

Mrs L Gratton

Cumberland House

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

Cumberland House is a large victorian building located in a residential area of Hastings, within walking distance of a large park and the town centre. There are large communal rooms on the ground floor including a two lounges and a dining room and there are gardens to the rear and sides of the building.

The home is registered for 18 people with mental health needs, but actually provides support for up to 14 people and there were 12 people living at the home during the inspection. Some people were independent and needed minimal assistance while others required some assistance with looking after themselves due to their mental health care needs.

This home is not required to have a registered manager as part of its conditions of registration. The provider is the registered person and they have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the home is run.

At the last inspection on 5 and 7 October 2016 we carried out an unannounced comprehensive inspection and found the provider was not meeting the regulation with regard to recruitment under the 'safe' question. The provider wrote to us and said they would meet the legal requirements by November 2016.

We undertook this focused inspection on the 2 March 2017 to check that they had followed their plan and to confirm that they now met legal requirement. This report only covers our findings in relation to that requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Cumberland House on our website at www.cqc.org.uk.

We found the recruitment procedure had been reviewed; staff files included relevant checks and the information required to ensure that only suitable staff were employed to work at the home. People said there were enough staff to provide the support they wanted. One person told us, "They are very good, they know how much support we need." Staff told us there were sufficient staff working in the home to provide the support people needed; they were not rushed and had time to support people to make choices and, "Do what they want to do", such as go shopping.

People told us Cumberland House was their home; they were happy living there and their rooms had been personalised to suite their individual tastes. Risk assessments had been completed to ensure people were supported safely to be independent. These included environmental risk assessments for the use kettles, fridges and other electrical equipment in their rooms. People said they felt safe and received the support they needed. Staff had attended safeguarding training. They demonstrated a good understanding of their responsibilities with regard to supporting vulnerable people and the action they should take if they had any concerns.

The management of medicines had been reviewed since the last inspection and changes had been agreed with the new pharmacist to ensure the provider followed current guidance with regard to storing and giving

out medicines safely. Staff said they had attended relevant training and records supported this.

The home was well maintained; refurbishment was on going and people had chosen the décor.

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 ●

The service was safe.

Appropriate recruitment procedures were in place to ensure only suitable staff worked in the home and there were enough staff to provide the support people wanted.

Risk assessments provided clear guidance for staff to reduce risk and support people safely.

There were systems in place for appropriate management of medicines.

Staff had attended safeguarding training and had an understanding of abuse and how to protect people.

Cumberland 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 checked 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 on 2 March 2017. This inspection was done to check that improvements to meet legal requirements, planned by the provider after our comprehensive inspection on 5 and 7 October 2016, had been made. We inspected the service against one of the five questions we ask about services: Is the service safe? This is because the service was not meeting some legal requirements.

The inspection was undertaken by one inspector. During our inspection we spoke with five of the people living in the home and six staff including two students, support staff, the deputy manager and a healthcare professional. We observed staff supporting people and reviewed documents; we looked at three people's care plans, medication records, two staff files, training information and some policies and procedures in relation to the running of the home.

Before the inspection we looked at information provided by the local authority, contracts and purchasing (quality monitoring team) and Healthwatch. We also looked at information we hold about the service including previous reports, notifications, complaints and any safeguarding concerns. A notification is information about important events which the service is required to send us by law. We looked at the action plan sent in by the provider and the provider information return (PIR), which is a form that asks the provider to give some key information about the service, what they do well and any improvements they plan to make.

Is the service safe?

Our findings

At our last inspection on 5 and 7 October 2016 we found the provider was not meeting Regulation 19 of the HSCA regulations 2014 with regard to recruitment, as relevant checks had not been completed before staff worked at the home. The provider sent us an action plan stating improvements would be completed by November 2016. At this inspection we found the provider was meeting the regulation and effective recruitment procedures were in place.

People told us that Cumberland House was their home and they felt very safe living there. They said, "I am happy here. I have everything I want." "The staff are excellent" and, "I like living here, close enough to the town and there is always someone to go shopping with." Staff told us they had the time to support people and clearly had a good understanding of their individual needs.

