Accredited Care Limited

Meadows Sands Care Home

Inspection report

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Date of inspection visit:
29 August 2017

Date of publication:
29 September 2017

Ratings

Overall rating for this service	Requires Improvement

Is the service safe?	**Requires Improvement**
Is the service well-led?	**Requires Improvement**

Summary of findings

Overall summary

This was an unannounced inspection carried out on 29 August 2017.

Meadows Sands Care Home can provide accommodation and personal care for 26 older people and people who live with dementia. There were 20 older people residing in the service at the time of our inspection, two of whom lived with dementia.

There was a registered manager but they were not present in the service and were due to finish their employment in the near future. In their absence the service was being overseen by the deputy manager. 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. The service was run by a company that had two directors. In our report we refer to the company as being, 'the registered person'.

We carried out an unannounced comprehensive inspection of this service on 11 January 2017 when we found that there were two breaches of legal requirements. This was because the registered person had not taken sufficient steps that ensure that all areas of the accommodation were clean, suitable for the purpose for which they were being used and properly maintained. In addition, the registered persons had not sought and acted on feedback from relevant persons about their experience of using the service. Furthermore, they had not established robust quality checks and this shortfall had contributed to the issues noted above not being quickly addressed.

After our inspection of 11 January 2017 the registered person wrote to us to say what improvements they intended to make in order to meet the legal requirements in relation to the breaches. They said that a significant number of improvements had been made to the accommodation and that more were planned. They also said that new arrangements had been introduced to receive feedback about the service and that more detailed quality checks were being completed.

This report only covers our findings in relation to the action taken by the registered person to meet the breaches of legal requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Accredited Care Limited on our website at www.cqc.org.uk

At the present inspection, we found that the registered person had made a large number of improvements to the accommodation. However, we noted that further developments were still needed. These were necessary to ensure that people were provided with accommodation that was fully properly maintained and suitable for the purpose for which it was being used. In addition, we found that the registered person had introduced new arrangements to receive feedback about the service and that additional quality checks were being undertaken.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement

The registered person had made a number of improvements to the accommodation. However, some additional developments were still needed to ensure that all areas were well maintained and suitable for their purpose.

We have not revised the rating for this key question in order to improve the rating to 'Good'. This is because we need to be sure that the registered person will continue to improve the accommodation until it fully reaches a normal domestic standard.

We will review our rating for 'safe' at the next comprehensive inspection.

Is the service well-led?

Requires Improvement

The registered person had consulted with people about the running of the service and had introduced new and more robust quality checks.

We have not revised the rating for this key question, to improve the rating to 'Good'. This is because we need to be sure that the registered person will continue to consult with people. In addition, we need to be assured that more robust quality checks will be maintained and will quickly resolve problems in the running of the service as and when they occur.

We will review our rating for 'well led' at the next comprehensive inspection.

Meadows Sands Care Home

Detailed findings

Background to this inspection

We undertook a focused inspection of Meadows Sands Care Home on 29 August 2017 to follow up on two breaches of legal requirements that had been identified at our comprehensive inspection on 11 January 2017. The present inspection was completed to check that the registered person had made the improvements necessary to ensure that people who lived in the service reliably benefited from having all of the care and facilities they needed.

Our inspection was unannounced and the inspection team consisted of a single inspector.

We inspected the service against two of the five questions we ask about services: is the service safe and well-led? This was because at our earlier inspection the registered person was not meeting legal requirements in relation to these sections.

During our inspection we spoke with five people who lived in the service. We also spoke with a senior member of care staff, two other care staff, the housekeeper and the deputy manager. In addition, we examined particular parts of the accommodation. Furthermore, we reviewed documents that described how people had been consulted about the service and we looked at records of the quality checks that had been completed.

Requires Improvement

Is the service safe?

Our findings

When we carried out an unannounced comprehensive inspection of this service on 11 January 2017 we found that there was a breach of a legal requirement. This was because the registered person had not suitably equipped and maintained the accommodation so that it provided people with all of the facilities they needed.

The problems we noted included there not being enough bathroom facilities to enable people to be assisted to bathe whenever they wished. We were also concerned to note that inadequate signage in the service had increased the risk that people who lived with dementia would not be fully supported to find their way around their home. In addition, we identified that in a number of locations decorative finishes were badly scuffed and marked. Furthermore, we noted that some people had not been fully supported to personalise their bedrooms and in one bedroom the door leading to the en-suite private bathroom was missing. We also raised concerns about the accumulation of bird droppings on external window sills and veranda roofs because this increased the risk that people would acquire avoidable infections.

