

## Harpers Villas Care Centre Ltd

# Harpers Villas Care Centre

### **Inspection report**

1-3 Bilston Lane Willenhall West Midlands WV13 2QF

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

## Summary of findings

### Overall summary

#### About the service

Harpers Villa Care Centre is a residential care home providing personal care and accommodation to people aged 65 and over who may also be living with dementia. The care home is registered to provide support to 26 people in one adapted building. At the time of the inspection six people lived at the home.

Following the last inspection, we had been advised by the provider of their intention to decommission the service and a planned closure was in place.

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

People were being supported to move to other homes due to the planned closure of the service. We completed this targeted inspection due to the registered manager leaving and an increase in safeguarding incidents in relation to the management of medicines.

We found further improvements were required with the management of medicines to ensure people consistently received their medicine's when they needed them. In response to our findings the management team implemented daily checks to ensure people received their medicines as required.

We saw enough improvements had been made to meet the previous breaches in relation to the management of risk, staffing and the management of safeguarding processes.

People told us they felt safe, and relatives had no concerns about their loved one's safety. Staff knew how to escalate concerns and were aware of potential risks to people's safety and wellbeing. The management team were aware of their responsibilities to report safeguarding incidents.

People were supported by sufficient numbers of staff to ensure their needs were met. Staff were following current government guidance and wearing the appropriate personal protective equipment.

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

#### Rating at last inspection and update

The last rating for this service was Inadequate (published 18 February 2020) and there were multiple breaches of regulation. In response to this we imposed positive conditions onto the providers registration. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found some improvements had been made in some of the areas we reviewed. However, we found further improvements were required with the management of medicines and the provider was still in breach of regulation.

#### Why we inspected

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in response to concerns received about medicines practices, staffing and safeguarding concerns. A decision was made for us to inspect and examine those risks.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific 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.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

We have found evidence that the provider needs to make continued improvements. Please see the Safe section of this report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Harper Villa Care Centre on our website at www.cqc.org.uk.

#### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service until it closes.

We have identified a continued breach in relation to the management of people's medicines at this inspection. We have decided to not take any additional enforcement action. The positive conditions imposed on the providers registration following our last inspection will remain in place.

#### Follow up

We will continue to monitor information we receive about the service until it closes.

### The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Inspected but not rated
Inspected but not rated.	



# Harpers Villas Care Centre

**Detailed findings** 

### Background to this inspection

#### The inspection

This was a targeted inspection to check specific concerns we had received since the registered manager had left the service and in relation to the management of medicines, staffing and safeguarding. We will assess all of the key question at the next comprehensive inspection of the service.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was undertaken by two inspectors.

#### Service and service type

Harpers Villas Care Centre is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have a manager registered with the Care Quality Commission. A registered manager 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.

#### Notice of inspection

This inspection was unannounced. We completed a site visit on the 12 October 2020 and telephone calls were undertaken on the 16 October 2020 to relatives.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used all of this information to plan

our inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with two members of staff, the deputy manager, manager and the office manager.

We reviewed a range of records. This included four people's care records and three people's medication records. We looked at one staff file in relation to recruitment. We reviewed a variety of records relating to the management of the service.

#### After the inspection

We continued to seek clarification from the manager to validate evidence found. We looked at training data and quality assurance records.

#### Inspected but not rated

### Is the service safe?

### Our findings

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

At the last inspection this key question was rated as Inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about the management of medicines, staffing and safeguarding. We will assess all of the key question at the next comprehensive inspection of the service.

Using medicines safely.

At our last inspection the provider had failed to ensure medicines management systems were safe. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had not been made at this inspection and the provider was still in breach of regulation 12.

