

Mayhaven Healthcare Limited

Down House

Inspection report

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Date of inspection visit:
10 March 2017

Date of publication:
06 April 2017

Ratings

Overall rating for this service

Requires Improvement ●

Is the service responsive?

Good ●

Summary of findings

Overall summary

The inspection took place on the 10 March 2017 and was unannounced. When we inspected the service on the 17 and 19 October 2016 we found people were not having their social needs planned for and/or met as part of their personalised care. We served a warning notice on the provider. A warning notice is part of our enforcement actions. It told the registered provider they were not complying with a regulation and they had to put this right by 30 December 2016.

We undertook this focused inspection to check that they had met the requirements of the warning notice 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 (Down House) on our website at www.cqc.org.uk.

Down House is registered to care for 49 older or younger adults. Nursing care is provided. There were 26 people residing at the service when we inspected.

The service did not have a registered manager in place. However, there was a manager employed to run the service who was in the process of registering with us. 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 people's social needs were being planned in a personalised way. People were involved in deciding how they wanted to spend their time. An activities co-ordinator had been employed to provide dedicated time for people to have the opportunity to be active. People could choose to take part in group activities or have time with the activity co-ordinator and staff on their own. One member of staff said, the activities had been positive for people as, "People like the company; they stay awake longer and don't just fall asleep or just watch TV."

At our last inspection, the service was meeting all the other requirements in respect of being responsive to people's needs. However, there were other breaches of the regulations in respect of Down House, which were not reviewed on this inspection. This means the service is judged as 'Good' in respect of responsiveness but remains 'Requires improvement' overall. We will review the service as a whole at our next inspection.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service responsive?

Good ●

We found that action had been taken to improve how the service was responsive to people's needs.

People were having their social needs planned and met in a personalised way.

The service was responsive in all other areas of people's care at the last inspection. We did not review these during this inspection.

Down House

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 Down House on the 10 March 2017. This inspection was done to check improvements to meet legal requirements planned by the provider after our inspection on the 17 and 19 October 2016 had been made. The team inspected the service against one of the five questions we ask about services: is the service responsive? This is because the service was not meeting some legal requirements.

One inspector carried out this inspection.

Prior to the inspection, we reviewed the concerns from the previous inspection so we could check these were now met.

We spoke with five people and three relatives. We reviewed how the service was recording how four people wanted their social needs met. We checked that this was happening as planned for these people. We observed around the home how staff were interacting with people.

We spoke with five staff and the manager to see how they were meeting people's social needs. We spoke to two healthcare professionals during the inspection.

Is the service responsive?

Our findings

At our last inspection on the 17 and 19 October 2016 we found people were not having their social needs planned for and/or met as part of their personalised care. We served a warning notice on the provider. A warning notice is part of our enforcement actions. It told the registered provider they were not complying with a regulation and they had to put this right by 30 December 2016. This inspection found the requirements of the warning notice had been met.

People had a care plan in place that was personalised and detailed how they wanted staff to support them to remain cognitively, socially and physically active. People's life history had been used to detail their life and staff used this in discussions with people. This was seen to be important especially for people living with dementia. Where people had not been able to communicate with staff, family were asked to help with putting the information together.

People were positive in their comments about staff having enough time to spend with them. One person who spent their time in bed told us staff came to check they were alright and would share a positive time with them. They added how much they appreciated the staff member's humour during these times. We observed staff talking to people about their food likes and dislikes over lunch; there was a lot of laughter and the staff member made sure everyone at the table was involved in the conversation. A family member said, "Yes, it has definitely improved; I think [the manager] is working to get things right". One of the healthcare professionals told us they had also noticed the improvements in the service.

Records of what people took part in were being written in the daily notes which were archived periodically. We spoke with the manager about how this could be recorded so it was easily available to staff and family who could then reminisce with people what they had taken part in. The manager was considering a separate sheet in the records to record what people had taken part in. In this way, it would also make it easier to audit and identify people who were more likely to become socially isolated.

The service had employed an activities co-ordinator since the last inspection. They had developed a programme of activities supporting people to remain active on a one to one and group basis. A plan of activities people could take part in had been designed, changed and developed as staff found out what people enjoyed taking part in. One person said the activities co-ordinator would "come and ask me each day what I want to do." The activity list was displayed near the dining room and the manager described ways they wanted to make this available to those people who did not use the dining room.

Staff told us they felt people had benefitted from the changes. One staff member said, "It gets people active and keeps them moving". Another staff member said, "It's been pretty good. The activities co-ordinator does activities every day. People really enjoy it and say so. Also, they can tell their visitors what they have done; they have something to talk about." A third member of staff said they felt it had made their work better as, "People are happier and more relaxed."

The manager and staff talked about how they wanted to further develop the activities and time for people

later in the day and weekends.

At our last inspection, we found the service was meeting all the other requirements of being responsive to people's needs. We did not review these during this inspection