

Mrs. Carole Susan Fryer

Charterhouse Residential Care Home

Inspection report

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Ratings

Overall rating for this service	Requires Improvement •
Is the service safe?	Requires Improvement •
Is the service effective?	Good
Is the service well-led?	Requires Improvement

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 14 and 20 May 2015. Breaches of legal requirements were found. These related to Regulation 17 how the home assessed and monitored the quality of the services people received and Regulation 18 the training provided to staff. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches. The action plan provided details of the dates training had been booked and who was to provide this training. It also provided information about how the home was going to monitor the services it provided. At this inspection we found the home had met their actions regarding staff training and had partially met their actions regarding monitoring the services provided at the home.

In January 2016 we received information that there were insufficient staff on duty to meet people's care needs and people were not being provided with enough food at the evening meal. We undertook this focused inspection to look into the concerns raised and to check the provider had taken sufficient action to meet their legal requirements.

We inspected the service against three of the five questions we ask about services: is the service safe, effective and well-led? This was because the requirements and the concerns raised related to these questions. This report only covers our findings in relation to these issues. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Charterhouse Residential Care Home on our website at www.cqc.org.uk.

Charterhouse Residential Care Homecare provides accommodation and personal care for up to 20 people. The home does not provide nursing care. This was provided by the community nursing service. At the time of the inspection there were 13 people living at the home. The home does not require a registered manager as the provider is in day to day control of the home.

This inspection was undertaken on 19 and 27 January 2016 and the first day was unannounced.

The provider and senior care staff told us how they monitored that people's care needs were being met, reviewed care files to ensure they contained up to date information about people's care needs and ensured people received their medicines as prescribed. They also undertook environmental checks to ensure the home was clean, tidy and well maintained. The provider said they met with people and their families regularly to gain their views on how well the home was supporting them. However, records relating to how the home undertook these checks were not completed and it was not possible to tell how the provider ensured the quality of the services provided was kept under review.

We found action had been taken to improve the training staff received to ensure they had the knowledge and skills to care for people well and protect their safety. Staff told us they had attended a number of training events including caring for people with dementia and how to assist people safely with their mobility needs. We saw evidence of this training in staff files as well as planned future training events.

People and staff told us there were sufficient staff on duty to keep people safe. At the time of the inspection there were 13 people living at the home. The staff explained the staffing levels varied throughout the week and at times they were unable to meet people's care needs in a timely manner. During the two afternoons we visited the home we observed staff being attentive to people and spending time with them in the lounge.

People told us they enjoyed the food provided at the home and they had enough to eat and drink. We saw the food provided for the tea time meal on both days of the visit to the home. There was sufficient food prepared for the number of people living at the home.

We have made two recommendations for the home to keep staffing levels under review and to maintain records of how the home audits and reviews of the quality of the services it provides to people.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Some aspects of the home were not always safe.

Staffing levels varied throughout the week and it was not possible to be assured staff were able to meet people's needs in a timely manner.

Requires Improvement



Is the service effective?

The home was effective

Staff had received training in topics relating to people's care needs. They were knowledgeable about how people liked to be supported.

People received enough to eat and drink to maintain their health. People's food preferences were known by staff.

Good

Is the service well-led?

Some aspects of the home were not always well-led.

The home monitored whether people's care needs were being met and ensured documents relating to people's care need were up to date.

Records relating to how the home kept the quality of the service under review were not being maintained.

Requires Improvement





Charterhouse Residential Care Home

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Charterhouse on 19 and 27 January 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider after our May 2015 inspection had been made. We also looked in to the concerns raised to us about the number of staff on duty and the amount of food available at the evening meal. We inspected the service against three of the five questions we ask about services: is the service safe, effective and well-led. This is because the service was not meeting some legal requirements.

The inspection was undertaken by one social care inspector. The provider was unavailable on the first day of the inspection as they were undertaking an assessment of someone considering moving to the home. They were available on the second day. Before our inspection we reviewed the information we held about the home, including the recent concerns raised with the Care Quality Commission and the improvements the provider told us they were going to make after the previous inspection.

During the inspection we spoke with six people who lived at the home, three members of care staff and the provider. We looked at three records relating to staff training and records relating to how the home monitored the quality of the services it provided. We also looked at the number of staff on duty and the arrangements for the evening meal on both days of the inspection.

Requires Improvement

Is the service safe?

Our findings

At the time of the previous inspection in May 2015 we found there were sufficient numbers of staff on duty to meet people's care needs and keep them safe. In January 2016 we received a concern in relation to the number of staff available on duty and whether this was sufficient to ensure people's needs were being met.

At the time of this inspection we found there were enough staff on duty, but sometimes needs were not met in a timely way. There were 13 people living at the home, three of whom staff told us required the assistance of two members of staff to meet their needs. On the first day of the inspection, there were two members of staff on duty when we arrived in the afternoon. Staff explained the provider and another senior member of staff who would normally be on duty had just left the home to undertake an assessment of someone considering moving to the home. They also said a further member of staff was due to arrive within 30minutes, which they did. On the second day of the inspection there were three care staff on duty.

