

Accommodating Care (Southport) Limited

Sandley Court Care Home

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 27 & 28 July 2016, breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to management of medications, safe care and treatment, person centred care and governance. They said they would meet all the legal requirements by 18 September 2016.

We undertook a focused inspection on the 29 November 2016 to check that they had followed their plan and to confirm that they now met legal requirements. This action has now been completed.

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 'Sandley Court' on our website at www.cqc.org.uk

Located near Southport town centre, Sandley Court provides accommodation and personal care for up to 23 older people and is owned by Accommodating Care (Southport). The home is a converted house with an enclosed rear garden and parking spaces at the front. There is a ramp at the main entrance to assist people with limited mobility. Bedrooms, bathrooms and lounges are situated on the ground and upper floors. A lift is available for access to the upper floors. There is an enclosed garden to the rear of the building and parking to the front. A call system operates throughout 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.

During our last inspection in July 2016 we found there were risks associated with the safety of people living in the home. We found a number of windows in people's bedrooms did not have window restrictors fitted. We saw that all bedrooms now had restrictors fitted, which meant the risk of people falling from windows and sustaining serious injury were reduced. Faulty fire doors had been replaced and we saw that new doors closed quickly and securely to prevent a fire spreading and therefore helping to protect people.

Dirty and rusted equipment and broken furniture found at the last inspection had all been replaced.

We found that risks associated with poor cleanliness and infection control had improved. We found all areas of the home clean with no unpleasant odours. Staffing had been increased to ensure the home was cleaned each day.

We found that the risks associated with the administration of medications were improved.

Care records were securely stored.

We saw that people received support from other medical professionals when needed, and had their care provided in way which was meaningful to them. Care records contained sufficient information to enable staff to support people safely.

Meaningful activities were provided on a daily basis. People had the opportunity to go out and people spent time on a one to one basis with dedicated activity staff, if they wished.

There were audits in place to monitor the concerns identified at our last inspection, and we saw during this inspection the provider had made significant improvements to their auditing systems.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe. We found that action had been taken to improve safety.

Medicines were administered safely by trained staff.

Window restrictors and effective fire doors were fitted to ensure people were living in a safe environment.

Additional staff had been recruited and new to ensure the home was cleaned thoroughly each day.

Is the service responsive?

Good ●

The service was responsive. We found that action had been taken to improve the service provided.

There were daily activities planned for people living in the home, based on people's choice and preference.

Care was planned with regard to people's individual needs and preferences. We saw written care plans were formulated and regularly reviewed.

Is the service well-led?

Good ●

The service was well-led. We found that action had been taken to improve safety.

A quality assurance system was in place which monitored the quality of service. This was effective in identifying any issues and planning the development of the home.

We found this auditing was consistent and had addressed the issues identified at our last inspection.

Sandley Court 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 focused inspection took place on 29 November 2016 and was unannounced. The inspection was completed to check that the provider had followed their plan and to confirm that they now met legal requirements, in relation to management of medications, safe care and treatment, person centred care and governance, identified at the comprehensive inspection on 27 & 28 July 2016.

The inspection was undertaken by an adult social care inspector and a Specialist Pharmacist.

We inspected the service against three of the five questions we ask about the service; Is the service safe, responsive and well-led? This is because the service was not meeting legal requirements in relation to these questions.

Before our inspection we reviewed the information we held about the service and reviewed the provider's action plan, which set out the action they would take to meet legal requirements. We spoke with the Infection, Prevention and Control officer at the local authority. At the visit we spoke with the registered manager, the deputy manager, the maintenance person and one of the activities coordinators. We looked at medicine administration records (MARs) for ten people who lived in the home and the associated records which included the ordering process and ordering records, the provider's medication policy and the registered manager's medicines audit.

We looked at the care files for three people, as well as other documentation relating to the running of the home.

We checked seven people's bedrooms, the small and large lounge, dining room and two bathrooms and walked around the home throughout the inspection.

Is the service safe?

Our findings

During our last inspection in July 2016, we found that the home was not always safe. We found there were a number of risks associated with the safety of people living in the home.

At the last inspection we found a number of windows in people's bedrooms did not have window restrictors fitted. We saw that all bedrooms now had restrictors fitted, which meant the risk of people falling from windows and sustaining serious injury were reduced. Faulty fire doors had been replaced and we saw that new doors closed quickly and securely to prevent a fire spreading and therefore helping to protect people.

During this inspection we looked at the cleanliness of the home. We checked a number of bedrooms and bathrooms. We found that risks associated with poor cleanliness and infection control had improved. We found all areas of the home clean with no unpleasant odours. Staffing had been increased to ensure the home was cleaned each day.

Dirty and rusted equipment and broken furniture found at the last inspection had all been replaced, which meant that equipment could be cleaned properly.

At the last inspection we found that a recommendation from the local authority's infection control team for a separate area for clean laundry had not yet been actioned. On this visit we found these recommendations had been completed and a separate space had been built to house clean laundered clothes to proven any contamination.

