

Angel Home Limited

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Inspection report

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Date of inspection visit:
11 March 2016

Date of publication:
07 April 2016

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

We carried out an unannounced inspection of this service on 1 October 2015 at which breaches of legal requirements was found. We found the provider was not adhering to requirements relating to need for consent, safe care and treatment and good governance. After the inspection, the provider wrote to us to say what they would do to meet the legal requirements.

We undertook an unannounced focused inspection on the 11 March 2016 to check that they now met legal requirements. 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 'Angel Home Limited' on our website at www.cqc.org.uk.

Angel Home Limited provides accommodation, care and support to up to nine people with learning disabilities. At the time of our inspection seven people were using the service.

A registered manager was in post. 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.

Safe medicines management processes were in place and people received their medicines as prescribed. Stock checks were undertaken daily to ensure all medicines were accounted for. Protocols had been updated in regards to "when required" medicines and homely remedies to ensure staff knew what medicines were safe to give people and when they should administer them.

Consent procedures had been reviewed and mental capacity assessments had been completed to identify what aspects of their care people had capacity to consent to. For people who were deprived of their liberty the registered manager had arranged to obtain the legal authorisation to do so through the Deprivation of Liberty Safeguards. DoLS provides a process to make sure that people are only deprived of their liberty in a safe and correct way, when it is in their best interests and there is no other way to look after them.

Care records had been updated to ensure they provided an accurate and complete record of people's care and support needs. Care records contained detailed information about people's preferences and the level of support they required. The registered manager reviewed the content of people's care records to ensure they were accurate and up to date.

The required actions had been completed and the service was now meeting legal requirements.

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 

Improvements had been made to make the service safe. Safe medicines management processes were in place. People received their medicines as prescribed and all medicines administered were recorded on a medicine administration record (MAR). Stock balances were undertaken daily to ensure all medicines were accounted for. Protocols had been reviewed to update arrangements in regards to "when required" medicines, and homely remedies procedures had been updated to instruct staff which medicines were safe to use for each person.

We have improved the rating for this key question from 'Requires Improvement' to 'Good.'

Is the service effective?

Good 

Improvements had been made to make the service effective. Staff had adhered to the requirements of the Mental Capacity Act 2005. Mental capacity assessments had been undertaken to identify whether people had the capacity to consent to aspects of their care. Where people did not have capacity, 'best interests' decisions were made for them.

Arrangements had been made to lawfully deprived people of their liberty when required to do so to keep them safe.

We have improved the rating for this key question from 'Requires Improvement' to 'Good.'

Is the service well-led?

Good 

Improvements had been made to make the service well-led. Processes had been strengthened to review the quality of service provision, particularly in regards to medicines management and care records. Medicines management processes were reviewed weekly with daily stock checks. Care record audits had been improved to review the quality of the content of care records as well as ensuring records were kept up to date.

Care records had been improved to ensure they provided an accurate, complete and contemporaneous record of people's care and support needs.

We have improved the rating for this key question from 'Requires Improvement' to 'Good.'

Angel Home Limited

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 Angel Home Limited on 11 March 2016. This inspection was completed to check that improvements to meet legal requirements planned by the registered provider after our comprehensive inspection on 1 October 2015 had been made. We inspected the service against three of the five questions we ask about services: is the service safe? Is the service effective? Is the service well-led?

The inspection was undertaken by one inspector. Before our inspection we reviewed the information we held about the home. This included the registered provider's action plan, which set out the action they would take to meet legal requirements.

During the inspection we spoke with the registered manager, reviewed medicines management arrangements, reviewed three people's care records and auditing processes.

Is the service safe?

Our findings

At our previous inspection we found that stock checks were not kept of all medicines stored at the service, including Warfarin. This meant not all medicines could be accounted for. Medicines management audits were not robust to review medicines management processes.

At this inspection the registered manager had strengthened medicines management processes. Daily checks were undertaken on medicines stocks to ensure all medicines were accounted for and stock balances were recorded on medicine administration records (MAR). We checked the stocks of all medicines stored at the service and these were as expected. Additional stock of medicines had been returned to the pharmacy and we saw records of this. People received their medicines as prescribed and all medicines administered were recorded on their MAR.

The registered manager had liaised with people's GP to ensure each person had received a medicines review. Protocols for "when required" medicines had been updated to ensure they were still appropriate and they informed staff of the medicines people were prescribed to take when required and at what dose. People's GP had also reviewed homely remedy arrangements and provided staff with a list of which homely remedies were safe for people to take. Homely remedies are medicines that can be taken without a prescription.

The provider was now meeting the part of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 that they were breaching at our last inspection.

Is the service effective?

Our findings

At our previous inspection we saw that the registered manager did not always have sufficient records to evidence they adhered to the Mental Capacity Act 2005. Mental capacity assessments had not been undertaken to assess people's capacity to consent to aspects of their care, and there was a lack of information in regards to 'best interests' decisions. Some people were being deprived of their liberty in order to maintain their safety. However, the registered manager had not made arrangements to obtain the legal authorisation to do so.

At this inspection arrangements to obtain consent from people about their care and support had been reviewed to ensure staff adhered to the Mental Capacity Act 2005. Assessments had been undertaken to establish what aspects of people's care and support they were able to consent to. Where people had been assessed as not having the capacity to make decisions, 'best interests' decisions had been made for them. People's care records including information about who had Lasting Power of Attorneys or Court of Protection Appointees in place. These nominated individuals were involved in decisions about people's care.

The registered manager had liaised with the local authority to ensure people who required to be deprived of their liberty to maintain their safety had the legal authorisation in place to do so, through the Deprivation of Liberty Safeguards. DoLS provides a process to make sure that people are only deprived of their liberty in a safe and correct way, when it is in their best interests and there is no other way to look after them.

The provider was now meeting the part of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 that they were breaching at our last inspection.

Is the service well-led?

Our findings

At our previous inspection the provider did not have a robust system to check the quality of the service, particularly in regards to medicines management and care records. Medicines management audits did not ensure all medicines were accounted for and that stock balances were in place. Care records audits only reviewed that documentation was in date but did not comment on the quality and content of people's records. We saw that accurate and complete care records were not always maintained particularly in regards to risk assessments and people's health needs.

At this inspection systems to audit the quality of the service had been improved. We saw that medicines management audits had been strengthened and were undertaken more frequently to ensure people received their medicines as prescribed and that all medicines were accounted for. Care records audits had been strengthened to establish whether the information in people's care records was still relevant and any further updates required were completed.

The care records we viewed contained complete and up to date information about people's support needs. We saw that care records detailed people's likes, interests and hobbies so that care and support could be provided in line with people's preferences. People's support plans detailed what support people required and at what level. Assessments were undertaken of the risks to people's safety and management plans were in place to reduce the risks. Health action plans outlined the support people required in regards to their health needs, and records were kept of all appointments with healthcare professionals, including the outcome of GP and dental appointments.

The provider was now meeting the part of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 that they were breaching at our last inspection.