

Pressbeau Limited

# Wren Park Care Home

## Inspection report

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Date of inspection visit:  
03 February 2017

Date of publication:  
16 March 2017

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 01 October 2015.

After that inspection we received concerns in relation to the application of the safeguarding procedure in the service and the management of people's medicines. We had also been notified that the registered manager was no longer managing the service. As a result we undertook a focused inspection to look into those concerns.

This report only covers our findings in relation to those topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Wren Park Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Wren Park Care Home provides accommodation and nursing care for up to 31 older people, some of whom may be living with dementia. At the time of our inspection there were 31 people living at the home.

The service does not have a registered manager. However, a new manager has recently been appointed who has commenced the process to register with the Commission. 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.

Prior to this inspection we had received information of concern regarding the safeguarding procedure in the service and the management of people's medicines. We were told that there had been a delay in referring a safeguarding concern to the local authority and that a person had not received their medicines as prescribed as insufficient stock had been maintained. During this inspection we found that the provider had taken appropriate action to address the concerns raised.

People felt safe living at the service. Staff were knowledgeable with regards to safeguarding people and aware of the potential signs of abuse. All staff were comfortable in raising concerns and understood their responsibilities. There were effective safeguarding procedures in place and staff had received safeguarding training.

People received their medicines as prescribed. Medicine records were comprehensive and there were effective systems in place for the safe storage and management of medicine. Regular audits were completed.

A new manager was in post at the service who had begun the process of assessing the quality of the service and identifying potential changes. People and staff knew who the manager was and found them approachable.

The service had a positive, open culture. Staff were aware of their role and responsibilities and were clear on the lines of accountability at the service. Regular team meetings were held and staff felt involved in decision making.

People and their relatives were asked for their feedback on the service and comments were encouraged. Effective quality monitoring systems and processes were used to drive improvements in the service and identify where action needed to be taken.

## 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.

People felt safe and secure living at the service.

Staff were knowledgeable about protecting people from harm and the safeguarding processes in place.

Robust systems were in place for the safe storage and management of medicines. Regular audits were completed.

### Is the service well-led?

Good ●

The service was well led.

The service did not have a registered manager however; the new manager in post had commenced the process to register with the CQC.

There was a clear management structure of senior staff.

Staff felt involved in decision making and had been consulted on planned changes in the service.

Quality monitoring systems were in place and were used effectively to drive continuous improvements in the service.

# Wren Park Care Home

## 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.

This focused inspection took place on 3 February 2017 and was unannounced.

This inspection was undertaken to look into the concerns that we had received. The team inspected the service against two of the five questions we ask about services: is the service safe and is the service well led. The inspection was carried out by one inspector.

Prior to this inspection we had received information of concern. We reviewed information we held about the service, including previous reports and statutory notifications sent to the Care Quality Commission (CQC) by the provider. Statutory notifications are information about important events at the service, such as safeguarding concerns, which the provider is required to send to us by law. We also spoke with the local authority who have a commissioning and monitoring role with the service.

During our inspection, we observed how the staff interacted with the people who used the service and how people were supported.

We spoke with six people who lived at the service to find out their views about the care provided. We also spoke to three care workers, one nurse, the deputy manager and the manager of the service. The nominated individual from the provider organisation was also present.

We reviewed the care records and risk assessments of five people who lived at the service, and also checked medicines administration records to ensure these were reflective of people's current needs. We reviewed additional information on how the quality of the service was monitored and managed to drive future improvement.

# Is the service safe?

## Our findings

Prior to this inspection we had received information of concern regarding the safeguarding procedure in the service and the management of people's medicines. We were told that there had been a delay in referring a safeguarding concern to the local authority and that a person had not received their medicines as prescribed as sufficient stock had not been maintained. We discussed this issue with the local authority who confirmed that these concerns had been substantiated however; the manager and provider had reviewed the systems in place at the service and taken action to prevent reoccurrence. During this inspection we found that the provider had taken appropriate action to address the concerns raised and in response to the local authorities findings.

People and relatives told us they had no concerns for their safety within the service and felt secure. One person said, "Of course, I'm safe here, with all these staff and people around me." Another person told us, "I am happy that I am safe here. I don't have any worries."

