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Clair Francis Retirement Home

Inspection report

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Ratings

Is the service safe?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 03 November 2014. A breach of two legal requirements was found. This was because people's medicines were not always managed in a safe manner and there were not always sufficient staff on duty to meet the needs of the people living in the home.

After the comprehensive inspection the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches.

We undertook this unannounced focused inspection on 13 July 2015 to check that the provider had followed their plan and to confirm that they now met legal requirements.

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 Clair Francis Retirement Home on our website at www.cqc.org.uk.

Clair Francis Retirement Home is a registered care home which provides accommodation, support and non-nursing care for up to 28 people, some of whom live with dementia. There were 22 people in the home at the time of the inspection. Accommodation is provided on two floors and there are gardens and internal communal areas, including dining rooms and lounges, for people and their visitors. The home is located in a residential area on the outskirts of Peterborough.

The home had a registered manager in post at the time 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.

Summary of findings

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 Clair Francis Retirement Home on our website at www.cqc.org.uk.

At our focussed inspection on 13 July 2015 we found that the provider had followed their plan which they told us would be completed by 31 March 2015 and legal requirements had been met.

People told us they were supported to take their prescribed medicines. Staff understood their responsibilities in the management and recording of

medicines. People had all their prescribed medicines available because there was sufficient stock in the home. Medicine audits had taken place each month and actions had been taken as a result of any issues identified. There was some information for staff so that medicine, prescribed 'when required', was administered in a consistent way.

There was evidence that people were supported by sufficient numbers of staff to meet their needs. Staffing levels had been assessed in relation to the dependency levels of people who lived in the home. People were supported with their individual interests and activities.

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?

We found that action had been taken to improve the safety of the service.

Staff had some written information about medicines that were only administered when required.

Action had been taken to improve the management of people's medicines, including any discrepancies and gaps in medicine administration records. People had all their prescribed medicines available. This meant that the provider was now meeting the legal requirement.

There were enough staff available to provide meaningful activities and to spend time with people. The provider was able to demonstrate that there were always enough staff to meet the needs of people in the home.

This meant that the provider was now meeting the legal requirement.

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 safe at the next comprehensive inspection.

Requires improvement



Clair Francis Retirement Home

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Clair Francis Retirement Home on 13 July 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection of 03 November 2014 had been made. We 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 legal requirements in relation to that question.

The inspection was undertaken by one inspector.

Before our inspection we looked at all of the information that we held about the home. This included the provider's action plan, which we received on 16 February 2015.

During our inspection we spoke with two people who lived in the home. We also spoke with one senior care staff, one staff member, who supported people with their activities, and the registered manager. We looked at two people's care records and medication administration records.

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Our findings

At our comprehensive inspection of Clair Francis Retirement Home on 03 November 2014 we found that there were discrepancies in the medication records in respect of the number of tablets in the home and the number there should have been in the home. We found that the information available to staff for medicine that was administered 'when required' was not clear enough to ensure they were administered appropriately. We found that some medicines had not been available for people as they had run out.

This was a breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focussed inspection on 13 July 2015 we found that the provider had followed some of the action plan that they had written to meet shortfalls in relation to the requirements of the described above.

People told us that they were satisfied with how they were supported to take their medicines. One person said, "It [medicine] is always given at the right time. I have painkillers and they are important to keep me from being in pain. They are always given so that I'm not left in pain." Another person said, "I have a number of different things [medicines]; and they're always given to me." People told us their medicines were always available when they needed to be administered.

We saw that monthly audits had been completed to check that the number of tablets in the home were correct. Overall the audits had found few medicines that could not be reconciled; however there was no written information to show what action had been taken. The registered manager told us they had discussed the issues with staff. We spoke with one senior member of staff who confirmed that the registered manager had talked with all staff who administered medicine and they were told what was expected of them when administering and recording medicines.

There was information about medicine that could be administered 'when required'; however there were still no details of when the medicine should be administered. One

medicine was for 'agitation' and although one staff member was clear about when the medicine would be given, this guidance had not been written down to ensure that all staff would administer the medicine consistently.

At our comprehensive inspection of Clair Francis Retirement Home on 03 November 2014 we found that the provider was not able to demonstrate that there were always enough staff to meet the needs of people in the home. We noted that staff had little time to engage in meaningful conversations or interactions with people.

This was a breach of Regulation 22 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focussed inspection on 13 July 2015 we found that the provider had followed the action plans they had written to meet shortfalls in relation to the requirements of the Regulations described above.

We saw that there were enough staff in the home so that people were supported and kept safe. People were not hurried by staff and staff socially spoke with people when they assisted them to walk to the table for lunch. There was a method that was used to check people's dependency levels so that there were sufficient staff available to meet people's needs. There was evidence that the registered manager had used the method and had increased the number of staff when necessary.

There was a member of staff in the home who provided individual and group interests and activities for people as well as details of a second member of staff who took her place when on holiday or any other occasion such as sickness. We saw that people enjoyed the chats that they were involved in and they were smiling and interested in what was going on. We were told by staff and people in the home that skittles had been played today and people were involved if they wished. The member of staff who provided activities told us of the types of interests' individual people took part in within the home, such as manicures and pedicures for both men and ladies, as well as the outings that took place after discussion with people. There had been a visit to Peterborough Cathedral and one person wanted to visit the local museum and this was in the process of being arranged. Records of the individual and group activities detailed who had attended. The staff

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member told us, “It means we make sure no-one gets left out. I make sure everyone has the chance to go out if they want to, and if they don’t, then I spend one to one time with them”.