

## United Response

# United Response - 47 Doublelegates Green

### Inspection report

47 Doublelegates Green, Ripon,  
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## Ratings

### Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Is the service effective?

Requires improvement



Is the service well-led?

Requires improvement



## Overall summary

We carried out an announced comprehensive inspection of this service on 5 February 2015. We found a number of breaches of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. These were in relation to: Regulation 12 (Safe care and treatment) due to inaccurate medicine records;

Regulation 15 (Premises and equipment) due to failure to maintain appropriate standards of cleanliness and adequate maintenance of the environment.

Regulation 11 (Need for consent) because the provider did not always act in accordance with legislation to gain the consent of service users in relation to their care and treatment.

Regulation 17 (Good governance) because people were not protected by the systems in place that assess and monitor risks relating to health and safety.

After the comprehensive inspection, the provider wrote to us with an action plan to say what they would do to meet legal requirements in relation to the breaches.

We undertook this focused inspection on 14 July 2015, to check that the provider had followed their plan and to confirm that they now met with the legal requirements. Because it is a small service we contacted the registered manager the day before the inspection to check that people would be in. This report only covers our findings

# Summary of findings

in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for United Response – 47 Doublegates Green on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

United Response – 47 Doublegates Green is a care home registered for up to 5 people with a learning disability. It is a large purpose built bungalow situated approximately one and a half miles from the centre of Ripon. The bungalow has five large, single bedrooms and two spacious bathrooms. The building has been designed to support people with complex needs and mobility difficulties. There is an enclosed, wheelchair accessible garden outside to the rear and parking to the front. At the time of our inspection there were 5 people living there.

The home employs a registered manager who has worked at the home for seven years. 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.

Areas within the home's environment had improved. We saw hallway areas had been re-decorated and work was on-going as decorators were present during our visit to the service. Where kitchen cupboards were broken these had now been repaired.

The systems for staff to follow to minimise the risk of infection had improved. All of the bathrooms were clean and we saw that staff had cleaning schedules in place to follow. This ensured that all areas within the home were regularly cleaned and maintained well.

The medication procedure regarding the booking in of medicines had been reviewed and updated. The procedure now informs staff to check all medicines when booking them in to ensure that all prescribed medicines were correctly dispensed by the pharmacist. These risks were now reviewed by the registered manager through the checks that took place to monitor the quality of the service.

The registered manager and staff were aware of the requirements of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). DoLS are safeguards put in place to protect people where their freedom of movement is restricted. All of the people at 47 Doublegates Green had a DoLS authorisation due to their restricted mobility. Improvements had been made to a number of decisions being made about restrictive practices used for some people with regard to the MCA. Best interests meetings had been arranged with the appropriate people such as relatives, or professionals involved in people's care, to ensure any decisions made were in the persons best interest.

Improvements had been made to the management systems in place at the home in making sure the service was operating safely and effectively. The processes for monitoring and reviewing improvement now provided clear instruction for staff.

# 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 safe?

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

Improvements had been made to ensure people were fully protected by risks relating to the environment.

Improvements had been made to ensure people were fully protected by risks relating to infection control.

Improvements had been made to ensure people were fully protected by risks relating to administration of medicine.

**Requires improvement**



### Is the service effective?

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

Improvements had been made at the home to ensure people's consent to care and treatment was always gained in line with relevant legislation.

**Requires improvement**



### Is the service well-led?

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

The management systems in place for making sure the service was operating safely had been reviewed by the home to ensure they were effective. The processes for monitoring and reviewing improvement and any action needed to be taken were clear, concise and were being followed.

**Requires improvement**



# United Response - 47 Doublelegates Green

## 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 was 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.

We undertook an unannounced focused inspection of United Response – 47 Doublelegates Green on 14 July 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on the 5 February 2015 had been made. The team inspected the service against one of the five questions we ask about services: Is the service safe: Is the service effective: Is the service well-led. This is because the service was not meeting some legal requirements.'

Because it is a small service we contacted the registered manager the day before the inspection to check that people would be in. The inspection was carried out by one inspector.

This visit was a focused inspection to review the safe, effective and well-led domains only. At the last inspection on 5 February 2015 we found breaches in the Regulations we inspected. The provider had failed to protect people

against risks associated with medicines. The provider had failed to protect people against risks associated with not maintaining appropriate standards of cleanliness within the home. The provider had failed to protect people against risks associated with the adequate maintenance of the environment. The provider had failed to act in accordance with legislation to gain the consent of service users in relation to their care and treatment. The provider had failed to protect people by the lack of good systems being in place to assess and monitor risks relating to health and safety. We asked the provider to make improvements in those areas following our inspection of the service.

During this most recent visit to the service we reviewed people's medicines to make sure they were being managed well and administered correctly. We also inspected the environment which included bathrooms, toilets and the kitchen to make sure the home was clean, free from any odours and was being adequately maintained. We reviewed one person's care to ensure any decisions made were in the persons best interest and that all relevant parties had been involved with the decision making process. We were unable to speak with people living at the home as they were unable to communicate with us verbally because of their complex needs which meant they were not able to tell us their experiences. Instead we spent time in the dining room, observing three people who were in at the time of our visit.

