

Sharob Care Homes Ltd

Caprera

Inspection report

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Date of inspection visit:
18 February 2017

Date of publication:
07 March 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

Caprera is a care home which provides care and accommodation for up to 33 older people. On the day of the inspection there were 33 people using the service. We carried out this unannounced focused inspection on 18 February 2017.

We carried out an announced comprehensive inspection of this service on 26 January 2016. A breach of legal requirements was found. Arrangements for the management, administration and storage of medicines were not robust. For example, Medicine Administration Records (MAR) were confusing and handwritten entries had not been double signed. Records for medicines requiring stricter controls by law were not accurate. Creams were not dated on opening. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook this focused inspection 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 those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Caprera on our website at www.cqc.org.uk.

The service is required to have a registered manager and at the time of our inspection a registered manager was in post. 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 and associated Regulations about how the service is run.

Systems in place for the management and storage of medicines were robust. MARs were accurate and consistently completed in line with national guidance. Medicines were stored safely at appropriate temperatures.

People told us they were happy with the care they received and believed it was a safe environment. We observed people sitting in small groups chatting and laughing together. People were relaxed and at ease with each other and staff.

There were sufficient numbers of suitably qualified staff on duty to meet people's needs in a timely manner. Staff completed a thorough recruitment process to ensure they had the appropriate skills and knowledge for their role. Staff had received safeguarding training and knew how to recognise and report the signs of abuse. They were confident any concerns would be dealt with.

Risks specific to people's individual health and social needs were identified. Staff described to us how they would support people in particular circumstances. Their descriptions were in line with the guidance in care plans.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

We found that action had been taken to improve safety. There were robust systems in place to help ensure people received their medicines safely.

There were sufficient staff available to meet people's needs in a timely manner.

Risk assessments contained clear guidance to enable staff to support people according to their needs

Caprera

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.

We undertook an unannounced focused inspection of Caprera on 18 February 2017. The inspection was undertaken by one adult social care inspector. This inspection was done to check that improvements to meet legal requirements planned by the provider after our January 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service safe? This is because the service was not meeting some legal requirements.

We reviewed the Provider Information Record (PIR) before the inspection. The PIR is a form that asks the provider to give some key information about the service, what the service does well and the improvements they plan to make. We also reviewed other information we held about the service and notifications we had received. A notification is information about important events which the service is required to send us by law.

During our inspection we spoke with the area manager, three care staff and five people who were living at Caprera.

We looked at records relating to people's individual care and four people's medical records. We also looked at three staff recruitment files, staff duty rotas, staff training records and other records relating to the running of the service.

Is the service safe?

Our findings

At our previous comprehensive inspection in January 2016 we found the systems in place to manage medicines were not robust. This meant it was not clear whether people were receiving their medicines as prescribed. At this focused inspection we found the systems in place had improved and the provider was now meeting the requirements of the legislation.

Systems to manage medicines were robust and helped ensure people received their medicines safely and as prescribed. Medicines Administration Record (MAR) charts were fully completed throughout the day. Most people received their morning and evening medicines in their rooms and lunch and teatime medicines downstairs. MARs were kept in both areas to enable staff to complete them as soon after administering the medicine as possible. The MARs clearly stated which medicines needed to be recorded and at what time. The records corresponded with each other and were completed correctly. Any handwritten entries were double signed to help reduce the possibility of errors occurring.

Medicines which required stricter controls by law were stored correctly and records kept in line with relevant legislation. Stock checks were completed on a weekly basis. A medicine refrigerator was available for medicines which needed to be stored at a low temperature. The temperature of the refrigerator, and the room where medicines were stored, were monitored. The temperatures were within the acceptable limits.

Some people had been prescribed creams and liquid medicines. These had been dated upon opening and marked with an expiry date. This meant staff would be aware when the medicines would no longer be safe or effective to use.

An external pharmacy audit had been carried out two weeks before the inspection. This had highlighted some minor areas for improvement and all these had been addressed. For example, a policy on the administration of homely medicines had been introduced. A member of the management team carried out monthly in-house audits.

People told us they were happy with the care they received and believed they were safe at Caprera. Comments included; "Oh yes, we feel very safe." We observed people were relaxed and at ease with staff.

People were protected from the risk of abuse because staff had received training to help them identify possible signs of abuse and knew what action they should take. Staff received safeguarding training as part of their initial induction and this was regularly updated. They were knowledgeable in recognising signs of potential abuse and the relevant reporting procedures. Staff told us if they had any concerns they would report them to management and were confident they would be followed up appropriately. They were able to tell us where they could access contact details if they needed to report any concerns outside of the organisation.

Care files included risk assessments which identified risks and the control measures in place to minimise risk. These covered issues such as risk of falls, use of bedrails, poor nutrition and hydration and skin

integrity. There were also risk assessments in place which had been developed to meet people's specific needs. For example, one person could become anxious leading them to behave in a way which could be challenging for staff. There was clear guidance in the care plan outlining what staff should do in these circumstances. During the inspection the person became distressed and we observed staff supported them in line with the guidelines. People's files contained Personal Emergency Evacuation Plans (PEEPs). These outlined the support people would need to leave the building in the event of an emergency.

There were enough skilled and experienced staff to help ensure the safety of people who lived at Caprera. The service was fully staffed at the time of the inspection. The care staff team were supported by domestic, maintenance, laundry and kitchen staff to help ensure the smooth running of the service. We looked at rotas for February and saw staffing levels identified as necessary for the service had been consistently met. The area manager told us they rarely needed to use agency staff as any gaps in the rota were normally covered by other staff or themselves. One member of staff told us; "There is always someone to rely on."

Staff completed a recruitment process to ensure they had the appropriate skills and knowledge required to provide care to meet people's needs. Staff recruitment files contained relevant recruitment checks to show staff were suitable and safe to work in a care environment, including Disclosure and Barring Service (DBS) checks.