

# Colten Care (1993) Limited

# Canford Chase

## Inspection report

40 Western Road  
Branksome Park  
Poole  
Dorset  
BH13 6EU

Tel: 01202766182  
Website: [www.colten-care.co.uk](http://www.colten-care.co.uk)

Date of inspection visit:  
22 June 2017

Date of publication:  
13 July 2017

## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●

# Summary of findings

## Overall summary

Canford Chase is a purpose built care home which is registered to accommodate a maximum of 52 people who require nursing or personal care. There were 45 people living in the home at the time of our inspection.

This was an unannounced inspection that took place on 22 June 2017. At the last inspection in January 2016, the service was rated good overall, but the question 'Is the service safe?', was rated requires improvement.

The purpose of this inspection was to follow up on the actions taken by the service to address the breach of regulation in relation to the provision of safe care and treatment. This was because at the last inspection we found that; people had not always been protected against the risks associated with the unsafe management and use of medicines and the risks to people's health and safety had not been properly assessed and action had not been taken to mitigate any such risks.

At this inspection there were significant improvements. The provider had given the registered manager clinical and management support. Systems had been reviewed, assessed and improved. All actions included in the registered manager and provider's action plan had been met.

The people living at the home told us that they felt safe and well cared for. A relative told us that they were confident about the care and support that was provided and never felt that had to worry when they were not there.

Staff in the home were also positive about the home and the service they provided. They were all aware of the shortfalls from the last inspection and had worked hard with the registered manager to rectify the issues.

At this inspection we changed the rating for the key question 'Is the service safe?' from Requires Improvement to Good. The overall rating for the service remained Good.

Further information about this inspection is in the detailed findings below. Our previous comprehensive inspection from January 2016 provides information about the other areas that have previously been inspected.

## 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 ●

The service was safe.

Medicines were managed safely and staff competence was checked.

Risks were properly assessed and action was taken to reduce or manage any identified hazards.

Systems were in place to protect people from harm and abuse. Staff knew how to recognise and report any concerns.

Staff were recruited safely and there were enough staff to make sure people had the care and support they needed.

# Canford Chase

## **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 was a focussed inspection to check the domain of 'safe'.

The inspection took place on 22 June 2017 and was unannounced. One adult social care inspector visited the service.

The provider had completed a Provider Information Return (PIR) which we reviewed. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed all the other information we held about the service, including previous inspection reports and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law. We also contacted the local authority commissioners of the service to establish their view of the service.

As part of the inspection we spoke with two people who lived at the home to find out about their experiences of the care and support they received. We also spoke with five staff members, two managers and the registered manager. In addition, we spoke with a visiting relative.

We looked at two people's care plans in depth; these included risk assessments and medicine records. We also looked at records relating to the management of the service including audits, maintenance records, and four staff recruitment files.

# Is the service safe?

## Our findings

At the last inspection we found that the systems in place for the management and administration of medicines had not always been followed. Of particular concern was the administration of prescribed topical creams which had not been fully assessed, planned for and recorded.

At this inspection the registered manager and staff explained that assessments and care planning systems had been reviewed and new documentation had been put into place. Staff had also been given training about how to use the new documentation and the information that should be recorded.

There were systems in place to ensure medicines were obtained, stored, administered and disposed of safely. There were care plans in place for topical creams which gave clear instructions about why they were prescribed, where they should be applied and how often.

Also at the last inspection, we found that the assessment and management of risks had not always been effective. This was particularly in relation to the prevention of pressure sores. At this inspection we found that the service had reviewed the assessment and planning of care for people at risk of developing pressure sores or for people who had a pressure sore. Records prompted staff to clearly document any issues or concerns as well as the action that had been taken to minimise the risk or manage the concern. There was clear information about the equipment used and how often people should be supported to change position. Records demonstrating when people changed position and that equipment had been checked were up to date and showed that care plans and risk assessments were being followed.

There were satisfactory systems in place to safeguard people from abuse. Staff received regular training about safeguarding and minutes of staff meetings showed that the importance of this was regularly discussed. Records showed that the provider had notified the local authority and CQC of any safeguarding concerns or incidents and the registered manager had taken appropriate action when incidents had occurred to protect people and reduce the risk of repeated occurrences. Information about safeguarding adults was available on notice boards around the home and in the staff room to assist and prompt staff should they have any concerns.

Environmental risks were managed safely. These were regularly reviewed and updated. There were risk assessments for each part of the home and for various systems such as the heating, hot water, electricity and gas supplies. There were comprehensive maintenance and servicing records for all of the equipment and fire prevention systems.

Arrangements were in place to keep people safe in an emergency and staff understood these and knew where to access the information. Each person had a personalised plan to evacuate them from the home and these were regularly reviewed. The home also had plans in place to manage interruptions to the power supply, breakdown of equipment or other emergencies.

There were enough staff employed to meet people's needs. The registered manager explained that the

service had a staffing tool that gave a guide number of staff relevant to the number of people living in the home and their level of need. The home had recently been undergoing some refurbishment which had caused disruption to both the people living in the home and the staff. The registered manager had carried out an audit of the response times to call bells and found that people were waiting for support longer than was acceptable so they had increased the numbers of staff on each shift. Staff confirmed that they felt better able to meet people's needs with the increased staffing level.

There were satisfactory systems in place to ensure that people were supported by staff with the appropriate experience and character. Recruitment records showed that the service had obtained proof of identity including a recent photograph, a satisfactory check from the Disclosure and Barring Service (previously known as a Criminal Records Bureau check) and evidence of suitable conduct in previous employment or of good character.

There were satisfactory systems in place for the administration and management of medicines. We checked the storage and administration of medicines, and discussed medicines management with staff. Records showed that medicines were recorded on receipt, when they were administered and when any were returned to the pharmacy or destroyed. Regular audits were carried out and there were records showing that any issues identified through an audit were investigated and resolved. Staff confirmed that they had received regular training and competency checks.