

Catholic Care (Diocese of Leeds)

Catholic Care - Diocese of Leeds

Inspection report

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Date of inspection visit: 22 April 2015
Date of publication: 02/07/2015

Ratings

Is the service safe?

Requires improvement



Overall summary

The inspection was announced because we needed to arrange visits to the individual supported living services. It is the fourth inspection that CQC has carried out since August 2013. We found a breach in regulation at the last three inspections because people were not always protected against the risks associated with unsafe management of medicine. In August 2013 the provider was found not to be appropriately managing medicines. In March 2014 the provider had improved some of the arrangements they had in place for managing medicines but they still needed to make further improvements. We carried out an announced comprehensive inspection of this service on 11 and 20 August 2014 and found they still needed to make some further changes in the management of medicines.

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 22 April 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 'Catholic Care - Diocese of Leeds' on our website at www.cqc.org.uk

Catholic Care - Diocese of Leeds is registered to provide personal care to people in their own home and in supported living services and at the time of our inspection provided personal care in five supported living environments services.

The service has two registered managers because the supported living services are spread over a large geographical area. Each registered manager was responsible for a number of supported living services. 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.

Summary of findings

At this focused inspection on the 22 April 2015 we found that the provider had completed their plan and legal requirements had been met.

One person who used the service told us their medicines were managed safely and staff always administered these at the correct time. Staff also told us appropriate arrangement were in place for managing medicines.

We visited three supported living services and found that at each of these services people who used the service had support plans that provided guidance to ensure staff understood how to administer medicines to meet their individual needs. Everyone had a 'my medicine, my

choice, my record' document which detailed the type of medicine, reason they were prescribed, the support required during administration and any special requirements.

Weekly checks had been carried out by the staff team and monthly audits had been carried out by the registered managers and the area manager. These helped ensure people received the correct medicines. Some minor inconsistencies were identified during the inspection visit and these were soon resolved. The management team said they would incorporate these checks into their audits to ensure similar inconsistencies were highlighted.

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 safe?

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

People had support plans that identified how their medicines should be administered to meet their individual needs. People received their medicines as prescribed. Audits were completed to make sure people were given their medicines safely.

This meant that the 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 safe at the next comprehensive inspection.

Requires improvement



Catholic Care - Diocese of Leeds

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 22 April 2015 and was announced. The provider was given 48 hours' notice because the location provides a supported living service for younger adults who are often out during the day; we needed to get permission to visit the individual services and be sure that someone would be in.

We undertook a focused inspection of Catholic Care - Diocese of Leeds on 22 April 2015 to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection 13 and 20 August 2014 had been made. We inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting legal requirements in relation to that question.

One inspector carried out the inspection and visited three supported living services. During these visits we spoke with one person who used the service, three support workers, a senior support worker and both registered managers. Others who used the service and were at home when we visited were unable to tell us about their experience. We looked at nine people's support plans and their medication administration records, staff training records, medication audits and the provider's medication policy.

Is the service safe?

Our findings

At our comprehensive inspection of Catholic Care - Diocese of Leeds on 11 and 20 August 2014 we found that people were not always protected against associated with unsafe management of medicines. This was a breach of regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 22 April 2015 we found that the provider had followed the action plan they had written to meet the shortfalls in relation to the requirements described above.

We visited three supported living services and found that at each of these services people who used the service had support plans that provided guidance to ensure staff understood how to administer medicines to meet their individual needs. Everyone had a 'my medicine, my choice, my record' document which detailed the type of medicine, reason they were prescribed, the support required during administration and any special requirements. This meant arrangements were in place to assist people to take their medicines safely.

One person who used the service talked to us about their medicines. They told us why they took each of their medicines and that staff administered these at the correct time. They had specific directions for administration and said these were always followed. The person said they were very happy with the arrangements for managing their medicines safely. Staff told us appropriate arrangements were in place for managing medicines.

Staff who administered medicines told us they had completed training which had provided them with information to help them understand how to administer medicines safely, and the records we looked at confirmed this. However, one member of staff's training had expired. The registered manager explained this was an oversight

and took prompt appropriate action by arranging for the member of staff to complete medicine training. The registered manager's checked all staff training and confirmed this was a one off and no other training had expired. The provider had also introduced competency assessments where staff were observed administering medicines. This had been done with all new starters after they completed their medicine training and was being introduced with all other staff.

We looked at medication administration records (MAR) and found these were completed correctly. Where new medicines were prescribed these were promptly started. Medicines were kept safely and adequate supplies were maintained to allow continuity of treatment. Weekly checks had been carried out by the staff team and monthly audits had been carried out by the registered managers and the area manager. These helped ensure people received the correct medicines.

Although we found appropriate arrangements were in place to ensure people received medicines safely and correctly, we identified three minor shortfalls during the inspection visit, which were soon resolved. One person's MAR had directions for administration that did not match the directions on the medicines container because the person's dose of medicine had been changed by the GP. The person had received the correct dose but conflicting directions could cause confusion when staff were administering medicines. Some PRN (when required) medication had directions that were not specific so staff could give out one or two tablets. Support plans did not provide guidance to help staff understand how many tablets to administer so people may not receive their medicines consistently. One person's gel had an expiry label and the date for disposing had passed, however, we checked the manufacturer's instruction and found the gel was still in date and safe to use; the date recorded on the bottle was incorrect. The registered managers said they would incorporate these checks into their audits to ensure similar inconsistencies were identified in future.