings. Following the inspection we spoke with the manager on the telephone.

Is the service well-led?

Our findings

At our comprehensive inspection of Turning Point Hagden Lane on 16 August 2016 we found that although there were arrangements to monitor, identify and manage the quality of the service these were not always accurate or up to date. The record for PRN (as needed) medicines had not been completed accurately, one staff member's training was out of date, fire drills although noted as having been completed were out of date. Requests made about the need for decoration, furniture replacement and repairs of the premises had not been followed up regularly nor were a log of required actions and outcomes.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection 16 January 2017 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 17 described above.

We looked at the records for two people who received PRN medicines. There were daily recording of the medicines taken and the number remaining signed by staff as well as a weekly stock check for each PRN medicine. However on one occasion there was a discrepancy of eight tablets from one day to the next. The staff member had not signed the daily record nor was there any indication what had happened to the tablets. The weekly check also made no mention of the difference in tablets. There was not a clear link between the daily records and the audits and they were not always written in a clear way, with dates changed or crossed out. This meant the medicine was not being recorded correctly and the audit system although improved was not consistently effective. The manager said they would follow up the incident with the staff members involved and take appropriate action. Following the inspection the manager sent a new PRN recording sheet they had created which clearly recorded the amount of medicine given, the time, whether a medicine was taken, refused or disposed of.

People said they knew what to do in the event of a fire and knew the importance of fire evacuation drills. One person said, "We go outside and wait to see everyone is safe". Staff were aware of the fire safety routines and we saw evidence that a fire evacuation drill had taken place on 20 August 2016 with a further one planned for February 2017.

There was a new system to document staff training and the staff spoken with said their training was up to date. The team leader showed the system they had put in place to ensure people kept up to date with their training. Records seen at the inspection showed people had completed training.

People who lived in the service were pleased with the decoration to the communal areas. One person showed us the new flooring in the kitchen and the decorating of the communal areas saying, "They have started doing things and it's nice ". A new shower had been fitted in one of the bathrooms and a person said, "It's good to have a nice shower". The team leader said how there was a new drier purchased for one of houses, and plans were in place to replace both kitchens and microwaves. The houses looked brighter and cleaner in the communal areas and people were pleased with the outcome.

Both people living in the service and the staff spoke positively of the new manager. One staff member said, "They are very good, experienced and supportive. All the people living in the service relate well with her". The manager said they were able to manage their roles across two services. "I work three full days at Hagden Lane and can be flexible and work a sleep in and weekends to get an overall picture of the service. There are good staff in both services and I can be reached easily from either service". They said they received good support from the area manager. We saw people living in the service related well with staff.