

Diamond Care (2000) Limited

Carisbrooke

Inspection report

35 Welholme Road Grimsby **NE Lincolnshire DN32 0DR** Tel: 01472 354434

Date of inspection visit: 10 August 2015 Date of publication: 15/09/2015

Ratings

Overall rating for this service

Requires improvement



Is the service responsive?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 25 February 2015. At which a breach of legal requirements was found. This was because not every person who used the service had an assessment and plan of care to guide staff in how to meet their needs, wishes and preferences.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on the 10 August 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Carisbrooke' on our website at www.cqc.org.uk' Carisbrooke provides accommodation and personal care for up to 12 people with a learning disability. It is situated in a residential setting and close to local facilities. At the time of the inspection there were 11 people living in the home.

The home 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 and associated Regulations about how the service is run.

At our focused inspection on the 10 August 2015, we found the registered provider had followed their plan which they had told us would be completed by the 20 March 2015 and legal requirements had been met.

Summary of findings

We saw people had assessments of their needs and care was planned and delivered in a person-centred way. Risk assessments had been completed to provide staff with guidance in how to minimise risk without this impacting on people's independence.

We found people's health needs were met and they had access to a range of professionals in the community for advice, treatment and support. Records showed staff monitored people's health and responded quickly to any concerns.

Improvements had been made to the variety of activities within the service. An activity programme had been developed and staff were monitoring people's engagement with the range of activities provided.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service responsive?

We found that action had been taken to improve the responsiveness of the service.

Improvements had been made to ensure each person had an assessment and plan of care to guide staff in how to meet their needs, wishes and preferences.

People's care was being regularly assessed and reviewed to ensure their needs could be met. People's care records were updated if there were any changes. The quality of the care records had improved.

People had access to and were participating in more regular activities when in the service.

This meant the registered provider was now meeting legal requirements.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'responsive' at the next comprehensive inspection.

Requires improvement





Carisbrooke

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 registered provider was 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.

We undertook a focused inspection of Carisbrooke on 10 August 2015. This inspection was completed to check that improvements to meet legal requirements planned by the registered provider after our comprehensive inspection 25

February 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service responsive. This is because the service was not meeting legal requirements in relation to that question.

The inspection was undertaken by one adult social care inspector. Before our inspection we reviewed the information we held about the home, this included the registered provider's action plan, which set out the action they would take to meet legal requirements.

At the visit to the home we spoke with four people who lived there, the registered manager and two care workers. We looked at four people's care records which included assessments, care plans, risk assessments, daily records, monitoring records and activities records.



Is the service responsive?

Our findings

People told us that they were happy living at Carisbrooke and enjoyed all the activities available. Comments included, "I like playing Bingo, we played on Saturday and I won a KitKat", "We do lots, I like baking chocolate cakes and playing the new cheese game, we are going to play that later." Staff showed us this new activity which was a large blow up cheese segment with holes on the surface to throw bean bags in. Another person described the new weekly massage sessions and how they really liked having their shoulder and neck massaged.

At the last inspection on 25 February 2015, we found shortfalls in how staff assessed, reviewed and developed care plans around people's needs. This meant there was a breach in Regulation 9 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2010 which corresponds to Regulation 9 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2014. We issued a compliance action. During this inspection we found improvements had been made. Records we checked showed each person had assessments and plans of care to guide staff in how to meet their needs, wishes and preferences. Care records had been updated when people's needs changed and the overall quality of recording in the daily records of care had improved. We also found people had more opportunities to participate in activities within the service.

At this focused inspection we checked the care records of four people and sampled a range of supplementary care records such as personal care and food intake records. We found detailed and personalised care plans had been put in place to support people's needs, and when the person's needs had changed their care records had been updated. There had been a new admission to the service in recent months and this person's needs had been fully assessed and detailed personalised plans of care and risk assessments had been put in place to support their identified needs. For example, there was a detailed communication plan which directed staff on the words and gestures used and their meaning to the person. Their personal care plan detailed how they preferred to be clean and disliked having their hands sticky or crumbs on their clothing.

Each person had a 'patient passport', which provided up to date information for medical and nursing staff should they be admitted to hospital. This helped the person have a smoother transition between the service and hospital. We found 'health action plans' were reviewed by the community learning disability team. The registered manager confirmed they were currently working with people's families where possible to complete the end of life care plans.

Checks of the daily records showed the quality of the recording in terms of content and language used had improved. The registered manager confirmed they completed weekly and monthly audit checks of the care records and was pleased with the improvements the staff were making.

Most people who used the service attended regular day services where they participated in a range of recreational, therapeutic and sensory activities. We saw people had personalised support plans to help them access community facilities and to participate in activities and occupations. At this inspection we found there had been improvements around activity provision for the people who did not attend day services and at weekends. Records showed people participated in a more varied and regular in house activity programme. During the inspection we observed people occupied with writing and cutting paper, listening to music and talking with staff. The registered manager confirmed they had appointed an activity coordinator who was now responsible for organising the activity programme and monitoring people's level of enjoyment and participation with different activities.

Staff we spoke with at this inspection confirmed they had received more support and direction from the registered manager with the completion of care records. They told us the records had improved and were more detailed. Staff also considered there had been improvements with the in-house activity programme. One care worker told us, "The manager has provided a new activities board and bought a lot of new activities such as games, which everyone enjoys playing. It's making a difference."