- Although some improvements had been made, we found shortfalls with the management of some people's medicines.
- The medicine record for one person had been signed to state they had been administered their medicines. However, when we checked there was two tablets left in the medicine pack. This meant the person did not have their medicines when they needed them.
- We checked the stock balance of medicines for three people. We found for some medicines these were not accurate with what medicines had been administered and signed for. This meant we could not be assured people had received the medicines when they needed them.
- There were gaps on the medicines records which had not been explained.
- Although a new system for the monitoring of food supplements had been implemented in August 2020, staff had stopped using this on 12 September 2020. This had not been identified until the day of our inspection visit. We found the balances of food supplements to be inaccurate with what had been administered. This meant we could not be assured people had received their food supplements when they needed them to support their food intake.
- We saw weekly and monthly audits were being undertaken on a sample of people's medicines. The most recent audit had been completed on a different sample of people to the ones we checked on our inspection. However, this audit did not include a review of the supplements folder.

We found no evidence that people had been harmed however, further improvements were required, to maintain oversight of the management of medicines. This was a continued breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The management team responded immediately during and after the inspection. They advised us a weekly

audit was due be undertaken and they completed a full audit on the medicines and supplements for all six people. The management advised us a full audit would be completed daily to ensure people received their medicines as prescribed and balances of medicines were accurate until the closure of the home.

Assessing risk, safety monitoring and management

At our last inspection we were not assured that all reasonable steps had been taken to reduce risks associated with people's care which placed people at risk of harm. This constituted a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Safe care and treatment

At this inspection for the people currently living in the home enough improvement had been made and the provider was no longer in breach of regulation 12 in relation to reducing risks associated with peoples care.

- Improvements had been made to ensure people at risk of sore skin had their skin monitored to ensure there was no deterioration. Care records reflected the action staff should take to monitor people's skin condition and the action they should take if there were any concerns.
- Where people displayed distressed behaviours care plans had been updated to reflect this and the distraction techniques staff should use in these circumstances to support the person.
- Where people were at risk of falling or had fallen action had been taken to reduce this. For example, referrals had been made to healthcare professionals and sensor aids implemented. Risk assessments were in place and provided guidance for staff to follow.
- Where people were at risk of dehydration and malnutrition risk assessments and, food and fluids charts were in place to monitor their intake. People's weight was also monitored weekly. We saw action was being taken in response to a person's weight loss and they had been referred to a healthcare professional.
- Staff we spoke with were familiar with the risks to people's safety such as people at risk of falling and choking. One staff member said, "There are risk assessments in people's files for us to refer to and we discuss people's needs in handover. We (staff) are monitoring the people we know are at risk of falls or when eating a meal and we raise any further concerns with the management team."
- Relatives we spoke with told us staff knew about any risks associated with providing people's support. A relative said, "The staff know [person] has fragile skin and they are monitoring this and let me know if anything changes".

#### Staffing and recruitment

At our last inspection the provider had failed to ensure adequate staffing levels were in place to meet people's needs. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- The service was in the process of closing and people were being supported to move to their new homes. Therefore, the number of people living in the home had reduced.
- At the time of our inspection six people were living in the home and were being supported by three staff.
- People and relatives, we spoke with advised staffing levels were fine. A person told us, "There isn't many of us left so yes there is enough staff. They always come when I need them and when I use my call bell."

- Staff we spoke with told us there was enough staff on duty now. A staff member said, "Yes the staffing levels are fine now as there isn't many people left here."
- A staffing contingency plan was in place to ensure sufficient staffing levels were maintained until the home closed.
- Records confirmed the required recruitment checks had been completed before staff commenced working in the service.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider had failed to ensure systems to identify and protect people from the risk of abuse were effective.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 13.

- The management team has raised safeguarding referrals in relation to medicine shortfalls they had identified following their internal audits. Some of these were currently being investigated and action being taken. In response to our findings when we checked the medicines a new safeguarding referral was made during our inspection visit.
- People told us they felt safe. One person said, "I feel safe here never felt anything but. The staff are caring, respectful and gentle, and they know me well."
- Relatives told us they had no concerns to share about their loved one's safety. A relative said, "I feel that [person] is safe and that the staff keep [person] safe.
- Staff were clear about their responsibilities to safeguard people and confirmed they had received training in this area. One staff member said, "I would report any concerns to the management team or go to external agencies if I needed to."

Preventing and controlling infection

We looked at the infection prevention and control measures in the home. These were our findings.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.