Staff explained there were three care staff on duty during the mornings from Monday to Friday, and two care staff available at the weekend. They confirmed there was a cook available seven days a week which meant staff did not have to prepare the lunchtime meal. During the early afternoons there were two care staff on duty. Two days a week, Monday and Tuesday, a third member of staff came on duty to assist with the evening meal and during the early evening period. Staff explained this arrangement would be increased to other days of the week once the provider was able to recruit more staff. Overnight there was one waking and one sleeping-in member of staff who was on call.

Staff told us they were able to meet people's care needs more promptly on the days there were three care staff on duty. They said it could be particularly busy on the days there were two care staff on duty in the evenings and sometimes people did have to wait to be assisted. However, they said there was no one currently living at the home whose needs they were unable to meet and they felt everyone was receiving safe care and support.

We spoke with people about their experiences of living in the home. Some people were not able to share this with us as they were living with dementia and had short term memory loss. Those people who could tell us their experiences said they were being "very well" cared for. One person told us there were enough staff to meet their needs, and said, "It's really nice here". Another person said, "I've always loved it here". One person newly admitted to the home for a short stay told us they liked the home so much they were thinking of staying. We spent time sitting and talking with people in the lounge. Everyone was relaxed and cheerful. Staff spent time with people and were attentive to their needs. People were involved in activities such as reading a newspaper or doing word puzzles, or they were in conversation with each other or the staff.

We recommend the service considers using a tool to determine suitable staffing levels and reviews staffing levels regularly to ensure people receive care and support in a timely manner at all times.



Is the service effective?

Our findings

At the inspection in May 2015, we found staff had not received the training they required to meet people's care needs effectively. This was a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider sent us an action plan telling us the arrangements they had made to ensure staff received regular training in the issues relating to people's care needs as well as health and safety topics.

In January 2016 we received information that people may not be receiving sufficient food at the evening meal.

At this inspection we found improvements had been made in relation to staff training. Staff told us they had received training in supporting people safely with their mobility, caring for people with dementia, the Mental capacity Act 2005 and fire safety. They confirmed further training in the safe administration of medicines and caring for people at the end of their lives had been booked for February 2016. On the second day of our inspection, staff were receiving fire safety training. Records provided evidence of the training undertaken by staff as well as that booked for February 2016. Each member of staff had an individual training plan which identified the training they had undertaken and when updates were due. Staff told us they felt the training provided them with the knowledge and information they needed to care for people well.

We asked people about the food served at the home. People told us they liked the food and they were happy with the meals provided. One person said, "The food is lovely and there is always plenty of it" and another person said, "Yes, it's very good". Staff explained the main meal of the day was provided at lunchtime and the meal provided in the evening as more a snack type meal. They showed us the food they had prepared for the evening meal on both days of the inspection. On the first day there was a choice of sandwiches, pizza and cake. On the second day there was a choice of sandwiches, sausage rolls, Chinese spring rolls, cake and doughnuts. Staff told us people could also request alternatives such as toast, cheese and crackers or soup. On both days we saw there was sufficient quantity prepared for the number of people living in the home. People's food preferences were identified and staff were familiar with these. For example, one person liked to have three quarters of a sandwich rather than a whole sandwich. Another person only ate fish, and regardless of the meal prepared each day, a fish meal was always prepared for this person.

The provider confirmed people could always request more to eat, and staff were able to prepare drinks and snacks as necessary, including during the night. We saw jugs of juice and a large tin of biscuits were available in the lounge room for people to help themselves.

Requires Improvement

Is the service well-led?

Our findings

At the previous inspection in May 2015, we found the home did not have effective governance systems in place to monitor the quality of the service being provided. This was a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider sent us an action plan telling us the arrangements they had made to monitor the quality of the support provided to people.

At this inspection we found some improvements had been made. However, the records did not reflect the actions taken by the provider and their senior management team to assess and monitor the quality of the service and to ensure people were receiving a service that met their needs.

The provider and a senior member of staff told us how they reviewed people's care and welfare to ensure their needs were being met. For example, each day medicine records were reviewed to ensure people received their medicines as prescribed, including those to be given 'as require', and that records were accurate. Care plans were reviewed and updated each month with the person they related to and their family, if appropriate. This was to ensure people's care needs were clearly described and staff had the information they needed to meet people's care needs in the manner they preferred.

Records showed staff were recording information about people's well-being. This included whether people had slept well overnight. This was to keep staff informed if people were likely to be tired or perhaps more confused due to lack of sleep, as well as to monitor people's night time needs. The provider also reviewed any accidents to identify how these come had come about and to reduce the risk of reoccurrence.

The provider and the staff responsible for laundry and catering also undertook daily reviews of the environment to ensure it was clean, tidy and well maintained. We saw evidence equipment was regularly serviced to ensure it was maintained in a safe working order.

The provider was in the home each day, and met with people to discuss their needs and whether these were being met. They said they met with people and their families regularly to gain their views on how well the home was supporting them. The provider had a number of forms to complete to demonstrate these audits and reviews were being undertaken, however at the time if the inspection these had not been completed. We discussed with them their legal responsibility to assess, monitor and improve the quality and safety of the services provided and to provide evidence of this.

We recommend the home maintains records of the audits and reviews undertaken in relation to the governance of the service.