

Nazdak Limited

# Chestnut Residential Care Home

## Inspection report

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28 April 2016

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service effective?

**Requires Improvement** ●

Is the service responsive?

**Good** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 27 November 2015 where we found breaches of regulations in relation to staff recruitment and deprivation of liberty safeguards. The provider wrote to us to say what they would do to meet legal requirements in relation to a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. After that inspection we received concerns in relation to staffing, medicines, management of laundry and recording of complaints. As a result we undertook an unannounced focused inspection to look into those concerns and also to check the outstanding breaches from our inspection of 27 November 2015.

Chestnut Residential Care Home provides care and accommodation for up to five older people. At the time of our inspection there were four people using the service.

Some aspects of the management of medicines and the handling of laundry were not fully safe.

People were protected against the employment of unsuitable staff because improvements had been made to staff recruitment practices. Adequate staffing levels had been maintained while new staff were being recruited.

People's rights were protected through the use of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards.

We found the environment of the care home was warm and clean. One person told us they were "quite happy" and another person who had come in for a short stay told us their experience was "better than expected". A visitor told us "Mum seems happy here".

Chestnut Residential Care Home had a registered manager. 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for (location's name) on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

**Requires Improvement** ●

We found action had been taken to improve safety.

People were protected from the risk of the appointment of unsuitable staff.

Adequate staffing levels had been maintained.

Some aspects of the management of medicines and the handling of laundry were not fully safe.

### Is the service effective?

**Requires Improvement** ●

Action had been taken to improve the effectiveness of the service.

People's rights were protected by the use of the MCA and DoLS.

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

### Is the service responsive?

**Good** ●

The service was responsive.

There were arrangements to respond to any concerns and complaints by people using the service or their representatives.

# Chestnut Residential 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.

This inspection took place on 28 April 2016 and was unannounced. We carried out this inspection in response to information we received. The inspection was carried out by one inspector. We spoke with two people using the service, one visitor, the registered manager, the responsible individual and one member of staff.

# Is the service safe?

## Our findings

We received information about the safe management of people's medicines. We found people's medicines were stored securely. Medicines no longer needed were kept until return to the pharmacy, appropriate records had been kept. However the medicine keys were not stored in line with the registered provider's policy. We discussed this with the registered manager. They told us the keys were normally stored in line with the policy. We asked the registered manager to look into this which they agreed to do.

We received information about insufficient staffing levels. There was evidence that adequate staffing levels were being maintained, although staff had to work additional shifts to cover while the recruitment of new staff was in progress. Agency staff had also been used at times to cover shifts. One visitor welcomed the recruitment of new staff, they told us their relative did not like unfamiliar staff provided by an agency.

We also received information about the unsafe management of laundry. We spoke with the registered manager who confirmed that the wash cycles for soiled laundry was set at the highest temperature setting on the machine. Some laundry ready for washing had been appropriately stored in a plastic bag on the floor while other soiled laundry had been placed on the floor in front of the machine. We discussed with the registered manager that this was not good practice in terms of infection control or safety as the laundry may present a tripping hazard. They agreed to action this.

At our inspection of 27 November 2015 we found people were not protected against the appointment of unsuitable staff because robust recruitment practices were not operated. We found that the registered person was not operating effective recruitment procedures and did not ensure all the required information was available before employing staff. The provider wrote to us about the improvements they were making to staff recruitment procedures. They told us the improvements would be completed by the end of February 2016.

At this inspection we found improvements had been made to staff recruitment processes. Information had been obtained about previous employment involving caring for vulnerable adults before a decision to employ them was made. Copies of the regulations relating to the employment of staff were available for reference. People were protected against the employment of unsuitable staff.

## Is the service effective?

### Our findings

At our inspection of 27 November 2015 we found there had been no assessments of people relating to restrictions on their liberty. One person's care plan stated that they did not leave the home and if they did then a DoLS would need to be applied for. The front door of the care home was kept locked during our visit. The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS). The provider wrote to us to inform us of the improvements they were making to their approach on assessing people for application to deprive them of their liberty.

At this inspection we found an application had been made for authorisation to deprive one person of their liberty, following an assessment of their mental capacity. The application had been submitted in March 2016 and was awaiting assessment by the supervisory body. People's rights were protected by the correct use of the MCA and DoLS.

## Is the service responsive?

### Our findings

We received information about complaints not being recorded. We asked the registered manager for information about any complaints received by the care home. We were shown a folder containing details and responses to two complaints. In a locked drawer was information about a third complaint. The registered manager told us these were all the complaints received since our previous inspection in November 2015. All complaints had been investigated with action taken to remedy any issues. For example a complaint about the condition of a dining chair had resulted in all the dining chairs being replaced.