

## **Gainford Care Homes Limited**

# Glenbrooke House

### **Inspection report**

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Website: www.gainfordcarehomes.com

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#### Ratings

## Overall rating for this service

Good



Is the service responsive?

**Requires improvement** 



#### Overall summary

We carried out an unannounced comprehensive inspection of this service on 25 March 2015. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of regulation relating to record keeping.

We undertook this focused inspection on 16 December 2015 to check that they had followed their plan and to confirm that they now met the 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 Glenbrooke House on our website at www.cqc.org.uk.

We found the provider had met the assurances they had given in their action plan and were no longer in breach of the regulations.

# 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 responsive?

We found that action had been taken to improve the responsiveness of the service.

Staff were knowledgeable about people's needs and wishes. People received support in the way they needed because records were up to date and detailed. They provided guidance for staff about how to deliver people's care, in the way the person wanted.

We could not improve the rating for: is the service responsive; from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

#### **Requires improvement**





# Glenbrooke House

**Detailed findings** 

# Background to this inspection

We undertook an unannounced focused inspection of Glenbrooke House on 16 December 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider had been made after our comprehensive inspection on 25 March 2015. We 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 at the time of our initial inspection.

The inspection was undertaken by an adult social care inspector. During our inspection we spoke with the registered manager and four people who used the service and looked at the care records for two people who used the service.



# Is the service responsive?

## **Our findings**

We reviewed the action taken by the provider following our comprehensive inspection in March 2015. This was to check that records accurately reflected people's current care and support needs.

At our visit we saw improvements had been made to ensure people's records reflected the individual care and support provided by staff.

People's needs were assessed before they started to use the service. This ensured that staff could meet their needs and the service had the necessary equipment for their safety and comfort.

Records showed pre-admission information had been provided by relatives and people who were to use the service. Assessments were carried out to identify people's support needs and they

included information about their medical conditions. dietary requirements and their daily lives. They were up to date and were reviewed monthly. For example, with regard to nutrition, personal care, mental health, mobility and communication needs. They identified areas of need which were then incorporated into care plans. Where necessary referrals were made for further assessment with specialists. such as the speech and language team when a person had problems with swallowing.

People's care records were up to date and personal to the individual. They contained information about people's likes, dislikes and preferred routines. The records we looked at showed a detailed life history, a 'This Is Me' document, was in place for each person. This gave information about a person's preferences, previous lifestyle, significant events and people of importance in the person's life. The information had been transferred into a care plan for people that accurately detailed how staff should be meeting people's social care needs. For example, "I watch Dr Who films and read the Radio Times and Dr Who magazines. The best way to support me is to help me carry my magazines downstairs and ensure I am wearing my reading glasses."

People's care plans were personalised and provided specific information for staff about how care was to be provided to the individual and in the way they wanted. For example, a person's personal hygiene care plan stated, "(Name) likes to brush their teeth morning and night. Staff put the toothpaste on the toothbrush for (Name) and prompt them to start brushing." For the same person another care plan detailed, "(Name) is able to choose their own clothing they will probably choose jogging bottoms." Care plans provided instructions to staff to help people learn new skills and become more independent in aspects of daily living whatever their needs were. For example, "I can put cereal into my bowl and pour the milk on. I can also butter bread for my lunch and make a sandwich but need the staff to cut my sandwich up."

Records showed assessments had been carried out, where necessary of people's capacity to make particular decisions. Records contained information about the 'best interest' decision making process, as required by the Mental Capacity Act. Best interest decision making is required to make sure people's human rights are protected when they do not have mental capacity to make their own decisions or indicate their wishes. Information was available to show if people had capacity to make decisions and to document people's level of comprehension. A care plan was in place for a person who required support with decision making. It gave information to staff about how to help and retain the involvement of the person in their daily decision making. It detailed, "(Name) will nod to show they understand. They can remember information you tell them," and "I will choose, if given choices, what I prefer." Staff, because they knew people well, could also tell us about people's levels of understanding.

We found the assurances the provider had given in the action plan with regard to record keeping had been met.