



AIGBURTH

## FINDINGS OF CQC VISIT

12 March 2015



# Introduction

Each time the Care Quality Commission inspects a care home, it issues an inspection report. This gives feedback on what inspectors found and what recommendations they make to the people who manage the home. From this, the providers need to produce an action plan, which needs to be agreed with the CQC.

At MHA, we took the decision to make a summary of our action plan public for all inspection reports as we want to be open and honest with our residents and their families and friends. In this action plan, you can read what the inspectors said to us and what our response and actions to those are.

**In addition, you can also see what our residents, their families and friends have said about our homes on our care home web pages at [www.mha.org.uk](http://www.mha.org.uk). There you will find the latest reviews about our homes that are posted on the independent website [www.carehome.co.uk](http://www.carehome.co.uk)**



# Is the service safe?

## What did the CQC inspection tell us?

The service was safe

## Our plan of action

### Making the service safe

- ▶ No actions necessary

# Is the service effective?

## What did the CQC inspection tell us?

### The service was not consistently effective

- ▶ People's needs had been assessed and plans of care provided guidance for staff to help meet those needs effectively.
- ▶ Staff had a good understanding of Deprivation of Liberty Safeguard (DoLS) and the requirements under the Mental Capacity Act (MCA). The provider had adhered to the legal requirements to ensure people's human and legal rights were respected.
- ▶ People's dietary needs were not consistently met. People at risk of poor nutrition and hydration had been assessed; referred to health care professionals for support and developed plans of care to meet their needs. Catering staff were aware of everyone's dietary needs however; their knowledge of nutritional needs for older people was limited.
- ▶ People had access to, and referred to relevant health care professionals in order to ensure their health care needs were met.

## Our plan of action

### Making the service effective

- ▶ Management team reviews capacity for decision making and where a need is identified, meetings are arranged with residents and or next of kin to ascertain the least restrictive way to meet individual needs thus ensuring human rights are respected.
- ▶ Staff obtain consent prior to any assistance with all aspects of daily living, any residents that are resistive would be identified as requiring a urgent Dols (denial of liberty) referral and application made accordingly.
- ▶ All DNAR forms have been reviewed including the one identified at inspection. The home manager checks to ensure that the form is completed correctly by the GP and that the resident and or family are involved in any decision making.
- ▶ New catering staff have had mentoring with MHA trained staff as well as inductions at MHA sister homes. The Head of Hospitality has visited and worked with catering staff. Regular food forums and residents meetings are being held monthly with residents. Where produce quality doesn't meet the standards required, alternative suppliers are sought.
- ▶ A new three-week menu is currently in place. This has been formulated with residents' input from food forums and Managers meetings. Daily menus are sent to the floors with the day's choice on, although minimal any changes to the menu are communicated to residents at the earliest available time.

# Is the service caring?

## What did the CQC inspection tell us?

The service was caring

## Our plan of action

### Making the service caring

No actions necessary

# Is the service responsive?

## What did the CQC inspection tell us?

### The service was not consistently responsive

- ▶ People's needs had been assessed and the plans of care took account of how people wished to be supported. The lack of co-ordination amongst the staff at meals time meant people did not receive the support they needed.
- ▶ People were encouraged to maintain contact with family and friends. A range of activities of interest were organised for people and opportunities provided to observe their religious beliefs.
- ▶ Staff knew how to support people and took account of people's individual preferences in the delivery of care and responded quickly to any change of care needs.
- ▶ People were encouraged to make comments about the quality of service provided. Complaints were managed well and people felt confident that their concerns were listened to and acted upon.

## Our plan of action

### Making the service responsive

- ▶ The Manager and Deputy Manager are working with care staff to ensure that meal times are protected and organised, senior staff complete medication rounds after lunchtime to reduce the amount of interruptions to residents, and where possible professional visitors are advised to visit at alternative times.
- ▶ Residents who require assistance receive it promptly, taking their individual capabilities into consideration to ensure that their independence is promoted.

# Is the service well led?

## What did the CQC inspection tell us?

The service was well led

## Our plan of action

### Making the service well led

No action necessary