

Mr Alan Hannon

# Threen House Nursing Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Inadequate** ●

Is the service effective?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

This inspection took place on 10 May 2017 and was unannounced. The last inspection of the service was in February 2017 when we found six breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider did not notify the local authority or the Care Quality Commission (CQC) of possible safeguarding incidents, the care and treatment of service users was not always appropriate and did not meet their needs or reflect their preferences, the registered person did not manage medicines safely, the registered person did not operate systems and processes effectively to investigate any allegations or evidence of abuse, the registered person did not operate effective systems to assess, monitor and improve the quality and safety of the services provided and persons employed in the service did not receive appropriate support, training, supervision or appraisal to enable them to carry out the duties they were employed to perform. Following the inspection we issued the provider with three Warning Notices and gave them two months to comply with the Regulations. The provider also agreed not to admit new people to the service, without the written agreement of the Care Quality Commission.

At this inspection we reviewed actions the provider had taken in response to the Warning Notices and also discussed information of concern we received from the registered manager regarding staff recruitment. We found the provider and the registered manager had made some progress towards meeting the requirements of the Warning Notices, although further work was needed.

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 'Threen House Nursing Home' on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

As we have rated one of the five questions we ask as 'Inadequate' the service remains in special measures. Services in special measures will be kept under review and, if we have not taken immediate action to propose to cancel the provider's registration of the service, will be inspected again within six months. The expectation is that providers found to have been providing inadequate care should have made significant improvements within this timeframe.

This service will continue to be kept under review and, if needed, could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement so there is still a rating of inadequate for any key question or overall, we will take action to prevent the provider from operating this service. This will lead to cancelling their registration or to varying the terms of their registration.

For adult social care services the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

Threen House is a registered care home for older people who require nursing or personal care, some of

whom are living with the experience of dementia. The service can accommodate up to 26 older people, in single or shared rooms. At the time of this inspection, 13 people were using the service.

The service had a registered manager who was appointed by the provider in August 2016. However, during this inspection the registered manager told us they had given in their notice to the provider and would be leaving shortly. 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.

We found one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 as the provider did not always carry out the checks required to make sure new staff were suitable to work with people using the service. You can see what action we told the provider to take at the back of the full version of the report.

People received their medicines safely and there were enough staff to meet people's care and support needs.

The registered manager had made some improvements to the training and support staff received.

The provider had updated service records for equipment used in the service but had not always acted on recommendations.

The service had a registered manager but they had recently given in their notice. The provider had made arrangements to recruit a new manager.

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

We always ask the following five questions of services.

### Is the service safe?

**Inadequate** ●

Not all aspects of the service were safe.

The provider did not always carry out the checks required to make sure new staff were suitable to work with people using the service.

People received their medicines safely.

There were enough staff to meet people's care and support needs.

We have not revised the rating for this key question. We will review our rating for Safe at the next comprehensive inspection.

### Is the service effective?

**Requires Improvement** ●

Some aspects of the service were not effective.

The registered manager had made some improvements to the training and support staff received.

The provider had updated service records for equipment used in the service but had not always acted on recommendations.

We have not revised the rating for this key question. We will review our rating for Effective at the next comprehensive inspection.

### Is the service well-led?

**Requires Improvement** ●

Some aspects of the service were not well led.

The service had a registered manager but they had recently given in their notice. The provider had made arrangements to recruit a new manager.

We have not revised the rating for this key question. We will review our rating for Well-Led at the next comprehensive inspection.

# Threen House Nursing 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 checked 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 10 May 2017 and was unannounced. One inspector carried out the inspection.

Before the inspection we reviewed the information we held about the provider and the location. This included the last inspection report, the provider's action plan dated 07 April 2017 and statutory notifications the provider sent us about significant events and incidents that affected people using the service.

During the inspection we spoke with six people using the service, four members of staff and one visitor. We also spoke with the provider and the registered manager and reviewed records they kept on the running of the service. These included recruitment, training and supervision records for four members of staff, audits and checks the provider completed to monitor quality and safety in the service and medicines records for eight people using the service.

# Is the service safe?

## Our findings

At our last inspection in February 2017 we found that the provider did not always manage people's medicines safely. For example we found that a nurse had failed to record one person's medicines accurately and the provider, nursing staff and registered manager had not identified the error when they carried out their medicines audits.

At this inspection we found that nurses had completed people's medicines administration record (MAR) sheets accurately and people were receiving their medicines safely. Staff also completed the controlled medicines record accurately and the registered manager checked balances of people's controlled medicines regularly. Daily audits the registered manager completed ensured nursing staff kept accurate records. For example, the registered manager identified on one occasion that an entry in the controlled medicines register was illegible and they arranged for the nurse responsible to delete the original and repeat the entry.

At our last inspection in February 2017 we noted that the provider did not have up to date service and maintenance records for equipment used in the service. For example, environmental risk assessments the registered manager showed us for fire doors, the boiler room, laundry, clinical waste and food store were dated 2004 and 2005.

