

St Elizabeth's Centre St Elizabeth's Health Agency

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

St Elizabeth's Health Agency is part of the St Elizabeth Centre. St Elizabeth Centre is located on a 65-acre site and comprises of a school and children's home, college, domiciliary care agency, adult residential and nursing services with accommodation and the health agency. The centre provides education, care and nursing support for people of all ages who have epilepsy and other complex needs. St Elizabeth's Health Agency provide nursing for the school and children's residential care home. At the time of the inspection they provided nursing support to 36 children.

People's experience of using this service and what we found

We found improvements needed to be made to the documentation of the medicine administration records and associated records. People's records did not always give clear instructions which could leave the staff who were administering the medicines at risk of making an error.

The registered manager had identified areas of improvement with the medicine records and systems through their auditing and action plans. They were working with outside professionals, the home and the staff to improve this.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 03 October 2018 and this is the first inspection. The last rating for the service under the previous provider was good (published 22 June 2018)

Why we inspected

The inspection was prompted in part due to concerns received about medicines management. A decision was made for us to inspect and examine those risks. The overall rating for the service has not changed following this targeted inspection and remains good.

We undertook this targeted inspection to see if people received safe care with their medicines. We use targeted inspections to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

St Elizabeth's Health Agency

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

This was a targeted inspection to see if people received safe care with their medicines. We use targeted inspections to check concerns.

Inspection team

The inspection was completed by one Inspector and a pharmacy Inspector.

Service and service type

This service provides nursing to children living at St Elizabeth's Centre residential care home, as well as nursing within the school.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We reviewed a range of records. This included three people's care records and six medication records. A variety of records relating to the management of medicines. We spoke with nine members of staff including the nominated individual, registered manager, managers and nursing staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has not been rated.

The purpose of this inspection was to check if the provider had met the requirements of a concern we had about medicines. We will assess the whole key question at the next comprehensive inspection of the service.

Using medicines safely

- St Elizabeth's Health Agency were responsible for transcribing people's medicines on the medicine administration records for children living in the residential care home. In addition, they offered nursing support to the children and offered training to staff within the home to ensure they were adequately trained and skilled to administer medicines in line with the providers medicine procedures.
- People did not always have medicine administration records that were accurate or clear which could lead to confusion. We found examples where the medicine administration records did not state the form of medicine or give clear instructions on the amount of medicine to administer in line with the prescriber's instruction. This could have led to dosing errors. On the day of the inspection the nursing staff were working through checking the accuracy of the medicine records.
- People were supported to administer medicine through a Percutaneous Endoscopic Gastrostomy (PEG). PEG is an endoscopic medical procedure in which a tube is passed into a patient's stomach through the abdominal wall, most commonly to provide a means of feeding when oral intake is not adequate. There was not enough detail in the medicine administration record to inform staff of how to administer medicines through a PEG. However, when we spoke with staff, they were knowledgeable and were able to talk through the process of administering medicines safely through a PEG. During the inspection the registered manager made steps to ensure this information was present for staff.
- The registered manager and nursing staff worked closely with the school and care home for children to ensure people received the nursing care they needed. Staff felt the nursing staff were responsive to people's needs. One staff member said, "The nurses are in here five times a day to look at medicine changes and where medicine requirements may fluctuate due to the high needs of people here. They are available when needed and if there is an emergency they are here. They give medicine training; we have a number of observations [of our practice]. Historically there was a back log of staff not trained but this has got better." Another staff member said, "The support we get is good. But at times they do not have enough staff. The nurses we have here, they are very responsive. When there is anything that needs clinical intervention, they will [provide] support."

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection of this newly registered service. This key question has not been rated. The purpose of this inspection was to check if the provider had met the requirements of a concern we had about medicines. We will assess the whole key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager had systems in place which allowed them to identify areas of improvements for medicine management. This inspection was triggered due to concerns from external professionals about the management of medicines and the systems the provider had in place. It was evident there were areas for improvement, however these had been identified by the registered manager who was working towards completing these improvements.
- The registered manager and nursing staff worked collaboratively with the managers within the children's services to ensure where areas needed to improve these were highlighted and steps taken to address this. For example, the nursing staff would complete medicine audits and where actions needed to be taken, they would work with the management team and staff to complete these.