We looked at how medications were managed in the home. At our previous inspection in July 2016 we found a breach of regulation in relation to the management of medicines in the home. This was because care workers were not following procedures for the safe administration, recording and storage of medicines. At this inspection, we found that medicines handling had improved.

We observed part of the morning medicines round. We saw that medicines were administered to each person individually and records were completed at the time of administration to help ensure their accuracy. The care worker administering medicines told us that they were aware that some medicines should be taken 'before food'. However, formal arrangements were not in place to make sure that this always happened. Suitable arrangements were in place for ordering medicines but although the home had followed up a missing prescription, one person had missed doses of three of their medicines for a week. The manager should discuss the ordering arrangements with the pharmacist and the GP to reduce the risk of reoccurrence.

We looked at ten medicines charts and medicines related records. The medicines charts were up-to-date and clearly presented to show the treatment people had received. Protocols were in place proving guidance for care workers about the use of "when required" medicines. People choosing to self-administer some of their own medicines were supported to do so. There was some information within care plans about how care workers would support people with this, but these could be further individualised. Body maps

described where prescribed creams should be applied but two of the body maps we examined had not been updated to reflect people's current prescriptions. This was raised with the manager during the inspection and these records were segregated for review.

We found that medicines including controlled drugs were safely stored and 'home remedies' were kept to support the prompt treatment of minor ailments. However, although the new medicines refrigerator sounded an alarm if the temperature was too high, care workers had stopped making a record of the daily temperature. We raised this with the manager who confirmed that they would reinstate daily monitoring. We saw that care workers handling medicines had completed assessed training and medicines audits were implemented to help ensure that the homes policies were adhered to.

Is the service responsive?

Our findings

During our last inspection in July 2016, we found the provider was in breach of regulations relating to provision of personalised care. During this inspection we looked to see how care was personalised to suit the needs of people living in the home.

We saw care plans for three people and found they were improved and incorporated personalised information about each person and how support should be provided to that person. They contained assessments of people's needs, including specific assessments of areas such as health needs, mobility and falls, skin integrity and appetite. Information regarding people's medical history and any health concerns were clearly recorded. Information relating to people's specific medical conditions, for example diabetes, to advise and alert staff was now stored in the care record, for easy access. This helped ensure that staff supported people safely. Medical information was also kept in the person's 'medical file' to go with the person when they attended any doctor's or hospital appointments.

We found that care plans and risk assessments were reviewed each month by the deputy manager and key worker, to ensure information recorded about how to support the person and the support and care they needed was accurate and up to date.

The provider employed two dedicated activities staff to provide a daily programme of activities, as well as spending time with people on a one to one basis. The additional staff member had begun working at the home in August 2016. They each worked 30 hours per week, which enabled activities to be provided each day. We saw the programme, which included activities such as board games, exercises, bingo, quizzes, beauty therapy and art and crafts. Entertainment was provided in the home once a month, which included a cinema afternoon, singers and holistic therapy. Some people attended a monthly lunch club in the local area. Plans were underway for Christmas festivities, which included visits from local school children to sing to the people who lived in the home.

Is the service well-led?

Our findings

During our last inspection in July 2016, we identified concerns around the systems and processes which were in place to improve and monitor the quality of service. We found the provider was in breach of regulations relating to this.

We looked at the provider's action plan, which they had sent to us after our inspection in July 2016 to see what action they said they were going to take. We saw at this inspection, that the provider had made improvements with regard to the quality assurance and auditing processes within the home.

We found during this inspection, the provider had a thorough auditing system in place which looked at falls, incidents, accidents, medications and staff recruitment. We were concerned about this during our last inspection because the previous auditing systems had not identified the issues we highlighted in these areas. We found that audits took place every month to analyse the incidents/ accidents which had occurred. The registered manager recorded when a referral was made to the falls team. We could not see evidence where the registered manager had seen each individual one; however they were able to tell us about the incident and the actions they had taken. The registered manager agreed to sign and date each record as evidence. An annual 'Accident trending forecast' had been completed as we had suggested at the last inspection. This gave a year's overview of all incidents and accidents.

Audits of the cleaning and infection control in the home were completed each month, using the checklist tool of a scoring system which was provided by the local authority's Infection Control team. We saw from the minutes of meetings with the provider and area manager that infection control and cleanliness were discussed and issues addressed.

We found a number of other audits were completed on a weekly, monthly and three monthly basis, depending on necessity. These included kitchen fridge/ freezer temperatures, water temperatures, equipment, cleaning/ infection control and fire safety. We saw that the provider and area manager met with the registered manager each month and completed their own audit, which included general home maintenance and care records.

We spoke with maintenance person. They showed us the documentation he completed each month, to maintain the safety of the home. We saw that each bedroom was checked each week and these checks included checking the window restrictors to ensure they were in good working order.

We saw that the provider was displaying the ratings from the previous inspection, as they are required to do by CQC.