

Prime Care Homes Limited

Clitheroe

Inspection report

Eshton Terrace
Clitheroe
Lancashire
BB7 1BQ

Tel: 01200428891

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12 January 2017

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an announced inspection of Clitheroe on 5, 6 and 13 July 2016. We found one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to a failure to ensure that there were sufficient staff on duty to meet people's needs. We issued a warning notice in relation to the breach, as this was a continued breach from the previous inspection and asked the provider to achieve compliance by 10 October 2016.

We undertook this focused inspection on 12 January 2017 to check whether the provider had made the improvements necessary to meet 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 Clitheroe on our website at www.cqc.org.uk.

Clitheroe is a residential home which provides accommodation and personal care for up to 28 older people. At the time of the inspection there were 18 people living at the service. Bedrooms at the home are located over two floors and a lift is available. There is a lounge, conservatory and dining room on the ground floor and all rooms have wheelchair access. All rooms are single occupancy. There are suitably equipped toilet and bathroom facilities on each floor.

At the time of our inspection there was a registered manager in post who had been registered with the Commission since January 2016. 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 the provider had made improvements and legal requirements were being met.

People living at the home and their visitors told us that staffing levels had improved since our last inspection. They told us that staff were more visible and people did not wait long for support when they needed it.

Staff told us they were still busy. However, they told us the additional member of staff each day helped them to respond to people's needs in a timelier manner and gave them the opportunity to interact with people.

A community healthcare professional who visited the home regularly told us that staffing levels had improved.

We found that the service was still short staffed and agency staff were being used at the home. However, the managing director told us that staff recruitment at the home was on-going and we saw evidence of this. He told us of plans to improve staff retention at the home.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

People living at the home, their visitors and staff told us that staffing levels at the home had improved since our last inspection. They told us people's needs were responded to in a timely manner. A community healthcare professional who visited regularly also felt that staffing levels at the home had improved.

The service was still short staffed. However, we saw evidence that recruitment was on-going and efforts were being made to improve staff retention.

We could not improve the rating for 'safe' from requires improvement because to do so requires consistent good practice over time. We will review the rating during our next planned comprehensive inspection.

Requires Improvement ●

Clitheroe

Detailed findings

Background to this inspection

We undertook a focused inspection of Clitheroe on 12 January 2017. The inspection was carried out to check that improvements had been made following our comprehensive inspection on 5, 6 and 13 July 2016, and that legal requirements were being met. The inspection was unannounced and was undertaken by one adult social care inspector.

Prior to the inspection we reviewed information we had about Clitheroe, including previous inspection reports, concerns and complaints and safeguarding information. We contacted Lancashire County Council contracts team for feedback about the service.

During the inspection we spoke with four people who lived at the service, five relatives who were visiting and four care staff. The registered manager was not available at the time of the inspection due to illness. We observed staff providing care and support to people during the inspection and reviewed staffing rotas for the service.

Following the inspection we contacted two community healthcare professionals for feedback about the service. They did not express any concerns about staffing levels or care standards at the home.

Is the service safe?

Our findings

During our comprehensive inspection of Clitheroe on 5, 6 and 13 July 2016, we found there was a failure to ensure that there were sufficient staff on duty to meet the needs of people living at the home. During the inspection, five people living at the home and two relatives expressed concerns about staffing levels at the home. They told us that they felt poor staffing levels were compromising care. Two of the staff we spoke with also expressed concerns about staffing levels at the service.

This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

As this was a continued breach from our inspection in 9 July 2015, we issued the provider with a warning notice, advising that they were required to become compliant with Regulation 18 by 10 October 2016 or we would consider further action.

At this inspection we found that the provider had made improvements and was meeting the requirements of Regulation 18.

Following our inspection in July 2016, we met with the managing director and the registered manager to discuss the outcome of the inspection and their planned improvements. During the meeting the managing director advised that he planned to increase staffing levels at the home, so that there was an extra member of care staff on duty each day from 8am to 2am.

During this inspection we received positive comments about staffing levels at the home. People living at the home, visitors and staff all felt that the additional member of staff from 8am to 2pm had made a significant improvement. People living at the home felt that things had improved since our last inspection. They told us that staff were more visible at the home and there were more staff around when they were needed. One person told us, "Staffing levels are fine There are more staff than when you visited last time. There are usually staff around, I don't wait long if I need help". Another said, "There are always enough staff around day and night. They respond quickly, they're very good". However, one person told us there were not enough staff on duty at night and they sometimes had to press their call bell more than once.

The visitors we spoke with were happy with staffing levels at the home. One visitor told us, "Staffing has improved since July. There are more staff around and people's needs are being met more quickly". Another said, "Staffing seems fine when we visit. We were concerned previously but there always seem to be staff around now".

The staff we spoke with felt that they were still busy, even with the additional staff member. However, they told us that the additional member of staff meant they were able to respond to people's needs in a more timely way and they had more time to interact with people. One staff member told us, "Since the extra staff member's been on, it's made a big difference. Staff are less rushed and we have more time to spend with the residents".

On the date of our inspection, the additional member of staff was on duty from 8am to 2pm. We found that there were sufficient staff available to meet people's needs and people were responded to in a timely manner when they needed support.

We reviewed the staffing rota which covered the period from 23 December 2016 to 22 January 2017 and found that the rota included the additional member of staff from 8am to 2pm. We noted from the rota that during this period the manager played a significant role in the staffing of the service. As well as managing the home she was often on the rota to provide care. At the time of our inspection the registered manager had been off work for over two weeks due to illness and during the period of her illness there had not always been enough staff to ensure that the additional member of staff was available every day. We discussed this with the managing director who informed us that recruitment for additional care staff was on-going and we saw evidence of this. We noted that a new member of staff had completed their induction two days before the inspection and was due to start work at the home the following week. We also noted from the rota that agency staff were being used regularly due to the staff shortages at the home.

We noted that staff turnover was still high at the home. Four of the five care staff we spoke with had started working at the home since our inspection in July 2016 and we noted from the rota that 11 staff had left the service since our last inspection. The senior member of care staff in charge at the time of our inspection told us that newly appointed staff sometimes failed to attend induction or sometimes completed their induction but failed to start work at the home. We asked staff what they thought the possible reasons for this were. Some thoughts were that the 12 hour shifts could be an explanation or the numerous financial charges made to staff when they started work at the home, such as charges for uniform or the device staff used to turn off call bells when they had been responded to. Some of the staff we spoke with felt that the rate of staff turnover had reduced in recent weeks and this view was shared by some of the people living at the home and the visitors we spoke with.

We discussed staff recruitment and retention with the managing director. He told us that the home was aiming to recruit mature and experienced staff and exit interviews would be held where possible with staff who were leaving, and documented to establish any patterns in the reasons why staff were leaving. He advised that he would speak with staff at the home on an individual basis to ascertain staff satisfaction levels.

Following our inspection we contacted two community healthcare professionals for feedback about staffing levels at the home. One professional told us they were unable to comment as they had not visited the home for some time. The other professional told us that staffing levels had improved significantly since our last inspection. They also felt that general hygiene at the home had improved. They did not have any concerns about care standards at the home.