

Chesterholme

Quality Report

Anick Road
Hexham
Northumberland
NE26 4JR
Tel: 01434 600980
Website: www.danshell.co.uk

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This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations

Ratings

Overall rating for this location

Good



Are services safe?

Good



Overall summary

We carried out a focused, unannounced inspection of Chesterholme to review the remedial actions taken by the provider in relation to two regulatory breaches. These breaches were identified at the last comprehensive inspection of the hospital in August 2015. This report was published in February 2016. As the focused inspection took place within six months from publication of the comprehensive inspection report, we have re-rated the safe domain.

The regulatory breaches related to the lack of a female only lounge and out of date clinical equipment.

At this inspection we found that:

- A female only lounge was available for female patients. Patients confirmed that this room was always available for female patients to use and that male patients did not use this facility.
- Staff were completing daily checks of clinical equipment. The registered manager reviewed these on a weekly basis to ensure they were completed.

However:

- The checklist used for daily checks of clinical equipment did not include oxygen masks. We found oxygen masks in the clinic room that had expired.
- The weekly check by the registered manager did not include an audit of the accuracy of the daily check of clinical equipment.

Summary of findings

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Summary of this inspection

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Good 

Chesterholme

Services we looked at

Wards for people with learning disabilities or autism

Summary of this inspection

Background to Chesterholme

Chesterholme hospital is for adults of working age with a learning disability. It can accommodate 16 people, male or female. The hospital has patients who are detained under the Mental Health Act (1983) and informal patients who are there with their consent. At the time of the focused inspection, there were 13 patients admitted to the hospital. Five of the patients were detained under the Mental Health Act.

The registered manager was on duty on the day of our inspection.

Chesterholme has been registered with the CQC since September 2013. A comprehensive inspection of the service was carried out in August 2015.

Our inspection team

The team that inspected the service comprised one CQC inspection manager and one inspector.

Why we carried out this inspection

We inspected this service to review what action the provider had taken in relation to two regulatory breaches, identified during the previous inspection in August 2015.

During the comprehensive inspection of the service in August 2015, we found that the hospital did not comply with gender separation requirements as outlined in the Department of Health guidance on same sex accommodation. We found Chesterholme Hospital provided facilities to locate patients of the same gender into different areas. This meant that male and female

patient bedrooms were located separately. There were six lounges, five in the main hospital building and one in the annex. However, there was no separate female only lounge, despite the building being refurbished from 2011 onwards.

We also found that the hospital did not ensure that clinical equipment was regularly checked or replaced when it had expired. We found that a number of items of emergency equipment in the clinic room had expired and had not been checked.

How we carried out this inspection

The focus of the inspection was to establish what actions the provider had taken to address and resolve the two regulatory breaches from the comprehensive inspection in August 2015.

During the inspection visit, the inspection team:

- spoke with the registered manager for Chesterholme
- spoke with a patient advocate
- spoke with three patients

- looked at the hospital environment, particularly in relation to the availability of a female only lounge area
- looked at the clinic area and equipment
- looked at the arrangements in place to check clinical equipment
- looked at staffing rotas
- looked at two patient care records

Summary of this inspection

What people who use the service say

We spoke with three patients during the inspection. Patients were positive about the care provided. Patients said they had access to lots of activities, although one patient said that they could not go out on visits to the local pub as often as they had previously been able to.

Two female patients told us they had access to the female only lounge, which they used regularly. One patient said that it was not always possible to have access to the bath during the evenings.

Wards for people with learning disabilities or autism

Safe

Good 

Summary of findings

There was a female only lounge in the hospital. The lounge had clear signage to indicate that it was for use by female patients only.

Staff completed nightly checks of emergency equipment and the registered manager completed a weekly check to ensure staff were adhering to this. This included temperature checks of medication fridges and the clinic room.

However;

We found oxygen masks, which had expired in January 2016.

The manager was completing a weekly review to ensure staff had checked equipment daily, but this did not include an audit of the accuracy of the daily check of clinical equipment.

Are wards for people with learning disabilities or autism safe?

Good 

A female only lounge was available for use by female patients. Staff had displayed clear signage on the lounge door. We spoke to two female patients who told us that the lounge was available at all times for them to use. They said that they had never experienced any issues with male patients using the lounge.

At the time of the inspection, there was a female patient using the female only lounge. The door to the lounge was alarmed. This meant that staff could leave the patient in the lounge area and be aware of when the lounge door was opened by patients. We reviewed the patient's care record and found that this was detailed in the care plan.

We also heard a door alarm to a patient's bedroom, which was activated when the door was opened. Staff told us this was to ensure they were aware when the patient was outside of their bedroom. We reviewed the patient's care record and found this was detailed within the care plan.

We reviewed the clinic area and clinical equipment. Staff were completing daily checks of emergency equipment. The registered manager completed a weekly check to ensure that staff had completed daily equipment checks. Staff had completed regularly checks of medication fridge and clinic room temperatures. However, the checklist of equipment did not include oxygen masks and we found there were masks in the clinic room with a use-by date that had expired in January 2016. The other equipment and medication in the clinic were all in date.

Staffing levels were one qualified nurse and a minimum of five nursing assistants during the day and one qualified nurse and a three nursing assistants at night. We reviewed staffing rotas for an eight week period. There were no occasions when staffing numbers had fallen below the required levels.

Outstanding practice and areas for improvement

Areas for improvement

Action the provider **SHOULD** take to improve

- The provider should ensure that daily checklists for clinical equipment include all equipment.
- The provider should ensure that there is a more robust process to audit the process for checking clinical equipment.