

# Mr & Mrs V Game

# The Briars

## Inspection report

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### Overall summary

A comprehensive inspection took place at this service on 22 December 2014. At this inspection a breach of legal requirements was found. The registered service did not protect people who used the service against the risks associated with the unsafe use and management of medicines. Staff did not have written guidance for medicines to be given as required. Staff did not have written guidance for those people who were prescribed creams. Staff were not recording the temperature of the room in which medicines were stored.

The registered provider wrote to us telling us what action they would be taking in relation to the breach. As a result we undertook a focussed inspection on 20 July 2015 to follow up on whether action had been taken in relation to the breach.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Briars on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

The Briars provides care and accommodation to a maximum of five people who have a learning disability. The home is situated in a residential area of Saltburn, close to local amenities.

The home had a registered manager in place. 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.

At this focussed inspection on 20 July 2015 we found that the registered provider had followed their plan and legal requirements had been met. This was an unannounced visit which meant the staff and provider did not know we would be visiting.

We could see that improvements to medicines had been made since our last inspection. At this inspection written guidance for medicines to be given as required were in place for people who needed them. This written guidance provided staff with information about why these medicines should be administered and in what dosage. There was information on why such medicines should be given and signs and symptoms to look out for. We could see that this guidance had review dates which meant that they could be regularly reviewed to ensure that the service kept up to date with any changes which might have occurred.

Guidance had also been put in place for people who were prescribed creams. This included a body map which highlighted when and where creams should be applied. We could see that records for prescribed creams had been completed each day and creams had the date of opening recorded on them and the expiry date.

We looked at room temperature records for medicines for June and July 2015. We could see that temperature checks had been carried out twice per day and were within safe limits for storing medicines.

# Summary of findings

Staff had received training in medicines and had been observed administering medications, although no formal competency checks had been recorded. We could see that medicines were included into staff supervision sessions.

You can find full information about our findings in the detailed findings sections of this report

# Summary of findings

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

We always ask the following five questions of services.

### **Is the service safe?**

The service was safe.

Guidance was in place for medicines which were given when needed and for prescribed creams. Room temperature records had been regularly carried out.

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### **Is the service effective?**

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### **Is the service caring?**

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### **Is the service responsive?**

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### **Is the service well-led?**

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# The Briars

## 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.

A comprehensive inspection carried out on 22 December 2014 and a breach of regulations was identified. A focused inspection carried out 20 July 2015 looked at the action the registered provider had taken in relation to the breach of legal requirements we found on 22 December 2015.

The inspection team consisted of one adult social care inspector.

We inspected the service against one of the five questions we ask about the service: Is the service safe. Before the inspection we reviewed all the information we held about the service. During the inspection people who used the service had been taken out on a planned excursion with staff. We spoke with the registered manager.

# Is the service safe?

## Our findings

Is the service effective?

## Our findings

# Is the service caring?

## Our findings

# Is the service responsive?

## Our findings



# Is the service well-led?

## Our findings