

Mountfield Care Home Limited

The Mount Residential Home

Inspection report

226 Brettell Lane
Amblecote
Stourbridge
West Midlands
DY8 4BQ

Tel: 01384265955

Date of inspection visit:
09 October 2018

Date of publication:
23 November 2018

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We completed an unannounced comprehensive inspection of this service on 08 March 2018. We found there was a breach in the legal requirements and regulation associated with the Health and Social Care Act 2014. This was a breach in Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider did not have effective arrangements in place to monitor and improve the quality and safety and welfare of people using the service. There was also a breach of Regulation 18 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 because the registered provider did not ensure sufficient numbers of suitably qualified, competent, skilled staff were deployed. We asked the provider to take immediate action to rectify these concerns. The provider also voluntarily agreed to suspend new admissions into the home until a time they felt the care in the home could be safely provided.

We undertook this focused inspection on 09 October 2018 to check the provider had addressed our concerns and to confirm they now met the legal requirements. 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 The Mount Residential Home on our website at www.cqc.org.uk.

The Mount is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The Mount accommodates 18 people in one adapted building. At the time of the inspection there were 12 people living at the home.

A registered manager was working at the home and had recently been appointed. 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.

The ratings from the previous comprehensive inspection for these Key Questions were included in calculating the overall rating in this inspection.

People felt safe around staff that understood how to protect them from abuse. People and their families knew the staff supporting people and felt comfortable around them. Staff knew how to report concerns both within the home and to external organisations like the CQC if needed. The registered manager understood their responsibilities in reporting issues of concern.

Staff understood people's identified risks of harm or injury. Risks were also detailed in care plans for staff to refer to. People were able to access support from staff people were familiar with when needed. Recruitment processes were robust, and all background checks were completed before staff commenced work at the

home.

Staff understood the importance of reducing the risk of infection spreading and had access to protective clothing such as gloves, aprons and alcohol gels. Staff understood how to record accident and incidents which were passed to the registered manager for review and action as appropriate.

Since our last there had been a number of changes in the overall management of the service. The register provider was in the process of embedding new systems to monitor and review people's care. A number of long standing staff had left, and this allowed the registered manager to start afresh and develop their own systems to drive forward improvement. The registered manager had also worked collaboratively with the local authority to ensure monitoring and recording of people's care was accurate. The registered manager was also improving systems for reporting progress on developments within the home and to the registered provider.

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 ●

People were safe around staff who understood the signs of abuse and knew how to report their concerns. Risks to people's health and wellbeing had been recorded and updated and staff understood these risks. People were supported by enough staff to meet their care needs. Staff underwent recruitment checks to assure the provider of their suitability to work there. Staff understood how to limit the spread of infection. People received their prescribed medicines safely.

Is the service well-led?

Requires Improvement ●

Systems and processes to review people's care were being developed to ensure people received safe care. Morale had improved at the home. Staff understood their roles and that they could speak with the registered manager for guidance. The registered manager was working with the provider and local authority to further embed systems for reviewing and updating people's experience of care.

The Mount Residential 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 was an unannounced focused inspection which was undertaken on 9 October 2018. The purpose of our inspection was to check whether action had been taken by the provider to meet legal requirements following our comprehensive inspection undertaken on 08 March 2018. We inspected against two of the five questions we ask about services; 'Is the service safe?' And, "Is the service well-led?" This is because the provider was previously not meeting some legal requirements in relation to these questions.

The inspection team consisted of two inspectors.

We reviewed the information we held about the home and the provider. This included the provider's action plan, which set out the action they would take to meet legal requirements. We also contacted the local authority who are responsible for monitoring the quality and funding for people who lived at the home and asked them for their feedback about the home.

Most people living at the home were living with dementia and were unable to discuss their care with us. We spoke with two relatives of people who lived at the home that we spoke to at our previous inspection.

We also spoke with the registered manager and two staff.

We looked at two people's care records. This was to sample risk assessments about people's care needs. We reviewed applications sent to the supervisory body and Deprivation of Liberty authorisations. We also looked at records which included training records, recruitment files and checks the registered provider

undertook to assure themselves that people's care was being monitored.

Is the service safe?

Our findings

At our comprehensive inspection on 08 March 2018 we found there was a breach in Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The registered provider did not ensure sufficient numbers of suitably qualified, competent, skilled staff were deployed. At that inspection we rated the key question of "Is the service Safe?", as Requires Improvement. At this inspection we found improvements had been made. The registered provider was no longer in breach of Regulation 18.

At the last inspection, concerns about people's safety were not always escalated appropriately. At this inspection we saw improvements. Relatives we spoke with felt confident their family members were safe in the care of staff. One relative told us, "They have much better staff now." Another relative told us, "I have peace of mind that he is being looked after well 24 hours a day."

Staff understood the importance of keeping people safe and understood how to report any concerns they had both to the registered manager and the CQC. Staff told us they had received updated training recently. The registered manager also understood they could speak with the local authority in the first instance to discuss any concerns they may have.

