



LAURISTON

FINDINGS OF CQC VISIT

8 and 9 May 2019



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. There you will find the latest reviews about our homes that are posted on the independent website www.carehome.co.uk



Improving the quality of life for older people across the UK

Is the service safe?

What did the CQC inspection tell us?

The service was not always safe.

- ▶ Where people have been assessed at being high risk of developing pressure damage, preventative measures had been put in place but had not always been followed.
- ▶ Where residents had wounds, they had a folder that contained risk assessments, photographs and advice from the tissue viability nurse, however not all wounds had been documented and recorded.
- ▶ Where people lived with behaviours that may challenge, although staff were aware of certain triggers that causes these behaviours, they were not always recorded in the persons care plan and the behavioural charts lacked information.
- ▶ Some residents did not have access to call bells and they were not always provided in communal areas, meaning that people were not able to ask for assistance.
- ▶ Just in case medications had been prescribed, however there were no pain risk assessments or guidance for staff to follow.

Our plan of action

Making the service safe

- ▶ All residents identified as at high risk of pressure damage to have their waterlow score re-assessed.
- ▶ Care plans to identify preventative measures in place with checks to ensure that measures are actioned on a daily basis.
- ▶ All wounds to be documented in the residents individual wound files.
- ▶ Wound management to be monitored and signed off by the manager on a weekly basis.
- ▶ Training to be organised for all nursing staff on tissue viability.
- ▶ Care plans to include guidance for managing behaviours that challenge and to include triggers for the behaviours.
- ▶ Behaviour charts to be completed to monitor incidents, actions taken and guidance for the staff.
- ▶ Training to be provided to all nurses and seniors.
- ▶ All residents to have access to a call bell available in their bedroom and communal areas.
- ▶ Pendants to be obtained for residents as appropriate.
- ▶ Call bell audits to be completed on a weekly basis and reviewed by the Area Manager on a monthly basis.
- ▶ Pain assessments to be completed for all residents being administered analgesia.
- ▶ Effectiveness of analgesia must be monitored following administration and this is to be reviewed as part of the Area Manager visit.

Is the service effective?

What did the CQC inspection tell us?

The service was effective.

- ▶ Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.
- ▶ People's outcomes were consistently good, and people's feedback confirmed this.

Is the service caring?

What did the CQC inspection tell us?

The service was caring.

- ▶ Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.
- ▶ People were supported and treated with dignity and respect; and involved as partners in their care.

Is the service responsive?

What did the CQC inspection tell us?

The service was responsive.

- ▶ Responsive – this means we looked for evidence that the service met people's needs.
- ▶ People's needs were met through good organisation and delivery.

Is the service well led?

What did the CQC inspection tell us?

The service was not always well led.

- ▶ There was no clear leadership at Lauriston as there had been several short term managers since the last home manager left in September 2018.
- ▶ Quality assurance processes were in place but the systems had not identified some of the shortfalls that were found.
- ▶ Staff deployment did not ensure people received the care they needed in a timely manner.

Our plan of action

Making the service well led

- ▶ A Home Manager has been recruited and commenced in post on 10th June 2019.
- ▶ Home Manager to be supported through the induction period.
- ▶ Support to be provided from the Clinical Team.
- ▶ An action plan has been developed and will be reviewed monthly by the Area Manager and Quality Business Partner.
- ▶ The Quality Business Partner will be re-visit the home in six weeks to review progress of the actions.
- ▶ Allocations of staff to be completed on a daily basis and overseen by the Home Manager and/or Deputy Home Manager.
- ▶ Allocation sheet to include supervision of lounge and dining rooms. No staff to be allocated breaks during residents' meal times.