Lilena and Pentree Lodge Care Homes Limited

Pentree Lodge Residential Care Home

Inspection report

63-65 Pentire Avenue
Pentire
Newquay
Cornwall
TR7 1PD

Tel: 01637877662
Website: www.lilena-pentree.co.uk

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Ratings

Overall rating for this service	Good
Is the service effective?	**Requires Improvement**

Summary of findings

Overall summary

Pentree Lodge is a care home which provides accommodation for up to 15 people with mental health needs who require assistance with personal care. At the time of the inspection 15 people were using the service.

There was a registered manager at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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 previously carried out a comprehensive inspection of Pentree Lodge in March 2016. At that inspection we identified one breach of the legal requirements. This related to how people's monies and cigarettes were managed in relation to the Mental Capacity Act 2005. We subsequently issued one requirement and told the provider to take action to address one breach of the regulations. The provider sent the Care Quality Commission an action plan following the publication of the report.

We carried out this focused inspection to check to see if the service had made the required improvements identified at that comprehensive inspection.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Pentree Lodge on our website at www.cqc.org.uk

During this inspection people told us they accepted they needed help with managing their monies and cigarettes. Decisions about the help staff gave people were documented in people's care plans. There was evidence staff had consulted with external professionals and decisions were reviewed.

We could not improve the rating of 'requires improvement' in respect to the question 'Is the service effective?' because to do so requires the service to demonstrate consistent good practice over time. This decision will be reviewed when we complete our next planned comprehensive inspection.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

Requires Improvement

The service was effective. Improvements had been made to ensure people's capacity to consent to care and treatment was assessed in line with legislation and guidance.

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.

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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.

This inspection took place on 31 January 2017. This was an unannounced inspection which meant the staff and provider did not know we would be visiting. The inspection team consisted of one inspector.

The inspection was to review what action had been taken to meet the breach in regulation identified during the comprehensive inspection completed in March 2016.

Before the inspection we reviewed the action plan provided by the service following the last inspection, previous inspection reports and other information we held about the service. We also looked at notifications we had received from the service. A notification is information about important events, which the provider is required to tell us about by law.

During the inspection people we spoke with two people who used the service. We looked around the premises. We spoke with the registered manager of the service. We inspected three records relating to the care of individuals.

Requires Improvement

Is the service effective?

Our findings

At our inspection in March 2016 we found people's capacity to consent to care and treatment was not assessed in line with legislation and guidance. This was in respect to how the service assisted people to manage their money and cigarettes. This was in breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When people lack mental capacity to take particular decisions, any decisions made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

At the inspection in March 2016 we checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. We were concerned that people had been told they could not purchase energy drinks, and if one person persisted they could have their license agreement terminated. The manager said the reason for this was that if the person drank too many of these it had a serious impact on their mental health. We also found that some people had their cigarettes handed out by staff at specific time intervals. This was because if people had their cigarettes they would smoke them all at once. These people did not have enough money to smoke as much as they wanted to, and running out of cigarettes would result in people being agitated. Some people also had problems managing their limited monies for example to purchase cigarettes, toiletries and so on. There was no evidence in people's files of how these decisions were made, and who was consulted. The people concerned were judged as having full mental capacity.

At this inspection we checked what actions the registered manager had taken about the breach in regulation. The registered manager told us people could purchase energy drinks if they wanted, but these could not be drunk at the service. This had been made a house rule. The matter had been discussed with the community mental health team, and they supported the decision that people should be discouraged from drinking these products.

In respect to the management of people's monies and cigarettes the registered manager said there had been individual 'Best Interest' meetings with several people who used the service. A representative from the community mental health team had been invited to the meetings, although they were not always able to attend. As a consequence of the meetings people had agreed to staff assisting them with managing their monies and cigarettes. The meetings had been documented, and the person concerned had signed the minutes of the meeting.

At this inspection we spoke to two people who needed assistance with managing their monies and cigarettes. Both people accepted they needed help in this area of their lives.

We also checked people's records to see how decisions had been made and documented. In the records we inspected the assistance required was outlined in care plans and risk assessments. However risk assessments could be more detailed; for example to state specifically why staff were providing the specific support and the outcome of the support provided. The registered manager said the decisions taken would continue to be kept under review. There was also evidence in records that the management of people's monies and cigarettes had been discussed, on a number of occasions, with members of the community mental health team, including people's care co-ordinator and the consultant psychiatrist.

We were satisfied suitable action has been taken regarding the breach of regulation that as long as people could unilaterally withdraw from the agreements in place. Similarly staff need to continue to keep agreements under review so if possible people can become more independent in these areas of their lives.