People were safeguarded from the risk of harm by knowledgeable staff. All the members of staff we spoke with told us they had received training on safeguarding procedures and demonstrated a good understanding of these processes. They were able to explain to us the types of concerns they would raise and were also aware of reporting to the local authority or other agencies. One member of staff said, "I've just started here and it was one of the first things discussed with me. I wouldn't worry about speaking up or asking the question, if I wasn't sure, it's my responsibility." Another member of staff said, "I would speak to [Name of manager] or [Name of deputy manager] if I noticed something wrong or if I was worried about someone."

Training records for staff confirmed that they had undergone training in safeguarding people from the possible risk of harm. There was a current safeguarding policy in place and information about safeguarding including the details of the local safeguarding team was clearly displayed in the entrance hallway. The manager demonstrated a clear knowledge of their responsibilities in relation to safeguarding and the requirement to ensure that referrals were made to the local authority where required.

People we spoke with confirmed they received their medicines as prescribed. One person told us, "I'd get in a right two and eight if I had all my tablets to do but it's all taken care of for me by the nurses." Another person told us, "The nurses are all very good at sorting out our tablets. I don't have to do anything but take them!"

There were effective processes in place for the management and administration of people's medicines and there was a current medicines policy available for staff to refer to should the need arise. We reviewed 10 records relating to how people's medicines were managed and saw that they contained an information sheet for each person, a recent photograph and any specific instructions to staff in relation to the prescribed medication. We saw that each Medication Administration Record (MAR) had been completed properly and there were no gaps or omissions.

Medicines were stored securely in a locked trolley within a designated secure room. We saw temperature controls checks in place and that medicines were stored in an organised manner. Audits were in place to ensure these were in date, stored according to the manufacturer's guidelines and that stock levels were not excessive.

The manager explained to us how monthly audits of medicines were carried out so that all medicines were accounted for and these had been further supplemented by an additional weekly stock check of a random sample of medicines and associated records. These processes helped to ensure that medicine errors were minimised, and that people received their medicines safely and at the right time.

## Is the service well-led?

### Our findings

Prior to this inspection we had received notification that the registered manager was no longer working at the service and, subsequently, they cancelled their registration with the Care Quality Commission. A new manager had been appointed in December 2016 and had begun the process to register with the Commission. We had received no concerns in relation to the management of the service.

During this inspection we found that there was a new manager who had begun the process of assessing the quality of the service and identifying potential changes. Since starting work at the service the manager had conducted audits of records and processes, including the coordination of inputting care plans on to a new computerised system. They had also completed supervisions with senior staff and had sought feedback from people, their relatives and staff about the care provided.

We found that a schedule of team meetings had been arranged and an additional weekly meeting for care staff had been introduced. Competency checks and performance reviews had been completed for staff or were planned for the coming weeks. We saw where concerns had been identified regarding the performance of staff we saw that the manager had acted promptly, had evaluated the shortfalls in performance or standards of care thoroughly alongside the provider and, where required, disciplinary action had been taken in accordance with the provider's policy.

We noted that there was a calm and quiet atmosphere within the service. People knew who the manager was and confirmed that they had been introduced to them. One person told us, "I've seen the new manager plenty. She pops around speaks to us." One person initially could not recall the new manager however, upon the manager entering the lounge; they identified them and confirmed that they did know them. A member of staff told us, "It's always a tricky time when there is a new manager but it's obvious that we all want to do a good job and I can tell [Name of manager] will be good to work alongside." A member of staff who had recently begun working at the service told us, "I've been made very welcome by everyone. The manager seems very approachable and I wouldn't have any concerns in asking for help."

Staff were aware of their roles and responsibilities and were clear on the lines of accountability within the staff structure. They told us that the manager had consulted with them regarding changes they planned on making in the service and that they felt involved in decision making. Staff were also clear on the visions and values of the provider organisation.

We found that there were a range of audits and systems in place by the provider organisation to monitor the quality of the service provided. These included reviews of care plans, medicines audits, mealtime experience audits, environmental audits and complaints management. Any issues found in the audits were recorded in the resulting action plan and there was detailed information as to how they would be addressed by the manager.

We also saw that the provider had completed a recent satisfaction survey and the service was awaiting feedback from the most recent local authority inspection. The manager explained that once the series of



audits had been completed and feedback received from all sources they would be using the information to compile a new overall development plan for the service. This demonstrated how the manager planned to further use feedback from a variety of sources to drive improvements at the service.