After our inspection on 11 January 2017 the registered person wrote to us to say what improvements they intended to make in order to meet the legal requirement in relation to the breach. They said that each of the shortfalls had been or would be promptly addressed.

At the present inspection we found that a significant number of improvements had been made. We saw that a disused bathroom had been completely refurbished and had been equipped with a new bath, walk-in shower, mood lighting and music. Care staff told us that the new bathroom was very useful because it increased people's ability to choose where and when to be assisted to bathe.

We also noted that people had been supported to personalise their bedrooms using photographs and other ornaments of their choice. In addition, we saw that with peoples' agreement new signs had been put up on bedroom doors to indicate who occupied each room. These signs together with other signs used to distinguish communal rooms such as bathrooms and toilets supported people who lived with dementia to find their way around their home.

Other improvements included the cleaning of windowsills and veranda roofs. We also noted that deterrent soft spikes had been fitted in these areas to help discourage birds from resting there and leaving excrement.

We saw that the main foyer, lounge, dining room and some hallways had been completely refurbished and as a result they were much improved. People who lived in the service spoke positively about these changes. One of them said, "Oh, it's much better now. The dining room is light and airy and not gloomy how it used to be." Another person who we met in the main foyer pointed to their surroundings and remarked, "This whole area is quite different to how it used to be. It's been really updated and looks much better."

The deputy manager showed us written plans to confirm that the registered person intended to continue with the programme of refurbishment until all of the remaining landings and hallways had been completed.

However, we noted that in the interim most of these areas remained poorly presented. In numerous places decorative wall coverings and paintwork finishes were badly scuffed and marked. In addition, in several locations floor coverings were worn and discoloured with age.

Requires Improvement

Is the service well-led?

Our findings

At our inspection on 11 January 2017 we found that there was a breach of a legal requirement because the registered person had not properly consulted with key people about how well the service was meeting their needs and expectations. In addition, they had not always completed robust quality checks to ensure that people who lived in the service consistently benefited from all of the care and facilities they needed. In particular, we said that more needed to be done to regularly audit the systems used to promote good standards of hygiene, to maintain the accommodation and to manage risks to people's health and safety. We concluded that oversights in the completion of quality checks had contributed to there being a number of shortfalls in how the service was run which had not quickly been put right.

After our inspection on 11 January 2017 the registered person wrote to us to say what improvements they intended to make in order to meet the legal requirement in relation to the breach. They said that new steps had been taken to consult with people who lived in the service and with their relatives. They also said that new and more detailed quality checks had been introduced to ensure that good standards of hygiene were achieved. In addition, they assured us that there were suitable arrangements to ensure the on-going maintenance of the accommodation and that risks to people's health and safety were being suitably managed.

At the present inspection we found that the deputy manager and care staff had invited people who lived in the service to complete a questionnaire to give their views about how well the service was running. We noted that in their responses people had expressed a high level of satisfaction with the service. We also noted that the registered person had implemented the small number of improvements which had been suggested. An example of this was changes that had been made to the menu so that it better reflected people's individual preferences. In addition, the deputy manager had met with a number of relatives and documents showed that further meetings had been planned. Furthermore, we saw that the deputy manager had introduced a bimonthly newsletter that was intended to keep relatives up to date with important developments in the service.

Records also showed that more regular checks were being completed to ensure that suitable standards of hygiene were being maintained in order to reduce the risk of people acquiring avoidable infections. Furthermore, we noted that the accommodation was clean and hygienic. We also saw that quality checks had been undertaken to ensure that people received all of the personal care they needed. We noted that these checks had been effective in ensuring that people had reliably been given all of the care they had agreed to receive.

Records showed that new quality checks of the accommodation had ensured that routine repairs were being completed in a systematic and reliable way. However, although records showed that quality checks had ensured most risks to people's health and safety had been addressed, we noted that some shortfalls remained. An example of this was a number of radiators that had not been fitted with guards. This had increased the risk that people would be burned if they came into contact with the radiators' heated surfaces. Nevertheless, the deputy manager assured us that the need to fit guards had been noted and that the

necessary work would be completed as soon as possible.