

Avery Care Clevedon Limited

Poets Mews Care Home

Inspection report

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14 July 2020

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Summary of findings

Overall summary

Poets mews is a residential care home providing personal and nursing care to 35 people aged 65 and over at the time of the inspection. The service can support up to 80 people.

People's experience of using this service and what we found

People and relatives told us they were happy with the care and support they received. Comments included "They are wonderful". Another person said, "I've got nothing but praise for them all". Staff comments reflected that the home had come through some challenging times but that they now felt supported and the home was improving.

It was clear through the whole home safeguarding procedures and the provider's own investigation that there had been occasions when falls and medicines hadn't been managed in a robust way. However, it was clear from our inspection that these issues were recognised by the provider and steps were being taken to address them.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update)

The home has not yet received a comprehensive inspection and rating. The home was registered in September 2019 and we aim to carry out a comprehensive inspection within 12 months of registration. The inspection took place at the time of the Covid 19 pandemic and this was taken in to consideration when deciding how and when we should inspect.

Why we inspected

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The home is currently working with the local safeguarding team to identify and address whole home concerns. Two of these areas of concern are related to the number of falls in the service and number of medicines errors. A decision was made for us to inspect and examine those specific risks.

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 have not rated the service at this inspection as we did not look at all aspects of Safe.

Inspected but not rated

Poets Mews Care Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check specific concerns in relation to medicines and falls, which had been identified through the whole home safeguarding procedures.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Poets Mews is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided.

The service had an acting manager at the time of the inspection. A permanent manager had been recruited

Notice of inspection

We gave the home 24 hours notice of our inspection to ensure that we could carry out the inspection safely, whilst the Covid 19 pandemic was ongoing.

What we did before the inspection

Prior to the inspection we reviewed all information available to us. This included any whistleblowing and concerns we had received. We had also been involved with and attended whole home safeguarding meetings.

During the inspection-

We reviewed records relating to falls and medicines. We spoke with three people living in the home and spoke with the acting manager and deputy. We made observations about how people were being supported.

After the inspection

We received feedback from four members of staff either by phone or email. We attempted to contact others, but were unsuccessful. We spoke with three relatives by phone.

Is the service safe?

Our findings

The home was registered in September 2019 and at the time of this targeted inspection hadn't received a comprehensive inspection and rating. We have not provided a rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

We spoke with three people at the inspection and following our visit we spoke with three relatives by phone. Feedback was positive. Comments included "They are wonderful". Another person said, "I've got nothing but praise for them all". A relative told us "staff are very, very kind and some of the staff are exceptionally kind." Our observations during our visit supported these comments. We saw and heard staff speaking and interacting people in a kind and respectful way. As people were being supported to move around the home for example, staff supported them appropriately and gave kind and gentle encouragement.

Staff told us the home had come through some challenging times in recent months with changes in management in addition to the pressures associated with the Covid 19 pandemic. However, staff did not report having any concerns currently about the safety of people in the home. They told us that if they did they would feel confident and able to report them to the manager.

We looked at falls in the home as there had been concerns around the number of falls and the management of these. There had been occasions in the past, about the action the home took to get the right medical support for people following a fall; this was being reviewed under the whole home safeguarding procedures. We looked at records of five individual falls and saw that in each case, medical support had been sought promptly if required. Where urgent medical attention was not necessary, other actions were taken such as referrals to the falls team, or consideration of equipment that might help manage the risks for people. There were records to show people were monitored on an hourly basis following a fall. Staff told us they were happy with their training in relation to falls and would know how to respond and get the right help if they witnessed a person fall.

It was clear that on occasion, individual falls had not been managed in a robust way, with all necessary action being taken promptly. However, overall we were assured that the provider was aware of these shortfalls and was taking steps to address them.

We reviewed medicines in the home as this is another area that has raised concern under whole home safeguarding procedures. We checked seven people's medicine records. Medicine charts contained information about the reasons for each person's need for pain relief medicines and how they wanted to take their medicine. All medicines had been administered and recorded.

Care records showed an assessment of people's mental capacity had been completed. This was to assess how much understanding people had about taking their medicines had been discussed by the staff, their doctor and close relative.

Medicines were stored securely in locked individual cupboard in line with legal requirements. We checked

that medicines were ordered appropriately and medicines which were out of date or no longer needed were disposed of safely. The deputy manager counted and checked a sample of medicines in front of us and these were correct.

The acting manager told us and showed us how they had addressed recent concerns around time specific medicines. (These are medicines that need to be given at a certain time to make sure they are safe or work effectively.) They had put in place a new system to make sure people had these medicines at the safest and most suitable time for them. They had also put in place a system to check and records this was being completed correctly by staff who gave people these medicines.

The home was in the process of moving over to a digital system for ordering, storing and giving people medicines. The deputy manager told us these systems were already being used successfully in other services run by the provider. The aim of these systems is to increase oversight and control of medicines in a service and to improve safety.

The provider had been open and transparent about the number of errors that had occurred in the home and had identified ways of making improvements. For example, the acting manager told us they had put in place several initiatives to improve communication in the home and with other professionals connected to the service. A new communication book had been put in place for each floor of the home. This was to ensure tasks such as ordering new medicines were completed in good time. The acting manager had also reintroduced a daily 10 at 10 meeting, where heads of department discussed any important issues. We were assured during our visit that improvements were being made. This will continue to be monitored through the whole home safeguarding procedures.