

Coombe Grange Care Limited

Coombe Grange Residential Home

Inspection report

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Hampshire
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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Good 

Overall summary

We carried out an unannounced comprehensive inspection at Coombe Grange on 8 December 2015. We found some staff were not familiar about how to report abuse if they suspected this might take place. Some staff were not knowledgeable about how to assess people's capacity to make decisions and could not tell us how they applied the Mental Capacity Act 2005 (MCA).

We found Coombe Grange to be in breach of Regulation 18 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds with Regulation 11 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Need for consent.

After the comprehensive inspection, we published a report in which we asked them to tell us what they would do to meet legal requirements in relation to the one

breach we identified and how they would improve their safeguarding procedures. The provider sent us an action plan which stated that they would have made the required improvements by the 10 June 2015.

We carried out an unannounced focussed inspection on 10 June 2015 to check whether action had been taken in relation to the breach of Regulation 18 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds with Regulation 11 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Need for consent. We found the provider had made the required improvements.

Summary of findings

This report only covers our findings at the inspection on 10 June 2015. You can read the reports from our last comprehensive and focussed inspection, by selecting the 'all reports' link for 'Coombe Grange' on our website at www.cqc.org.uk.

Coombe Grange provides care and support for up to 40 people. At the time of our inspection there were 25 people living there.

Coombe Grange did have a registered manager on the day of the 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.

Staff were knowledgeable about the different types of abuse that could take place and told us how they would inform the local authority and the Care Quality Commission (CQC) if they suspected someone was being abused. Safeguarding policies contained sufficient contact details should staff need to contact the local authority and CQC.

Records showed all care staff had received training in the use of the Mental Capacity Act 2005 (MCA). They were knowledgeable about the requirements of the MCA and were able to describe how they supported people to make decisions.

As a result of this inspection, we revised the ratings in respect of the 'safe' and 'effective' domains and this meant the overall rating changed from requires improvement to good.

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. Staff were provided with sufficient information should they need to raise any concerns about the possibility of abuse.

Good



Is the service effective?

The service was effective. Staff were knowledgeable about the requirements of the Mental Capacity Act 2005 and people were supported to make decisions effectively.

Good



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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 was meeting legal requirements and regulations associated with the Health and Social Care Act 2008, to check the provider had made the necessary improvements and to decide whether it was appropriate to revise their rating under the Care Act 2014.

We undertook a focussed inspection of Coombe Grange on 10 June 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 8 December 2015 had been made. We inspected the service

against two of the five questions we ask about services. This is because the service was not meeting legal requirements in relation to its effectiveness and required improvement in respect of providing safe care.

Before the inspection, we reviewed all 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. We spoke with the provider, the registered manager, the deputy manager, three care workers, the administrator and two people. We looked at policies and procedures relating to safeguarding and checked the provider had implemented an effective tool to assess and support people to make decisions.

One inspector conducted this inspection.

You can find full information about our findings in the detailed key questions of this report.

Is the service safe?

Our findings

At our previous inspection on 8 December 2014 we found staff were not provided with sufficient detail to raise concerns if they felt someone was at risk of abuse. They said they would refer to the homes safeguarding policy for guidance. The safeguarding policy did not contain relevant information about the local authority safeguarding team or the Care Quality Commission (CQC). We told the provider this required improvement.

At this inspection we found improvements had been made. The providers safeguarding policy had been reviewed and

updated. It contained contact information for the local authority and the Care Quality Commission. Staff were knowledgeable about who to contact if they suspected abuse. One care worker told us they would always report abuse. They said: "I would phone the police or CQC if I thought someone was being hurt, I just wouldn't stand for it". Another care worker said: "The safeguarding policy is over there so if I need to speak to someone I can refer to that". The registered manager and the deputy manager told us discussions about raising safeguarding concerns were discussed at supervisions and staff meetings. Staff confirmed this.

Is the service effective?

Our findings

At our previous inspection on 8 December 2015 we found staff were unsure about their roles and responsibilities in relation to the Mental Capacity Act 2005 (MCA). Records showed some staff had not received training in the MCA and could not tell us how they applied it in practice. Care plans did not provide information about how to support people to make decisions. The MCA and accompanying Code of Practice highlights that steps should be taken to assist people to make decisions and the decisions people can make should be recorded.

This was breach of Regulation 18 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

At this inspection we found the provider had made the necessary improvements to meet the fundamental standard. Records showed all staff had received training in understanding the MCA and every member of staff including senior staff were able to describe its principles.

One care worker said: “We have to check they have capacity first and if they don’t, we go to a best interest decision”. Another care worker said: “We must assume people have capacity unless we have reason to suspect otherwise”.

People told us their decisions were respected. One person said: “The staff respect what I want”. Another person said: “I don’t have to do anything I don’t want to”. The registered manager and the deputy manager had attended MCA training on the 9 June 2015 and had created a new document to support people to make decisions. The document included a test of capacity, details of Lasting Power of Attorney, advocacy and any advanced decisions to refuse treatment. The deputy manager told us the document was helpful in ensuring people’s capacity to make decisions was assessed correctly and in line with the requirements of the MCA. We saw a schedule located on the office door which advertised a MCA drop in session. The manager told us staff were encouraged to attend the session to refresh their knowledge of the MCA and to discuss the progress of the new document.