

Ingham Healthcare Limited

Ingham Old Hall Care Home

Inspection report

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Norwich
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25 July 2017

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of Ingham Old Hall Care Home on 3 and 4 May 2017. Two breaches of legal requirements were found. After the comprehensive inspection, a warning notice was served in relation to the management of medicines.

We undertook this focused inspection in July 2017 to check that the service had met the warning notice and to see whether they now met legal requirements. This report only covers our findings in relation to the warning notice. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ingham Old Hall Care Home on our website at www.cqc.org.uk.

Ingham Old Hall Care Home provides care and support for up to 25 older people, some of whom may be living with dementia. The home is a converted period building, over two floors, set in extensive grounds. Some rooms have en suite facilities. At the time of this inspection, there were 23 people living in the home.

There was a registered manager in post. 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.

At the last inspection carried out in May 2017, we asked the provider to take action to make improvements in the management of medicines. At this inspection we found that these actions had been completed although a period of sustained improvement is required in order for us to have confidence that these changes have been imbedded into everyday practice.

Medicine management audits had been introduced since our last inspection and these had helped to ensure people received their medicines safely and as the prescriber had intended.

Staff had received up to date training in medicine administration and handling and their competency to do so had been assessed.

Frequent audits had helped staff to account for medicines which we found to be mostly accurate. However, whilst this had improved since our last inspection, we found some minor numerical discrepancies in records for the receipt of medicines.

Supporting information for medicines administration had also improved which further assisted in people receiving their medicines safely. This included the recording of personal information about people's medicine administration, the safe handling of eye drops, guidance for staff on medicines taken on an 'as required' basis and records relating to pain-relieving skin patches.

At this inspection, we concluded that sufficient improvements had been made by the service and they were

no longer in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 medicines administration and management.

We could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Ingham Old Hall 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.

We undertook an unannounced focused inspection of Ingham Old Hall Care Home on 25 July 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our May 2017 inspection 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 some legal requirements in relation to medicines management. The inspection was undertaken by one inspector from our medicines team.

Before we carried out the inspection we reviewed the information we held about the service. This included statutory notifications that the provider had sent us since our inspection in May 2017. A statutory notification contains information about significant events that affect people's safety, which the provider is required to send to us by law. We also looked at the plan of action the provider sent us following our inspection in May 2017. This plan detailed the actions the provider planned to take in order to address the issues identified.

During our visit we spoke with the registered manager and deputy manager. A number of documents associated with medicines administration and management were also reviewed. This included medicine administration records, staff training records and competency checks, medicine administration protocols and auditing systems.

Is the service safe?

Our findings

At our previous inspections carried out in July 2016 and May 2017, we found that the service had failed to fully mitigate the risks associated with medicines administration and management. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection in May 2017 we served a warning notice informing the provider that they had to comply with this regulation by 28 June 2017. At this inspection, carried out on 25 July 2017, we found the service had made sufficient improvements and were no longer in breach of this regulation.

Following our last inspection, the service submitted an action plan detailing how they were going to address the issues identified in the warning notice. We saw that these rectifying actions had been completed by the time of this inspection.

A member of CQC medicines team looked at how information in medicine administration records and care notes for people living in the service supported the safe handling of their medicines.

Since the previous inspection staff handling and administering medicines to people had received training and had been assessed as competent in medicine-related tasks.

Overall we found that records were accurate and up to date and showed that people were receiving their medicines as prescribed. There were frequent internal audits in place to enable staff to monitor and account for medicines. However, whilst we noted improvement, there were still some minor numerical inaccuracies in records for the receipt of medicines.

There were also improvements in supporting information available to staff to enable them to give people their medicines safely and consistently. There was personal identification, accurate information about known allergies/medicine sensitivities and details about people's preferences about having their medicines administered. When people were prescribed medicines on a 'when required' basis, written information was available to show staff how and when to give people these medicines. When people were prescribed pain-relieving skin patches, additional charts were in place to record their rotated application and their removal prior to application of the next patch. We found that containers of eye drops were marked to show their date of opening to help ensure they were only used for their limited shelf-life once opened.

We concluded that people had received their medicines safely and as the prescriber had intended and that the provider was compliant with the warning notice. However, a period of sustained improvement is required in order for us to be confident that changes have been embedded.