

Four Seasons (No 11) Limited Highfield Hall

Inspection report

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Ratings

Is the service safe?

Good



Overall summary

We carried out an unannounced comprehensive inspection of this service on 22, 23 and 30 December 2014 and identified a breach of regulation. This was because documentation relating to people's care was not kept up to date and did not provide sufficient information to ensure people received safe, effective and co-ordinated care.

We asked the provider to send us an action plan to tell us how they would ensure they met the legal requirements in relation to the breach. We undertook a focused inspection on the 19 March 2015 to check that they had followed their plan and to confirm that they now met regulatory legal requirements. During our inspection on 19 March 2015 we found that the provider had followed their plan which they had told us would be completed by April 2015 and legal requirements had been met.

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 'Highfield Hall' on our website at www.cqc.org.uk

Highfield Hall provides nursing and personal care for up to 75 older people in single ensuite bedrooms. There are

comfortable lounges, dining rooms, sensory room, hairdressing salon and a kitchenette for people and their visitors to use. Various aids and adaptations to support people to maintain their independence are available in addition to assisted bathing facilities. There is a separate dementia unit to care for people living with a dementia.

There was a registered manager in post on the day 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.

We found that risk assessments and care planning had improved. Care plans had been reviewed and were being routinely checked by senior management. Staff had been provided with clinical supervision and given the right guidance on how to manage and report on distressed reactions from people using the service.

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 because staff were supervised and given guidance on how to manage risk effectively and safely.

This meant the provider was now meeting regulatory legal requirement.

Good



Highfield Hall

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 was 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 Highfield Hall 19 March 2015. This inspection was completed to check that improvements to meet regulatory legal requirements planned by the provider after our comprehensive inspection 22, 23 and 30 December 2014 had been made. We inspected the service against one of the five questions we ask about services, 'is the service safe'.

The inspection was undertaken 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.

At the visit to the home we spoke with three people who used the service, and we visited three other people in their rooms who were resting, the registered manager, the nurse in charge, and three care staff. We also looked at three people's care notes, a random selection of care intervention sheets, staff duty rotas and staff handover sheets.

Is the service safe?

Our findings

We spoke with three people using the service. They told us they were 'very happy' and that staff treated them well. One person told us, "I have everything I want here. My room is nice and the staff work very hard." We visited three people in their rooms who were resting and we checked their records.

During our last unannounced inspection 22, 23 and 30 December 2014 a breach of legal requirements was identified. This was because the lack of appropriate information being recorded in care notes could potentially place people at risk of further harm. We found body maps, which would show the date, size and position of any bruising, had not been completed. As a result of this bruising we had seen on one person's arms, could not be explained properly. We were told the person was resistive to personal care interventions although there was no risk management strategy for staff to follow to deal with this.

We received an action plan from the provider. They told us what they had done to improve their records. They said the person's risk assessment and care plan had been implemented on the day of inspection, along with a body map. Clinical supervision was to be held with all nurses and senior staff. This was to ensure that any further incidents of unexplained bruising will immediately trigger a body map being completed and a record made on care notes and on the home's monitoring system for further investigation by the registered Manager. We found evidence from records we looked at this had been implemented.

The Deputy Manager and registered Manager said they would review all care plans and ensure proper risk assessments were implemented for any residents with resistive behaviour. They also said they would take into account staff that may respond /interact well with people who were presenting these behaviours. We checked records and found evidence that the improvements we had asked for had been made. This should help to reduce and manage similar situations staff may find themselves dealing with on a day to day basis.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.