

The ExtraCare Charitable Trust ExtraCare Charitable Trust Imperial Court

Inspection report

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Ratings

Overall rating for this service

Is the service well-led?

Requires improvement

Good

Overall summary

During our inspection in July 2015, we found that people's care records were not always fully completed; they contained old information that was no longer relevant to people's care and were sometimes illegible, meaning they did not give an accurate reflection of the support that people received. In addition to this assessments and consent forms had not been dated or signed by people or their representatives. This was in breach of Regulation 17 of the Health and Social Care Act 2010 (Regulated Activities) Regulations 2014.

Following the inspection the provider sent us an action plan detailing the improvements they were going to make, and stating that improvements would be achieved by the end of November 2015. This report only covers our findings in relation to the outstanding breach of regulation. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'ExtraCare Charitable Trust Imperial Court' on our website at www.cqc.org.uk.

ExtraCare Charitable Trust Imperial Court is a complex of 41 sheltered apartments. People who live at the service have the option of having personal care, as well as support with housekeeping and social activities provided, by staff that work there. At the time of our inspection, 26 people were receiving support with personal care.

The inspection was announced and took place on 10 December 2015.

The service did not have a registered manager. The manager had applied to register with the Care Quality

Summary of findings

Commission and was due to have their fit person's interview following our inspection. 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.

During this inspection, we found that improvements had been made to people's risk assessments and care plans, to ensure they had been updated in accordance with any changes in their care needs. We found that steps had been taken to review care records on a regular basis so that they remained reflective of people's care and support needs. Audits had also been completed to establish further areas for improvement.

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 well-led at the next comprehensive inspection.

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 well-led?

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

We found that monitoring of people's records and quality assurance systems had improved since our last inspection but required further time to become embedded. Because of this strengthening in the quality assurance systems, we observed an improvement to the way in which records were managed, monitored and updated.

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 well-led at the next comprehensive inspection.

Requires improvement



ExtraCare Charitable Trust Imperial Court

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 10 December 2015 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure the manager would be available for us to talk to, and that records would be accessible. The inspection was undertaken by one inspector. Prior to this inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We spoke with the local authority and health and social care professionals to gain their feedback as to the care that people received.

We spoke with the manager and looked at eight people's care records to see if their records were accurate and reflected people's needs. We reviewed further records, relating to the management of the service, including care plan audits and staff meeting minutes.

Is the service well-led?

Our findings

During our inspection on 13 July 2015, we found that some of the care records we looked at contained information that was no longer relevant to people's care. Risk assessments had not always been signed and dated by the person completing the assessment. Some areas of people's care plans had been left blank, for example, people's personal biography and the record of visits by health care professionals. In some cases, we found that consent forms had not been signed by people or their relatives. We also found that some entries in the daily notes were difficult to read because the writing was not legible. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

During this inspection, we found that the shortfalls in relation to the regulatory requirements as described above had been addressed.

The manager told us that since our last inspection, they had worked hard to ensure that people's care records were updated on a more regular basis and that there was evidence of people's involvement within their care planning and risk assessment. They told us, and records confirmed that the importance of this had been reinforced in staff meetings so that there could be consistency amongst all staff. Within the records we reviewed, we could see that actions had been taken to review people's care records, strengthening them by removing unnecessary paperwork and evaluating them on a regular basis. Efforts had been made to ensure that documents were completed legibly and that people, or their representatives, had been signed and dates to show they had been involved in the process. We also found that care record audits had taken place. Where issues had been identified, plans were formulated with specific time scales in place for required action to be taken. This meant that the manager had more oversight of the areas that staff needed to work upon to ensure that staff provided effective and appropriate care.