At this inspection we saw that the provider had updated some of the maintenance and service records and these now showed that equipment used in the service was maintained and serviced. These included a monthly check of hot water temperatures, a weekly test of door holders linked to the service's fire alarm system, daily and weekly environmental safety checks. We also saw the provider's gas safety certificate and legionella test certificates dated January 2017, the fire extinguisher service record dated January 2017 and the emergency lighting service certificate dated December 2016. The most recent electrical safety certificate we saw was dated March 2012. The provider confirmed the service engineer had visited in March 2017 but they had not received the test certificate when we inspected.

We did note that some service engineers' reports included recommendations and the provider had not included these in their 2017 development plan for the service. For example, the fire alarm service certificate dated December 2016 recommended "changing the fire panel and all the devices as it is well over 25 years old." We discussed this with the provider who told us they had no plans to change the system as it was working satisfactorily and was serviced regularly. Where service records identified that individual parts of the system required attention, the provider told us they ensured this work was carried out. We also saw six-monthly service records for the passenger lift from November 2014 to May 2016 where the engineer repeated the same recommendations for work needed on the lift. For example each report stated that the lift rope showed signs that may indicate internal corrosion but there was no evidence that the provider had taken any remedial action or requested more detailed investigations.

Following the inspection the provider told us, "Stannah lifts are engaged on a contractual basis to service the lift, there is a call out within 20mins to cover entrapments. British Engineering Services carry out a 6

monthly thorough examination on the lifting equipment (a requirement by our insurance company to ensure the lifting equipment is safe to use). On receipt of the report we forwarded a copy to Stannah lifts to ensure that any observations or defects are monitored or actioned as required."

The provider did not always operate recruitment procedures to ensure that staff were suitable to work with people using the service. Shortly before this inspection the registered manager informed us that a registered nurse the provider had appointed as a bank member of staff, had failed to declare a criminal conviction on their application form when they applied for a permanent post and the registered manager appointed them. We discussed this with the provider and the registered manager and they told us they were unable to locate the application form but the registered manager was sure the conviction was not declared. The provider had taken no action in response and had not referred the nurse to the Nursing and Midwifery Council (NMC) or notified the Care Quality Commission (CQC). Following the inspection we contacted the NMC and confirmed the nurse and the provider should have notified them of the conviction. The registered manager made a fitness to practise referral to the NMC the day after our inspection.

The failure to notify the NMC and CQC of the nurse's conviction may have placed people using the service at risk of unsafe care. This was a breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

## Is the service effective?

### Our findings

At our last inspection in February 2017 we found that staff working in the service did not receive appropriate support, training, supervision or appraisal to enable them to carry out their work. The provider's records did not show that staff had completed their induction and Care Certificate training within 12 weeks of starting work in the service, a requirement of the provider's training system. We also found there was no record of staff receiving supervision at eight-weekly intervals, as stated in the provider's supervision contract with staff.

At this inspection we found the registered manager had made some improvements to staff training and supervision but further improvements were needed. Staff we spoke with commented positively on the training and support they received. Their comments included, "Everything is ok at the moment. I've done some useful training and we seem to have supervision all the time recently" and "The training has been good and I have supervision regularly with [registered manager's name]."

The staff records we checked showed that some staff had completed training recently, including dementia, health and safety, manual handling and customer service. We saw that the registered manager facilitated training sessions and supported staff to complete workbooks to demonstrate their understanding and competence. However, the registered manager was not able to produce a training matrix that showed all staff were up to date with training the provider considered mandatory.

Staff records also showed that staff were receiving regular supervision from the registered manager. Each of the four staff files we reviewed included at least two supervision records in the last four months. Most of these supervision sessions demonstrated that staff had the opportunity to meet with the registered manager to discuss their work, people using the service, their training needs and personal development issues. Some of the supervision records were more task-based where the registered manager observed a member of staff completing a task, for example administering medicines or helping a person to eat a meal, and reported on their knowledge and application of best practice and the provider's policies and procedures.

All of the staff records we reviewed included an annual appraisal of the staff member's performance the registered manager had completed in April 2017. The appraisal records were written by the registered manager and showed there had been a two-way discussion about the member of staff's performance and any ideas they had to improve the quality of care provided in the service.

## Is the service well-led?

### Our findings

At our last inspection in February 2017 we noted that the service did not have a registered manager. The provider is registered with the Care Quality Commission (CQC) as an individual and does not require a registered manager. However, although the provider held a City and Guilds National Vocation Qualification Level 4 Registered Manager (Adults) qualification awarded in 2005, they did not have a nursing qualification and had always appointed a qualified nurse to manage the service. The previous registered manager, who had worked at the service for 23 years, left the service following our inspection in January 2016 and another manager appointed by the provider in May 2016 left in July 2016. The provider appointed a manager in August 2016 but they had not applied for registration with the CQC at the time of our inspection in February 2017. Following that inspection the manager confirmed that they had submitted an application to register with the CQC and their registration was confirmed on 07 May 2017.

During this inspection the registered manager told us they had resigned and would be leaving the service after a period of notice. The provider told us they would advertise the registered manager's post and appoint a new manager as soon as possible.