

Grace Care Service Limited

Ramping Cat Nursing Home

Inspection report

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Ratings

Is the service safe?	Requires improvement	
Is the service responsive?	Requires improvement	
Is the service well-led?	Requires improvement	

Overall summary

We inspected Ramping Cat Nursing Home on 11 June 2015. Ramping Cat Nursing Home provides nursing care for people over the age of 65. Some people at the home were living with dementia. The home offers a service for up to 39 people. At the time of our visit 28 people were using the service. This was an unannounced inspection.

We carried out an unannounced comprehensive inspection of this service on 23 December 2014. Three breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to management of medicines, people's care records and the quality assurance of the service.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report 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 Ramping Cat Nursing Home on our website at www.cqc.org.uk

There was a registered manager at the service. 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.

People were at risk of not always receiving their medicines as prescribed. Nursing staff did not always record when they had given people their medicines. Additionally as nursing staff did not always keep an accurate record of people's prescribed medicines it meant people could not be reassured they had received their prescribed medicines.

Summary of findings

Medicines were not always stored in accordance with manufacturer guidelines. The temperature of the room in which medicines were stored, on a number occasions exceeded the recommended temperature. Following the inspection the provider informed us a cooler unit was being provided.

Staff kept a current and accurate record of the care people received. Care plans accurately reflected people's needs and were written using an assessment carried out by nursing and care staff.

The provider and registered manager had developed systems to monitor the quality of service; this enabled

them to identify any areas of concern and make improvements. The registered manager and provider were planning to implement more systems to improve the monitoring of the quality of care. People and their relative's views were sought to help inform improvements to the service.

We found one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can see what action we told the provider to take at the back of the full version of this report.

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 safe?

The service was not always safe. People did not always receive their medicines as prescribed. Nursing staff did not always keep an accurate record of the administration of people's medicines.

Medicines were not always stored in accordance with manufacturer guidelines.

Requires improvement



Is the service responsive?

The service was responsive. Care and nursing staff kept an accurate and current record of the care people received. People's care plans had clear care and risk assessments which gave staff the guidance they needed to meet people's needs.

We could not improve the rating for responsive from December 2014 because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

Requires improvement



Is the service well-led?

The service was well led. The registered manager and provider had implemented systems to monitor the quality of the service people received.

The registered manager sought the views of people, their relatives and staff to make improvements to the quality of care.

We could not improve the rating for well-led from December 2014 because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

Requires improvement



Ramping Cat Nursing Home

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Ramping Cat Nursing Home on 11 June 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider after our inspection in November 2014 had been made. The team inspected the service against three of the five questions we ask about services: is the service safe, is the service responsive and is the service well led. This is because the service was not meeting some legal requirements at our inspection in December 2014.

The inspection was undertaken by two inspectors. During our inspection we spoke with two people, a nurse and the registered manager. Following our inspection we received information from the registered manager regarding concerns around medicine administration records.

Prior to this inspection we looked at information provided by local authority commissioners and local fire safety teams. During the inspection we looked at five people's care records and records relating to the management of the home.

Is the service safe?

Our findings

When we inspected the service in December 2014 we found people did not always receive their medicines as prescribed. Nursing staff did not always keep accurate records of the medicines people received. This was a breach of regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Following that inspection the provider and registered manager informed us they were taking action to rectify these concerns. They also provided us with an action plan. At this inspection (June 2015) we found action had not been taken to meet the fundamental standards.

Five people had not received their medicines as prescribed in May and June 2015. When we checked people's prescribed medicines against their medicine administration records (MAR) we found records did not accurately reflect the stock balance we found. Care and nursing staff had signed to record they had given people their medicines on MAR charts, however we cannot be sure they had assisted people to take these medicines. When we discussed this with nursing staff and the registered manager they were unable to account for the discrepancies.

One person was prescribed a medicine which needed to be given in variable doses. We saw nursing staff did not always give this person the correct dose. This meant the person was not always receiving their medicine as prescribed which may have had a negative impact on their wellbeing.