Effective recruitment procedures were used to ensure only suitable staff worked at the home. There were relevant checks on prospective staff's suitability, including completed application forms, two references, interview records and evidence of their residence in the UK. A Disclosure and Barring System (Police) check, which identifies if prospective staff had a criminal record or were barred from working with children or adults, had been completed for all staff. Staff said they went through this recruitment procedure when they applied to work at the home and the checks had to have been completed before they started work. One member of staff said, "I think the checks are a good idea, they have to make sure residents are safe."

A number of risk assessments had been carried out, depending on people's needs. They looked at all aspects of people's lives, including using electrical equipment in their rooms, going shopping, gardening and doing housework. The assessments were specific to each person and included guidance for staff to follow to ensure people were supported to be independent safely. Each assessment looked at the activity itself and potential risks to the person concerned, other people and staff; what actions were in place to reduce the risk and how often they were reviewed. Positive outcomes of the activity for the person and their opinion and comments about the risk and any restrictions were included. For example, one person liked helping in the kitchen. The potential risks were cutting themselves when they used knives, slipping on the floor and burns when cooking meals. The positive outcomes were the activity kept the person busy interacting with staff and there was increased feeling of self-worth. Risks were suitably controlled, with health and safety systems in place including food hygiene practices. The person commented, 'Feel perfectly fit to do it'.

As far as possible people were protected from the risks of abuse or harm. Staff had received safeguarding training. Staff understood the different types of abuse and described the action they would take if they suspected abuse was taking place. They told us they had read the whistleblowing policy and would report any concerns to the registered manager or provider, or the local authority and the Care Quality Commission (CQC), if they felt their concerns had not been addressed. People said they were happy living in the home and that the staff understood each person's specific needs and how much support they needed to be independent.

There were systems to manage medicines safely. The medicine administration record (MAR) charts clearly stated the medicines people had been prescribed and when they should be taken. MAR charts included people's photographs and any allergies they had. All the MAR charts were up to date, completed fully and signed by staff who had completed appropriate training. We observed staff when they gave out the medicines. Medicines were given out individually from the locked medicine cabinet in the office, staff ensured people took the medicines and then signed the MAR charts. Staff followed the medication management policy in relation to medicines given 'as required' (PRN), such as paracetamol for pain relief. One medicine, given out in the evening, required two staff to check and sign the MAR. There were two evenings when only one member of staff worked after 8pm. The deputy manager contacted the person's GP during the inspection and it was agreed that the medicine could be given before 8pm when two staff were available. The deputy manager said they were changing their pharmacist and had an agreed date for the delivery of a new trolley and secure cupboard, with a separate book for controlled medicines and emailed confirmation that the changes had been made following the inspection.

People said there were enough staff working in the home and staff had time to spend with people and support them to go into town shopping. Staff told us there were always two staff on during the day, as well as the chef, housekeeping staff and deputy manager. There were six staff working in the home at the time of the inspection, including two students from the local college. Staff said they covered for each other when colleagues were on leave and if they needed extra staff to take person for an appointment or shopping, extra staff were arranged. There was usually one staff member working nights, although additional staff were allocated if people's needs changed.

Environmental risk assessments had been completed to ensure the home was safe for people living there. The home was clean and well maintained and people had been involved in decisions about the decoration of the home, they had chosen the wallpaper for the dining room and were looking forward to choosing the décor for the main lounge. Staff reported any repairs and these were recorded and dealt with as soon as possible. There were records to show relevant checks had been completed, including lighting, hot water, call bells and electrical equipment. The fire alarms system was checked weekly and fire training was provided for all staff and the records showed they had attended. External contractors maintained electricity supply and kitchen equipment, and if there were any problems staff were able to access their contact details.

There were systems in place to deal with unforeseen emergencies. Personal evacuation emergency plans were in place for each person, they were specific to their needs and staff were aware of these plans and how to support people to leave the building if necessary. Staff told us a senior member of staff was on call if there was an emergency, or if they needed advice.

Accidents and incidents were recorded and the provider monitored these, they said no trends had been found. Staff said if an accident or incident occurred they would inform the deputy manager or senior staff on duty and an accident form would be completed. Information about what happened was recorded, staff discussed the accident or incident and action was taken to reduce the risk of a re-occurrence.