

# Shire Care (Nursing & Residential Homes) Limited The Meadows Care Home

#### **Inspection report**

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Date of inspection visit: 11 August 2015 Date of publication: 15/09/2015

#### Ratings

### Overall rating for this service

Is the service responsive?

#### **Overall summary**

We carried out an unannounced comprehensive inspection of this service on 23 & 24 October 2014. At which a breach of legal requirements was found. This was because the recording in the care files was inconsistent; people's care needs had not always been fully planned and care plans and risk assessments had not always been updated when people's needs had changed. This meant there was a risk people who used the service did not receive all the support they needed and in the way they preferred.

After the comprehensive inspection, the registered provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on the 11 August 2015 to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'The Meadows Care Home' on our website at www.cqc.org.uk'

Good

Good

The Meadows Care Home provides accommodation for up to 36 people who require support with their personal care. The home mainly provides support for older people and people living with dementia. There were 35 people living at the home at the time of our inspection. Local facilities and amenities are within walking distance. The majority of accommodation is on the ground floor, there are six bedrooms on the first floor, and some rooms have en-suite facilities.

The home's registered manager has worked in this role since October 2013. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are

# Summary of findings

'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

At our focused inspection on the 11 August 2015, we found that the registered provider had followed their plan which they had told us would be completed by the 30 April 2015 and legal requirements had been met.

Care plans were more detailed and personalised. They had been regularly reviewed and updated to reflect individuals current care needs. We found risk assessments were completed, reviewed and updated when people's needs changed. This enabled staff to monitor risk and provided them with accurate and up to date information in order to protect people and support their health, wellbeing and safety. Additional records to monitor food and fluid intake, repositioning support and personal care were now well completed and up to date.

We found people's health needs were met. We found care was planned and delivered in a person-centred way. We observed staff interacted well with people; knew their likes and dislikes and demonstrated a caring and attentive approach.

## 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 responsive?

We found that action had been taken to improve the responsiveness of the service.

Improvements had been made in the way people's needs were assessed and care was planned. This meant the care was more person-centred and staff had clear information about the support people required.

Good

People's care was being regularly assessed and reviewed to ensure their needs could be met. People's care records were updated if there were any changes.

This meant the registered provider was now meeting legal requirements.

We have revised the rating for this key question as we found evidence of sustained improvements since the comprehensive inspection.



# The Meadows 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 registered 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 a focused inspection of The Meadows Care Home on 11 August 2015. This inspection was completed to check that improvements to meet legal requirements planned by the registered provider after our comprehensive inspection 23 & 24 October 2014 had been made. We inspected the service against one of the five questions we ask about services: is the service responsive. This is because the service was not meeting legal requirements in relation to that question.

The inspection was undertaken by one adult social care inspector. Before our inspection we reviewed the information we held about the home, this included the registered provider's action plan, which set out the action they would take to meet legal requirements.

At the visit to the service we spoke with four people who lived there, two visitors, the registered manager, two care workers and one senior care worker. We looked at four people's care records, staff allocation records, care monitoring records, weekly and monthly audits of care records.

### Is the service responsive?

### Our findings

People who used the service told us staff were responsive to their individual needs. They told us they were happy with their care and enjoyed the activities. One person said, "I like it here, they look after us very well indeed." A relative we spoke with told us staff involved them and their family member in assessing and planning care. They also said they were invited to review meetings where they had the opportunity to discuss their family members care support and any concerns.

At the last inspection on 23 and 24 October 2014, we found shortfalls in how staff assessed and reviewed people's needs and updated and developed care plans to meet them. This meant there was a breach in Regulation 20 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2010 which corresponds to Regulation 9 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2014. We issued a compliance action. During this inspection we found improvements had been made. Records showed full assessments of people's needs had been undertaken, which included all areas of risk. The assessments were kept under review and updated when people's needs changed. Care plans contained sufficient detail about how people should be supported to maintain their safety and meet their needs.

Staff we spoke with told us there had been a lot of improvements with the quality of the care records in recent months. One member of staff said, "It is better organised now, each member of staff knows what to record and where. The records are linked and we know what needs changing and updating when someone's needs change. The care plans are much better and give clearer directions for the staff."

At this focused inspection we saw staff developed care plans from the information gathered at assessments and talking to people who used the service, their relatives and other health and social care professionals. The care plans contained information that was individualised to each person and gave staff guidance on how to meet people's specific needs. For example, one person's care plan described how staff supported them to stop drinking an hour before their meals so they didn't feel full at meal times. Evaluation records showed how the person's weight was increasing. The care files we checked provided detailed information for staff about people's likes and dislikes and preferences for care.

We found the care plans and risk assessment records were now clearly linked. Where risk assessments identified a moderate or high risk, we found care plans in place to direct staff on the care the person required to minimise this risk. Records showed how people's changing needs in respect of the risk of falls, pressure damage, weight loss, mobility were regularly monitored and reviewed. One person's records showed following a fall their needs had changed significantly and all relevant care plans and assessments had been reviewed and updated to direct staff on the care the person now required. Another person's file showed their weight had increased and stabilised so this was now monitored less frequently.

Some people in the home demonstrated behaviours which challenged the service. The registered manager showed us a new behaviour management care plan format for recording in more detail the person's behaviour triggers and support required to manage these. The registered manager confirmed they would be implementing this after they had provided relevant training and support for staff.

We found clear and organised systems in place to record people's daily care and supplementary records for food and fluid intake, personal care support, activities and re-positioning support. We found the records were complete and up to date. The registered manager showed us the new audit systems in place to monitor on a weekly and monthly basis all the care plan records. This included; care plans, risk assessments, weights charts, evaluation records, referrals and consultations with any health or social care professionals, staff handover records and all the daily and supplementary records. We found the quality and content of the care records had clearly improved with the more robust monitoring systems in place.