Nursing staff did not always keep an accurate record of people's prescribed medicines. Four people's prescribed medicines had been supplied late by the home's pharmacist. One person's MAR contained signatures from nursing staff to say they had administered this medicine, however these medicines had not been supplied to the home. We discussed this with the registered manager, who informed us they would meet with nursing staff to discuss these concerns.

Medicines were not always stored in accordance with manufacturer guidelines. The temperature of the room in which medicines were stored, on a number occasions exceeded the recommended temperature. Following the inspection the provider informed us a cooler unit was being provided.

These concerns were a breach of regulation 12 (f) (g) of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014.

Is the service responsive?

Our findings

When we last inspected the service in December 2014 we found an accurate record of people's care needs were not always maintained. This was a breach of regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Following that inspection the provider and registered manager informed us they were taking action to rectify these concerns. They also provided us with an action plan. At this inspection (June 2015) we found action had been taken to meet the fundamental standards.

People's care plans included information relating to their social and health needs. They were written with clear instructions for staff about how care should be delivered. They also included information on people's past work and social life as well as family and friends.

One person's care plan documented the support they needed from staff around their personal care needs and

the risks associated with these needs. This person was at risk of scratching themselves and there was clear guidance in place for staff to support and reassure this person, including things which they liked, such as sitting with staff and reading magazines.

The care plans and risk assessments were reviewed monthly and where changes in people's needs were identified, the plans were changed to reflect the person's needs. One person's care records clearly showed where their needs had changed and the on going support they needed to meet their personal hygiene needs.

Care and nursing staff kept a clear record of the care and support they provided to people on a day to day basis. These records were stored electronically and enabled the registered manager, nurses and care staff to understand the care the person had received and if there had been any changes in their well being. This enabled staff to have the information they needed to care for people.

Is the service well-led?

Our findings

When we last inspected the service in December 2014 we found the registered manager and provider did not have systems to monitor the quality of service. This was a breach of regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. Following that inspection the provider and registered manager informed us they were taking action to rectify these concerns. They also provided us with an action plan. At this inspection (June 2015) we found action had been taken to meet the fundamental standards.

The registered manager and provider carried out audits of people's care records. This had enabled the registered manager to identify concerns around staff record keeping. For example, the registered manager had identified some staff were recording what care they had given before they had provided care. The registered manager had discussed these concerns with staff during team meetings to ensure improvements were made. Care records we looked at showed improvements had been made.

The registered manager and provider had a system to monitor and manage incidents and accidents. All incidents and accidents were recorded electronically and enabled

the registered manager to monitor trends. The registered manager informed us they were able to generate reports which would enable them to identify concerns or trends with incidents. Current records showed there were no trends.

The views of people and their relatives were sought and as a result changes were made to improve the service. A recent quality assurance survey identified people and their relatives were concerned about people's laundry. These comments were acted on and the provider had recruited an additional member of staff for the laundry. A response to all comments was clearly on display in the home for people and visitors to see. Staff were also able to make suggestions about improving the quality of service people received. For example, one staff member suggested improvements which could be made around infection control. These ideas had been used to improve infection control procedures.

The registered manager and provider sought the advice of a external organisations. Where actions had been identified following a recent local authority visit the registered manager and provider had taken action to improve the service, such as improvements around people's risk assessments.

This section is primarily information for the provider

Enforcement actions

The table below shows where legal requirements were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment
Treatment of disease, disorder or injury	12.— 1. Care and treatment must be provided in a safe way for service users. 2. Without limiting paragraph (1), the things which a registered person must do to comply with that paragraph include— (f) where equipment or medicines are supplied by the service provider, ensuring that there are sufficient quantities of these to ensure the safety of service users and to meet their needs; (g) the proper and safe management of medicines.

The enforcement action we took:

We have issued a warning notice informing the provider and registered manager they must make improvements by 31 July 2015.