Relatives we spoke with told us staffing had improved and there were sufficient number of staff to meet people's need. One relative told us, "There is enough staff around all the time and we see the same ones every day." Relatives told us they felt reassured by seeing the same staff support their family member. They told us this gave them confidence that there was continuity of care. The registered manager told us staffing levels were assessed based on people's needs and this was supported by the registered provider. We saw in one care plan a dependency assessment had been completed to guide the registered manager to ensure the correct level of support needed to support the person safely was available. We also checked staff rotas and saw the correct number of staff needed were at the home to support people.

Relatives we spoke with understood that some people required additional checks on their health and wellbeing to keep them safe. One relative told us, "[Family member] has bed rails on to keep him safe; this is not to restrict him." Relatives understood that each person required risk assessments to evaluate the risks people lived with and keep them as safe as possible.

At the last inspection, risk assessments were not always clear in their guidance for staff. At this inspection we saw risk assessments were detailed and gave staff guidance on how to support people as well as the risks people lived with. We saw in one person's care plan, this had been reviewed and updated regularly and information updated if an evaluation of a person's needs required this. For example, we saw risks assessments included information on a person's night time care, pressure care as well as health. Staff we spoke with could tell us which people were at risk of their skin breaking down and who required specialist cushions to relieve the pressure on their skin.

At the last inspection, systems for ensuring staff were recruited safely were not consistently followed. At this inspection we saw the registered manager had systems in place that included background checks to assess

the suitability of potential staff. We reviewed three staff files and saw recruitment checks included DBS (Disclosure and Barring Service) checks as well as two reference checks. All the checks had been completed prior to the staff commencing work at the home.

People's medicines were stored and handled safely by trained staff. Relatives felt assured their family member received the support they needed. One relative told us, "I come on different days and I know he takes his medication; there is no covering up." The registered manager undertook regular checks to ensure people received their medicines correctly. The Pharmacy supplying medicines to the home also undertook their own annual checks to ensure practices were safe and reported any anomalies to the registered manager for action.

We saw staff use specialised equipment to safely transfer people from one chair to another. Staff undertook this confidently and sensitively so that the person felt safe throughout.

The home was clean, tidy and odour free. Staff understood how to prevent the spread of infection and we saw staff had access to protective clothing such as gloves, aprons and alcohol gels. Staff confirmed they could access the protective clothing when needed.

Accidents and incidents were recorded by staff and passed to the registered manager for them to review. The registered manager monitored this so that any patterns or trends could be identified, and action taken accordingly. We saw in one person's file; a falls risk assessment had been completed following a series of falls in one month. The person was also referred to the Falls Clinic for further guidance on managing their falls. The registered manager explained they shared updates on people's care with staff so that staff could support people correctly.

Is the service well-led?

Our findings

At our comprehensive inspection on 08 March 2018 we found there was a breach in Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The registered provider did not make regular checks of the service and had not ensured high quality care had been delivered. At that inspection we rated the key question of "Is the service Well led?", as Inadequate. At this inspection we found improvements had been made but because there were a reduced number of people living at the home we could not yet check that the improvements were sustained. The registered provider was no longer in breach of Regulation 17.

The registered manager showed us the progress they had made against an improvement action plan they were working to. We saw that they met regularly with the registered provider to discuss the progress they were making.

We found there had been a number of positive improvements in the systems in place and saw their effectiveness at ensuring people received safe quality care. At our last inspection in March 2018, we saw people's care plans had not been reviewed and updated in a systematic way that ensured people received care in line with their needs. At this inspection care plans we reviewed showed us that people's care needs had been assessed and detailed information was available for staff to refer to. We also saw the registered manager had a system for ensuring all care plans were reviewed and updated. The registered manager told us they now had a system of sharing updates on people's care needs with the registered provider, so they had an understanding of the checks they were undertaking.

At the last inspection, a number of key staff had left, and new staff were being introduced to the home. At this inspection, staff reported things had improved at the home and that there was a clearer structure in how people's care was organised and planned. Staff told us they felt part of the team and that morale had improved. One staff member told us, "[Registered manager] will always come and help and she is very proactive. She doesn't hide away in her office and she has made a real difference." Staff also told us they felt comfortable speaking with the registered manager and seeking guidance when they needed.

Relatives we spoke with felt engaged with the management of the home. Two relatives we spoke with told us they had attended meetings at the home following the last inspection report. They told us they felt they had been given an opportunity to raise their concerns and these had been listened to. Relatives also reported that they felt their relationship with the management of the home had improved since the registered manager had arrived and that they hoped this would now bring stability to the home.

The registered manager was working with local stakeholders to improve people's experience of care. They told us they worked with the local authority and social workers to ensure people's needs were assessed and people received the correct support when needed. They told us they had sought help to get people's needs reviewed when they thought people may require more specialised help. The registered provider told us they were also benefitting from additional training they had accessed as this had given them confidence that people's care was based on best practice.

