

Abbey Lawns Ltd

Abbey Lawns Care Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

The inspection took place on 6 January 2016 and was unannounced.

This inspection was to follow up on concerns which we had received. We focused on the Safe domain as there were concerns raised with us regarding the misuse of prescribed medicines including controlled drug medications. We also followed up on concerns regarding finances belonging to the people residing at the care home and staffing levels. Safe practices including staff recruitment were looked into to establish if the staff employed were police checked due to the concerns raised.

Following an inspection on 10 and 11 September 2015 when the service were found to be in Breach of Regulations 11,15,16,17,18 and 19 and rated requires improvements, the service sent us an action plan. We observed the rating from this inspection was not displayed in the care home and this was brought to the attention of the registered manager. We will follow up the concerns from this visit at our next comprehensive inspection.

Abbey Lawns is a care home that provides accommodation and nursing care and treatment for up to 61 adults. Accommodation is provided over three floors and the home is accessible to people who are physically disabled. There was a registered manager in post at the time of our inspection. There were 61 residents living at the home at the time of our inspection across the two units called Goodison and Anfield.

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.

We found the service users we spoke with felt safe at the home.

Staff told us about safeguarding and were able to describe what they would do if they became aware of abuse or a safeguarding concern. We found the service's recruitment procedures including obtaining references and DBS (Disclosure and Barring Service is a service to check if staff have any previous convictions) checking systems were not robust.

Care plans contained person centred information and risk assessments but they were not always being reviewed. Therefore, it was not clear whether the information was current or accurate.

Medicines were being stored and administered appropriately.

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 not always safe.

People who lived there told us they felt safe.

Staff recruitment processes were not always thorough.

Risk assessments were not always in place to keep people safe when they should have been.

Requires Improvement 

Abbey Lawns 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.'

The inspection took place on 6 January 2016 and was unannounced. The inspection was conducted by one adult social care inspector.

This inspection was to follow up on concerns which we had received.

We spoke to people living at the care home and staff who worked there. We also checked the process in place for administering controlled drugs and observed practices within the care home. We checked the system for managing the administration of people's finances and spoke with the deputy manager and registered manager.

In view of the concerns the focused inspection covered one domain which was 'Safe'. We viewed care records belonging to two people, we looked at documentation in place regarding safeguarding, four staff recruitment files, records for recording of administration of medications and we looked into systems of recording information including financial logs of people's finances.

Is the service safe?

Our findings

People who lived at the care home told us they felt safe there. One person said 'It's a great place, I feel safe, no complaints at all'.

The deputy manager was at the care home when we arrived and the Registered Manager arrived later with the owner. The deputy manager provided a tour of the care home. There were no unpleasant odours upon walking throughout the two units Goodison and Anfield or within other areas of the care home such as the lounge and reception.

We spoke to staff and they were able to talk to us about the different types of abuse and explained what they would do to report a safeguarding. Staff told us they had confidence in the registered manager to deal with a safeguarding. Staff were also aware of whistleblowing and what they would do to report concerns they had. One nurse told us they had received safeguarding training and would report any concerns to management. A carer we spoke with described different types of abuse and how they would report abuse. We viewed an incidents log book and found incidents were being recorded. However, we had not received a statutory notification in respect of an incident that occurred despite the police being contacted by the care home who subsequently visited the home. It is a legal requirement to inform the commission of such incidents.

Care plans we viewed were person centred and contained information regarding risks. One care plan we viewed had a risk assessment to mitigate the risks of one person smoking. However, it hadn't been updated since July 2013. The risk assessment didn't specify when the risk assessment needed to be reviewed by. We were informed one person liked to leave the care home and meet friends nearby. There wasn't a risk assessment regarding going outside despite there being risks involved such as of altercations which we were told had occurred in the past. This was highlighted to the deputy manager at the time of our inspection. Another care file we viewed had a bed rails risk assessment with a signed consent form by the person.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

From the staff files we viewed we found staff did not always have a reference from their previous employer and one staff member had a Disclosure and Barring Service checks (DBS) going back to 2004 and another staff member's was dated 2012. The purpose of the DBS checks were to ensure staff are checked for any previous convictions prior to working with people. We consider it good practice for a DBS to be renewed at intervals. This was pointed out to the manager who informed us they were in the process of reviewing their policy to state that all staff would require a DBS renewal every three years. The manager told us they would apply for renewal DBS's for all staff who have a DBS which was requested more than three years ago.

We asked the registered manager how they assess their staffing levels according to the needs of the residents. The registered manager informed us they did not use a dependency tool or matrix system and they estimate staffing levels according to the needs of the people living there such as whether they require

assistance of one or two staff members to have a bath or a shower. We were told by the registered manager they use a bathing rota which we viewed at the care home. Staffing levels were one qualified nurse on each unit and 2 to 3 carers on each unit depending on the needs of the residents. People we spoke to told us they felt able to speak to staff when they needed to. Both the deputy manager and registered manager told us they were employed to work full time at the care home. The staff told us the registered manager undertook shopping for the residents as and when they needed anything but in their absence the deputy manager was on site to deal with any matters arising.

As part of the inspection we asked to observe the systems in place for storing and recording when prescribed controlled drug medications were being administered. We observed the controlled drug medications were locked in a locked cupboard within a locked room. A qualified nurse was witnessed by the deputy manager administering the prescribed medication to the person. The nurse was responsible for ensuring the cupboard was unlocked and locked and there was a running total calculated in the prescribed medication book.

We spoke to the staff member responsible for ensuring people's monies and cash cards were safe to protect people from financial abuse. We were informed the cash cards were locked away securely and people would be handed the cash card when they requested it. A running total was being calculated and bank statements checked. We were told people were being accompanied to the bank when needed.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance
Treatment of disease, disorder or injury	Appropriate risk assessments were not always in place for people, therefore placing people at unnecessary risk of harm.