

Laurel Residential Homes Limited SCOTT HOUSE

Inspection report

7 Wareham Road
South Croydon
Surrey
CR2 6LE

Date of inspection visit: 20 March 2017

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Tel: 02086869312

Ratings

Overall rating for this service

Is the service safe?

Good

Good

Summary of findings

Overall summary

We visited Scott House on 20 March 2017. The inspection was unannounced.

At our previous inspection in January 2016 we identified a breach of the Regulations in relation to the management of medicines. When we inspected in March 2017 we found the service had addressed our concerns around the management of medicines and were meeting the Regulations.

Scott House provides care and support for up to twenty one men and women living with long term mental health issues. The service has 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.

We examined records and medicines for people using the service. We found the service had made improvements in their systems for ensuring records were correct. Staff had completed refresher training and their competency to administer medicines had been verified by senior staff. The service was meeting the Regulations in relation to safely managing medicines.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe. Medicines were being managed safely.





Scott House

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 20 March 2017 and was unannounced.

The inspection was carried out by an adult social care inspector.

During the inspection we examined records for six people relating to the administration and management of medicines. We spoke with the registered manager and a member of staff with specific responsibilities for medicines.

Our findings

At our previous inspection in January 2016, we checked medicine's records and found instances where the running total of some medicines recorded did not match actual totals. For example, one person was prescribed an antipsychotic medicine in two dosages. The records showed the number of tablets in the 25mg dosage as 26 when the actual total was 30. The 100mg tablets recorded 104 tablets when the actual total was 98. We looked at a random selection of count back sheets that should have accurately showed the running total for medicines. The sheets had been regularly and correctly completed up to the middle of December 2015 at which point completion became inconsistent.

We brought the matter to the attention of the registered manager and rechecked some medicines in their presence. The manager agreed with our findings. We also found some pro re nata (as needed) medicines did not have a count back record. Although medicines administration records (MARs) appeared to have been correctly completed we could not be confident they accurately recorded what medicines had been administered because of the discrepancies in or non-existence of count back sheets.

The manager instructed a member of staff to immediately carry out a medicines audit and ensure count back sheets accurately recorded medicines from that point. The errors in records relating to prescribed medicines and pro re nata medicines were a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Our visit to the service in March 2017 was a focussed inspection to ensure continuing improvements had been made to meet the Regulations in relation to medicines management.

We carried out a detailed check on one person's medicines and records. We found the records were accurate and reflected the medicines held by the service. We then checked a random selection of records and medicines, including pro re nata medicines, of five other people and found they were in order.

We saw the service had introduced count back records for the three shifts each day compared to once a day when we inspected in January 2016. Staff were required to count the medicines remaining after they were given to people using the service. Staff had also completed refresher training and competency checks.

We found medicines were being audited weekly and monthly to ensure staff were following procedures implemented after our inspection in January 2016. We were satisfied the service had had made sufficient, continuing improvements to the management of medicines and were meeting the regulations.