

Carecall Limited

Harvest House Nursing Home

Inspection report

126 Carholme Road
Lincoln
Lincolnshire
LN1 1SP

Tel: 01522513202

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We previously carried out an unannounced comprehensive inspection of this service on 22 and 23 December 2015. During this inspection we found that the provider was not meeting the standards we expected and there were breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the systems in place to deploy staff within the home, manage medicines and monitor the quality of the service were not effective. After the inspection the provider wrote to us to say what they would do to meet the legal requirements in relation to the breaches.

We undertook this focused inspection on 8 June 2016 in order to check whether the provider had followed their plan and to confirm that they now met the legal requirements. At this inspection we found that the provider had made improvements in all of the areas we had identified.

This report 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 Harvest House Nursing Home on our website www.cqc.org.uk.

Harvest House Nursing Home provides accommodation for up to 22 older people who need personal or nursing care, some of whom experience memory loss associated with conditions such as dementia. At the time of our inspection 20 people were living in the home.

There were appropriate arrangements in place to ensure people's medicines were ordered in a timely manner and were available when they needed to take them. People received their medicines at the times prescribed for them and medicine administration records were completed appropriately.

The provider had made improvements to the way in which the registered manager and staff were deployed within the home. The registered manager had increased time to carry out their management duties and provide support for staff.

The provider had systems in place to identify shortfalls in the quality of services provided and plan for continuous improvement within the home. Regular monitoring of staffing levels took place and quality audits were carried out.

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.

We found that action had been taken since our last inspection to make improvements as to how safe the service was.

Systems were in place to ensure people received their medicines in a safe and timely manner.

There were enough staff employed and effectively deployed within the home.

However, although 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 ●

Is the service well-led?

The service was well-led.

Systems were in place to monitor the quality of the services people received and to plan for continuous improvement.

However, although 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 'well-led' at the next comprehensive inspection.

Requires Improvement ●

Harvest House Nursing Home

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Harvest House Nursing Home on 8 June 2016. This inspection was carried out to check that improvements to meet legal requirements with regard to staff deployment, medicines management and quality monitoring which were planned by the provider after our comprehensive inspection on 22 and 23 December 2015 had been made.

We inspected the service against two of the five questions we ask about services; Is the service safe? and Is the service well-led? This was because the service was not meeting some legal requirements in relation to those sections.

The inspection was carried out by a single inspector.

During the inspection we spoke with the provider, the general manager, the registered manager and two members of the care staff. We observed part of a medicines round and looked at records relating to the management of medicines. We looked at staff rotas and arrangements for the deployment of staff within the home. We also looked at records related to the monitoring of quality within the home.

Is the service safe?

Our findings

At the previous inspection in December 2015 we identified that people were not adequately protected against the risks associated with the management of medicines. We also found that the provider did not have systems in place to ensure there were enough staff on duty who were deployed effectively to carry out their designated roles.

During this inspection we found the provider had made improvements to the way in which medicines were managed and staff were deployed.

We looked at medicine administration records for seven of the people who were living in the home. The records showed that people's medicines had been administered correctly. During our inspection new monthly stocks of medicines were delivered from the local pharmacy. Records showed that regular medicines audits were now being carried out to enable any shortfalls to be identified at an early stage and managed appropriately. Information to guide staff about the consistent administration of medicines required only when necessary, such as pain relief, was put into place.

During the inspection the registered manager told us that their scope of duties had now been reviewed and revised by the provider. The registered manager continued with their management duties in an adjoining registered location. However, they were no longer required to fulfil nursing duties there. The registered manager told us this gave them more time to complete their management duties and support staff in the home. We saw that the provider had recruited new staff into vacant registered nurse posts so as to reduce the need to employ agency staff.

We saw that the registered manager had taken steps to ensure that registered nurses were supported to prioritise shift leading and nursing duties through the supervision process. This included support to make sure they were able to take work breaks they were entitled to. We also saw, and staff told us, that time for the registered nurses to complete their medicine rounds was now protected. The registered manager and general manager said they would introduce the use of 'do not disturb' tabards for registered nurses so that people who lived in the home and visitors could be guided to another member of staff to receive the assistance they required.

The registered manager and general manager had reviewed and revised the duties that the activity co-ordinator was required to undertake. They were no longer required to undertake laundry duties and support people with meals. The activity co-ordinator told us their role was 'much better' and they were able to plan one to one support for those who needed it as well as continue to arrange group activities. Records showed that support was provided as planned.

Although we found 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 therefore review our rating for 'safe' at the next comprehensive inspection we undertake.

Is the service well-led?

Our findings

At the previous inspection in December 2015 we identified that the provider did not have robust systems in place to assess and monitor the quality of the services that people received. During this inspection we found the provider had made improvements to the way in which they assessed and monitored the quality of their services.

The registered manager's duties had been revised to ensure they had enough time to carry out quality monitoring within the home. The provider had also appointed a general manager to provide extra support for the registered manager. Records showed that the registered manager regularly assessed the needs of people living in the home to determine the levels of staff that needed to be on duty. The registered manager told us that the provider was made aware of any shortfalls in staffing levels and was confident that they would ensure more staff were made available when required.

We saw that regular audits were now carried out for medicines management arrangements. The registered manager also told us a registered nurse had been identified to take a lead role with monitoring the medicines systems within the home. This was confirmed with the identified nurse.

Quality audits were now carried out regularly for other key areas such as care records and the general environment. Since the last inspection we saw the provider had made improvements to where hot food trolleys were sited when people were served meals. This meant that people were protected from the risks of, for example, burns, scalds or spoiled foods. The provider had also completed their plans to improve access to the home through their front door by adding a ramp to aid wheelchair access. The registered manager carried out daily checks of the environment. We saw that where issues were identified action plans had been put in place to ensure the issues were dealt with in a timely manner.

Although we found 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 therefore review our rating for 'safe' at the next comprehensive inspection we undertake.