

Tales of the Un-Inspected
Home Number 45
By Eileen Chubb
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I Looked at the inspection history of.....Home Number 45, these are my findings.

Inspection Report Dated 16th of April 2008.

The report lists large extracts from a letter they (The Regulator) received praising the home for the care given to their relative.

My Comments, The above letter and the comments of 3 other relatives is listed on page two of the report and are followed by a whole page of what has improved since the last inspection.

The report states that the care home company encourages residents and relative to raise concerns within the home, however we have received a number of complaints where people feel issues are not always dealt with to their satisfaction.

My Comments, This complaints are not given the same prominence as the complimentary letter, detailed extracts of this positive letter were used but when it comes to details of the complaints these are not mentioned until further in the report. However the impression is given that the relatives who complained were unreasonable and that the care home had done something to address the concerns. I had to carefully read through the report to find any hint of what these concerns were.

The Report states, information we have received in the form of complaints and at safeguarding meetings suggest not all individual needs are being met as planned. We talked to people on our visit who said their needs were met and we looked at documentation that said needs were met.

My Comments, A general reference to needs not being met can be anything from someone not having a cup of tea at the preferred time, to someone dying in agony from infected bedsores. However the reference to the complaints and the investigation carried out by the inspectors

consists of 9 lines. The investigation consists of talking to some residents (No mention of how many) who said their needs were met, and looking at some relevant documentation (No Mention of what) and stating needs were being met. (No Mention of how many peoples documentation) out of the 168 residents in the home.

The main concern of the inspectors is to trivialize and discredit the concerns. However on the same page that gave just 9 lines to these complaints is a further extract from the complimentary letter, 16 lines in total.

The Report states, a doctor visiting the home told the inspector that individuals coming into the home had different needs to what he had expected, we spoke to the manager who assured us the home could meet needs but stated that they do not always have a true picture of what needs are.

My Comments, This is a direct contradiction, if I had read no further than the complimentary letter of previous pages, I as a member of the public would have believed that the home was wonderful and those complaints made had been found to be untrue.

The report states, there are not always enough staff with expertise to fully meet the needs of residents, the care home told us they have comprehensive policies and procedures.

My Comments, A page is quoted from the AQAA and is listed under evidence, this all sounds wonderful apart from the fact it is not true as following this is the observation of the inspectors that a staff member nearly dropped a resident from a hoist as the sling had not been positioned correctly (This company has a long history of fatalities in other of its homes) the inspectors accept the unit manager telling staff the correct way to use a hoist.

The Report states that the staff receives good training and the evidence is the care homes AQAA which states this is so.

My Comments, Included in this excellent training is moving and handling. This is a direct contradiction of what the inspectors saw when staff nearly dropped a resident. Yet this incident is merely noted and ignored when it comes to grading the home according to evidence that is

the word of the care home in the AQAA.

The report states, we observed staff interactions with residents were excellent.

My Comments, This is taken from the same paragraph where it is noted someone nearly fell out of a sling. Also when an inspector is watching staff what are they expecting a true picture?

The report states that the company has robust medication policies and the inspectors look at the audits carried out by the home.

My Comments, Audits should be carried out by the regulators, it is complacency to take the homes audits as evidence that drugs are in order.

The Report states two care plans were examined and one found to have derogatory language.

My Comments, now they state how many care plans are looked at which was not done when investigating the complaints received. The derogatory finding I would agree with as someone who needs staff to talk to them is described as demanding attention. That is evidence of attitudes to care needs.

The report states, Do not resuscitate orders needed more attention as it did not fully comply,

My Comments, The healthcare professionals and nursing staff had all fully documented the reason for this residents DNR, however the small detail that did not comply with the protocols was the person not to be resuscitated needed to be informed.

The report states, during discussions with visiting healthcare professionals it came to our attention that the homes nursing staff do not have up to date clinical skills and wound management is an area for improvement.

My Comments, It is a very dangerous situation where nursing staff are found to need training in such an area.

The Report states that the tissue viability nurse now visit's the home as advice was previously given over the phone.

