

Clovely Care Limited

# The Croft Residential Care Home

## Inspection report

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### Ratings

Overall rating for this service

Good



Is the service safe?

Good



### Overall summary

We carried out an unannounced comprehensive inspection of this service on 20 and 24 October 2014. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of regulation relating to the management of medicines.

We undertook this focused inspection to check that they had followed their plan and to confirm that 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 Croft Residential Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We found the provider had met the assurances they had given in their action plan and were no longer in breach of the regulations. The quality of medicines administration records (MARs) had improved. We found the provider had reviewed the quality assurance processes and had implemented a more robust system of checks on medicines records. We saw from viewing records of previous checks that these had been successful in identifying concerns with medicines records. Records we viewed confirmed that gaps had been investigated and action taken to prevent the situation happening again.

# 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 safety at the service. The quality of medicines administration records had improved since our last inspection. Action had been taken to improve the effectiveness of the medicines audits the provider undertook. These had been successful in identifying issues with people's medicines records.

We have improved the rating for: is the service safe from requires improvement because the provider was pro-active in quickly making the required improvements and has shown consistent good practice since our last inspection in October 2014.

Good



# The Croft Residential Care 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.

We undertook an unannounced focused inspection of The Croft Residential Care Home on 30 March 2015. This

inspection was done to check that improvements to meet legal requirements planned by the provider had been made after our comprehensive inspection on 20 and 24 October 2014. 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 some legal requirements.

The inspection was undertaken by an adult social care inspector. During our inspection we spoke with the registered manager and deputy manager. We also looked at the medicines records for all people using the service.

# Is the service safe?

## Our findings

We reviewed the action plan the provider sent to us following our comprehensive inspection in October 2014. We found the assurances the provider had given in the action plan in order to become compliant with the regulations had been met. In particular, the provider had developed a more robust and clearer procedure for staff to follow when identifying a gap in a person's medicines administration record (MAR). The provider also told us additional checks would be implemented following advice from the administering pharmacist, including in depth management checks of medicines records and a target to measure the potential impact on people of gaps in MARs.

We found the provider had been pro-active in identifying the actions they needed to take to improve the quality of medicines records. These changes had been implemented immediately following our last inspection in October 2014.

We viewed a selection of MARs for people using the service. We found these had been completed fully and accurately. This showed that the quality of medicines records had improved since our last inspection.

We viewed examples of the various medicines audits that had been implemented following our last inspection. These included weekly and monthly management audits of medicines records. We found the audits had been successful in identifying incidences where staff had not signed MARs to confirm people had been given their medicines. We also saw the number of identified gaps was well within the level deemed acceptable to the provider. For example, for the period 27 February 2015 to 26 March 2015 records showed over 16,000 individual medicines had been administered. Records we viewed confirmed there had been 32 gaps identified. These had all been investigated and action had been taken to prevent the situation from happening again.

We found the provider kept a log of investigations undertaken and details of any subsequent action taken. For example, action taken included additional guidance and support given to individual staff. This meant the provider had access to detailed information to enable the registered manager to identify any trends and patterns, and to identify any additional improvements required to the safe management of medicines.