

# Prime Life Limited Glengarriff House Nursing Home

## **Inspection report**

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Ratings

## Overall rating for this service

Requires Improvement 🔴

Is the service well-led?

**Requires Improvement** 

07 December 2016

Date of inspection visit:

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## Summary of findings

### **Overall summary**

This was an announced inspection carried out on 7 December 2016.

Glengarriff House Nursing Home can provide accommodation, nursing and personal care for 18 people who have a learning disability or who have special mental health needs. The accommodation comprises the main house and six self-contained flats. There were 15 people living in the service at the time of our inspection. All of the people had a learning disability and some also had special communication needs and used sign assisted language to express themselves.

The service was owned and operated by a company who was the registered provider. There was a registered manager. 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. In this report when we speak about both the company and the registered manager we refer to them as being, 'the registered persons'.

We carried out an unannounced comprehensive inspection of this service on 23 February 2016 and found that there was one breach of legal requirements. This was because quality checks had not been robust and this had led to a number of shortfalls not being identified and quickly addressed. These included there not being enough staff on duty, problems with catering arrangements and defects in the accommodation.

After our inspection on 23 February 2016 the registered persons prepared an action plan. It said what improvements they intended to make in order to meet the legal requirements in relation to the breaches. They said that all of the problems we noted would be addressed so that people consistently received safe care. The registered persons said that all of the necessary improvements would be completed by 15 May 2016.

This report only covers our findings in relation to the action taken by the registered persons to meet the breach of legal requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Prime Life Limited on our website at www.cqc.org.uk

At this inspection, we found that the registered persons had introduced most of the improvements that were necessary to ensure that people safely and reliably benefited from receiving safe care. This meant that the relevant legal requirement had been met. However, a small number of further improvements still needed to be made to ensure that the service continued to reliably care for people in the right way.

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

We always ask the following five questions of services.

#### Is the service well-led?

The registered persons had introduced a number of the quality checks that were necessary to ensure that people reliably received the care they needed. However, further improvements in the completion of quality checks were needed. This was to ensure that some remaining oversights in the running of the service were effectively addressed.

We have not revised the rating for this key question, to improve the rating to 'Good'. This is because we need to be sure that the registered persons will fully establish and will maintain the robust quality checks that are needed to underpin the operation of the service.

We will review our rating for 'well led' at the next comprehensive inspection.

**Requires Improvement** 



# Glengarriff House Nursing Home

**Detailed findings** 

# Background to this inspection

We undertook a focused inspection of Glengarriff House Nursing Home on 7 December 2016. This was done to follow up on one breach of legal requirements that we had identified at our comprehensive inspection on 23 February 2016. The present inspection was completed to check that the registered persons had made the improvements necessary to ensure that people who used the service reliably benefited from receiving safe care.

We inspected the service against one of the five questions we ask about services: is the service well-led? This was because at our last inspection the registered persons were not meeting a legal requirement in relation to this section.

Our inspection was announced and the inspection team consisted of a single inspector. The registered manager was given a short period of notice. This was because the people who lived in the service had complex needs for support and benefited from knowing that we would be calling to their home. During the inspection visit we spoke with four people who lived in the service. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who are not able to speak with us.

In addition, we spoke with two support workers, a nurse and the registered manager. We also observed care that was provided in communal areas and were present when lunch was served. In addition, we examined records of the quality checks completed by the registered persons and checked to see that defects in the accommodation had been addressed.

## Is the service well-led?

# Our findings

At our inspection on 23 February 2016 we found that there was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the registered persons had not completed sufficiently robust quality checks to enable them to quickly resolve shortfalls in the way care was delivered. These problems included the service not always being staffed in the right way so that people could be consistently offered the individual assistance they needed. There were also problems with the catering arrangements that did not always enable people to enjoy their meals in a comfortable dignified setting. Furthermore, records did not always show that people were being offered a varied range of dishes from which to choose. In addition to this we noted there to be a number of defects in the accommodation that detracted from people's ability to live in a pleasant domestic setting.

After the inspection the registered persons told us that they had strengthened the way in which quality checks were completed. This was so that each of the shortfalls we noted could be put right to ensure that people who lived in the service would reliably benefit from receiving safe care. The registered persons said that all of these improvements would be fully completed by 15 May 2016.

At the present inspection we found that the registered persons had introduced new and more robust quality checks. We saw that as a result of this development a number of improvements had been made to the running of the service. These improvements included changes being made to the number of staff on duty and to their working arrangements. We saw that this had helped to ensure that staff had more time to provide people with the individual assistance they needed. We saw an example of this when a person who had special communication needs was becoming distressed which they expressed through knocking themselves against a wall. A member of staff provided the person with intensive personal support that involved using a number of agreed ways to invite the person to become involved in other activities. We noted that with this assistance the person was able to relax and enjoy their time in a more positive way.

We also saw that the catering arrangements had been developed so that people were more able to enjoy their meals. The improvements included dining tables being laid with individual place settings. This helped people to dine in the company of others without becoming uncertain about which cutlery and drink was theirs. In addition, we noted that more detailed records had been set up of the meals each person had enjoyed making it easier for staff to check that each person was being offered a varied and balanced diet. People told us that they enjoyed the meals they were offered with one of them saying, "The food is okay here, we get plenty of it and there seems to be more choice now." Another person said, "I usually sit in the same place now in the dining room and I like that and I like my meals more."

In addition, we noted that the particular defects in the accommodation we found during our last inspection had been put right.

The various improvements we have described meant that the relevant legal requirement had been met.

However, we noted that further improvements still needed to be made in the way some quality checks were

completed. This was because they had not always resolved problems with the accommodation. An example of this was the condition of the windows in three bedrooms. We noted that the wooden frames were discoloured and were rotten in places. Furthermore, in one bedroom the windows could not be opened because they had become warped due to damp and had been painted over. In another of the bedrooms one of the windows had a broken fitment that looked unsightly. Records showed that these defects had not been identified by the registered persons' audit process and there was no definite timescale within which they were due to be addressed. We also noted that some fire safety checks were overdue. This shortfall reduced the level of fire safety protection provided in the service.

The registered manager told us that both of these problems would be quickly resolved. They also said that further quality checks would be introduced to ensure that similar problems were less likely to occur again.