My Comments, Nurses found not to have the required level of clinical expertise, and residents with bedsores being attended to by these nurses whilst instructions are given over the phone. This circumstances are not listed together and the impact of the both is never considered as a chain of events that could lead to terrible suffering for those in their care. The report states that the care home is trying to improve this by using the nursing staff from the PCT to train the homes staff. What a shame the PCT did not check the homes fitness before giving this home a contract to take people coming out of hospital for assessments.

The reports states, we spoke to three healthcare professionals involved with placing people in the home for assessment, on the whole feelings were needs were being met but the following thoughts and concerns were raised with us,, that there were insufficient staffing to allow time to assess people and the home is taking people who should not be admitted.

My Comments, This home has a contract with the PCT to take people from hospital and assess their needs, the staff from the PCT tells the inspectors the home does not have sufficient staff to assess needs but on the whole all is ok. This seems to have escaped the regulator but if the home is not assessing needs it is not doing the one thing it is being paid to do under this public contract.

The report states, we saw medication being administered and noted one residents did not get their pain relief prescribed for 9am until midday as the nurse was very busy.

My Comments, These are residents coming out of hospital as well as those assessed as needing round the clock nursing care, what is happening is the clock is going round whilst people are waiting for nursing care. The importance of Pain relief cannot be stressed enough, anyone who has ever felt real pain knows the impact on quality of life, to lay and wait for hours for someone to bring you pain relief is not something that should be happening in a nursing home, and it is not something that should be happening in a civilized country.

The report states, We raised the issue of staff shortages and the medication

with the management and they said there was two nurse on usually but one had gone sick, normally it is only weekends when there is one nurse on that unit as staff from the PCT do not visit at weekends so only one nurse is needed.

My Comments, This paragraph in the report tells me a number of things, firstly residents are for example waiting hours for pain relief and it is due to there being one nurse and not two. Secondly this is a permanent situation every weekend. Thirdly that at weekends staff from the PCT are not in the home, so the home is not required to pretend it is giving the care needed. Lastly that the price of this is that residents are routinely left without basic care because no one is looking.

There are many other concerns, such as the AQAA saying how marvelous the homes activities are and saying the evidence is in press coverage of the activities as the documentation is scant. There are concerns raised to the regulator about the poor attitude of senior staff in the home, poor care, lack of (Attention to nutritional needs) lack of food that means, and other serious concerns, all referred back to the home to investigate themselves. I know there is nowhere for people to go when a care home has failed them, CQC are a joke and people have gone to them desperate for help because the home has ignored their concerns and the home is put in charge of the investigation. That is not redress that is a slap in the face.

31 Grades are judged, of which, 23 meet the requirements in full. 7 almost meet the requirements, 1 is a major shortfall. The home is graded 1 STAR ADAQUATE.

Inspection Report Dated, 16th of March 2009.
(11 Months Later)

The report states, people were admitted without sufficient information about their needs on the intermediate care unit. One resident was found to not be given her medication on time; some medications for people had run out.

My Comments, The inspectors presumed medication had run out and was not just missing, they did no audit just looked at the company's audits and took their word. Whilst the inspectors note that people were not getting medication in time and this was a statutory requirement

made in the last inspection, the attitude of the inspectors is best summed up on page 32 of 35. The question is asked, are there any outstanding statutory requirements from the last inspection? The answer is No. That is not true but most people do not delve beyond the web of deceit that the regulator calls an inspection and the care provider uses as a shield.

THE EVIDENCE,

- 1. The AQAA is the main source of evidence and large parts of it are used in the body of the report.**
- 2. There are positive comments listed from residents and relatives, but how many surveys were sent out or how many returned is not mentioned at all.**
- 3. The fact that people have given up raising concerns outside the home is relied on to presume that, either there are no concerns or they are being dealt with by the home. Complaining outside the home has been contained.**
- 4. When a regulator says they looked at care plans but fails to say how many something is wrong.**
- 5. There is confusion about the needs of residents coming in to be assessed still but whilst this is noted the question how can the home assess the needs of people when even basic information is not known, is not considered at all.**
- 6. All audits carried out by the home are accepted.**
- 7. Scanty evidence of the activities taking place, but the home is asked to improve the evidence, it is not asked to improve the activities.**

Finally one of the comments from staff was that, there are many of the people on the unit who have individual needs. What did the rest of the people have?

The Home is graded 2 STAR GOOD and as such may not be inspected again for years.

Eileen Chubb