# Is the service safe?

## Our findings

During our unannounced comprehensive inspection of this service on 5 February 2015. We found a breach of Regulation 13 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Management of medicines. This corresponds to a breach of the new regulations. Regulation 12 (Safe care and treatment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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

There was a breach of Regulation 13. Inaccurate medicine records meant that service users were not protected against the risks associated with the management of medicines. Some people required medicine to manage epileptic seizures. At the last inspection we found one person's medicine administration record (MAR) for February 2015 was incorrect and medicines no longer in use had been recorded in error. At the time when we queried this with the manager they confirmed that this must have been a pharmacy error, but it had not been picked up by staff when the medicines had been received. At this inspection we checked the medicines for all five people living at the service. We found that quality auditing systems in respect of medicines had improved. Staff now completed a medication check list as part of each handover to the next shift. Regular audits undertaken by the registered manager now identified any errors. These audits also recorded any action that needed to be taken. Records showed that medicines were audited weekly. This meant that systems were now in place to help minimise the risks of errors occurring. We saw that medicines were stored securely and appropriately and staff had recorded correctly leaving a clear audit trail. This meant that the systems in place protected people from the unsafe management of medicines. We found this breach of regulation was met as the management systems for medicines at the service had improved.

During our unannounced comprehensive inspection of this service on 5 February 2015. We found a breach of Regulation 12 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Cleanliness and

infection control. This corresponds to a breach of the new regulations. Regulation 15 (Premises and equipment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

There was a breach of Regulation 12(2)(a). Infection control systems did not protect service users and others from the risks of cross infection. At the last inspection in February 2015 we found that some areas of the toilets and bathrooms had not been properly cleaned and presented a risk of cross infection. Three toilet seats were found to be dirty, one of which was also broken and loose. The cistern for one toilet had a piece broken off. In one bathroom a cord hanging down by the bath was dirty. We toured the premises during this visit and found all the bathrooms and toilets to be clean. All toilet seats had been replaced and one new toilet had been installed in one of the bathrooms. We saw from cleaning schedules we looked at that areas such as bathrooms were being regularly cleaned. The schedules completed by staff showed which staff had completed the task and when. This meant there were effective systems in place to assess and minimise the risk of and prevent cross infection. We found this breach of regulation was met as all communal areas were clean, free from any odours and replacement to equipment where necessary had been made.

During our unannounced comprehensive inspection of this service on 5 February 2015. We found a breach of Regulation 15 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Safety and suitability of premises. This corresponds to a breach of the new regulations. Regulation 15 (Premises and equipment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

There was a breach of Regulation 15(1)(c). Service users and others were not protected from the risks of unsafe premises because of inadequate maintenance. We found at the last inspection in February 2015 that there were unsafe cupboard doors in the kitchen. When we opened one cupboard it swung down on one hinge nearly causing an injury. There was no sign to say that the cupboard was unsafe. Staff showed us another door which was broken and explained that although there was a system for reporting repairs, the kitchen cupboards were frequently broken. We inspected the kitchen and found all of the kitchen cupboards had been repaired. We were informed by the registered manager that the organisation had plans

## Is the service safe?

in place to install a new kitchen in the next six weeks. This meant that the kitchen no longer presented a risk to people and staff at the service. We found this breach of regulation was met as repairs to equipment such as kitchen cupboards at the service had been repaired.

Throughout the inspection we observed that people were given choices when we sat with them in the dining room. Other people who lived at the home were out at

community based services. We saw two care staff plus the registered manager were on duty in the home at the time of our visit. We observed them being kind, helpful and they treated people with respect. We saw from people's care plans that they were supported to live as independently as possible. Care plans reflected the needs of each person, had been regularly reviewed to enable appropriate care and support to be given and kept people safe.

# Is the service effective?

## Our findings

During our unannounced comprehensive inspection of this service on 5 February 2015. We found a breach of Regulation 18 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Consent to care. This corresponds to a breach of the new regulations. Regulation 11 (Need for consent) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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

There was a breach of Regulation 18. The registered person did not always act in accordance with legislation to gain the consent of service users in relation to their care and treatment. During our last inspection in February 2015 we found that one person had a 'baby monitor' in their room due to the risks of them having an epileptic seizure. We noted that the monitor was on at all times and was heard from the lounge area. The manager told us that this had

been requested by relatives and agreed by a GP. However, no mental capacity assessment had been completed regarding to the person's ability to consent to the monitor. A 'best interest' meeting had not been held.

A best interest meeting is held when a person does not have the mental capacity to make a particular decision for themselves. It is a meeting of those who know the person well, such as relatives, or professionals involved in their care. A decision is then made based on what is felt to be in the best interest of the person.

We discussed this issue with the registered manager during our visit. We were told that a 'best interest' meeting had not yet been arranged although this was in process. Since our visit we have had written confirmation from the registered manager that a 'best interest' meeting had been held with all relevant parties to agree a decision in the best interest of the person. This meant that proper legal requirements had now been followed. We found this breach of regulation was met as the provider acted in accordance with legislation to gain the consent of service users in relation to their care and treatment.

# Is the service well-led?

## Our findings

During our unannounced comprehensive inspection of this service on 5 February 2015. We found a breach of Regulation 10 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Assessing and monitoring the quality of service provision. This corresponds to a breach of the new regulations. Regulation 17 (Good governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

There was a breach of Regulation 10(1)(b). Service users were not protected by the systems in place to assess and monitor risks relating to health and safety. At the last inspection in February 2015 we identified a number of areas of practice that potentially placed people at risk. Those included errors in the medication system and

environmental risks. Although the manager carried out a number of checks intended to monitor the quality of the service and identify risks and areas for improvement, these had not identified the potential risks found during the inspection. There was a failure in quality monitoring systems to identify these concerns and take appropriate action.

During this inspection we looked at the systems that had been introduced by the registered manager to monitor the quality of the service. We found that the quality monitoring systems had improved. We saw that checks were being regularly carried out regarding the monitoring of medicines, the environment and infection control. Records showed any risks identified also included what action had been taken by the registered manager. This meant that quality monitoring systems in place, identified risks and any failings were identified, with action plans being put place to ensure any issues were addressed. We found this breach of regulation was met as effective quality monitoring systems were now in place and appropriate action had been taken.