

Tales of the Un-inspected
Home Number 64
By Eileen Chubb
(This Report Is the Copyright of Eileen Chubb)

I looked at the inspection history of.....Home Number 64, there are my findings,

This Home is owned by the same company as homes, 33,36,41,48,49,50,54,59,60,62,63. (See Archive section for all reports)

REGULATORS INSPECTION REPORT DATED 3RD OF JULY 2007.

THE REPORT. GENERAL. Most staff has received training in adult protection. The home now informs the authorities of safeguarding issues. References must be obtained before staff commences employment. People must not have their money withheld from them.

My Comments, This home has a past history of problems.

THE REPORT, CHOICE OF HOME, We consider this area Adequate. The needs of some people who move into the home have not been adequately assessed so their needs may not be fully met. The home had recorded little or no information about the mental health care needs of people with dementia. One resident who needed nursing care was assessed as needing personal care. Also another resident who needed nursing care was assessed as needing personal care.

My Comments, The starting point of any inspection is to assess if needs are being met, if needs are not being recorded how can that be judged? This home is registered to care for ONE person with dementia so it is in breach of its conditions of registration. As for those residents placed in the wrong care setting it means they will have been neglected.

THE REPORT, HEALTHCARE. We looked at three care plans. The first for a resident wrongly assessed on admittance who needed nursing care, this resident had a pressure sore and was at high risk of developing more, after being reassessed for nursing care staff requested a pressure relieving mattress as it was not requested earlier. One care plan was in order and the

third care plan was for a resident on the personal care unit whose health needs were increasing. Most needs were identified but what was being done to meet them was not recorded. For example no risk assessments for swallowing difficulties or diabetes. There were identified to be at high risk of pressure sores a year ago but this was only entered in the care plan a few days prior to the inspection. This person had developed two pressure sores because staff had not obtained a special pressure relieving mattress. Since the last inspection the PCT have appointed a GP to visit the home at regular intervals but residents have their own GPs also.

My Comments, Three care plans and two is a shambles, the suffering involved for residents was totally avoidable. The inspectors do not want to make the home look too bad so the highly relevant information that the homes manager lent another care home the two pressure relieving mattresses it had on site is hidden away at the back of the report under a section where it will not reflect so badly on the manager.

THE REPORT ACTIVITIES, This area is good, the activities organizer has worked at the home nine years, and relatives commented how good the activities organizer was.

My Comments, Credit where it is due the activities organizer is doing the best she can, I will judge how the company rewards staff who are good at their jobs in a later section.

THE REPORT, COMPLAINTS, Only two complaints have been received by the home. The home has a robust complaints policy.

THE REPORT, STAFF AND MANAGEMENT, There is a moderate turnover of staff, the manager has worked in the home some time and staff spoken to said she was approachable. New staff files were checked, and one had received a bad reference which was not followed up on. The manager was away recently and the senior company manager who visit's the home monthly did not report this to us as required. Residents were not receiving their personal allowances still.

My Comments, This is a home where concerns are not acted on and the company fails to report incidents as required. The report is pre star rating. 23 standards are judged, 14 are met, 7 almost met, 1 exceeded, and 1 major shortfall.

Requirements are made on, Staff recruitment procedures, Residents correctly assessed, residents having access to their money, and appropriate equipment.

REGULATORS INSPECTION REPORT DATED 10TH OF APRIL 2008.

(9 Months Later)

THE REPORT, STAFFING, This area is adequate, although recruitment procedures are robust there may not be sufficient staff and training to ensure needs are met. A staff member told us there had not been enough staff in the last six months. Staff had to continually work long hours. Two relatives spoken to felt resident's physical needs were not met as not enough staff. The home provided records of training but staff spoken to say they were not supported to undertake training. Staff morale is very low and management has taken little action to address this. The relationship between the manager and staff is not good and several staff has left.

My Comments, When you put all the information together it sounds terrible, however as with all inspection reports I had to delve throughout the report to find all of the above information. The information tells me there are serious problems in this home and urgent action needs to be taken. However this is all considered to be minor when it comes grading this area.

THE REPORT, ACTIVITIES, There was little evidence of any activities other than two televisions on. Staff told us there had been little going on as the activities organizer was having working as a carer.

My Comments, The activities organizer is not permitted to do the job she had done so well up to now. This section is scored a minor shortfall. When there are no activities or the hope of any surely that's anything but a minor shortfall.

THE REPORT, COMPLAINTS AND MANAGEMENT. Concerns have been raised about the home by relatives and staff and there is nothing to show how they have been dealt with. There are robust procedures in place on complaints and safeguarding. Recently two complaints were made directly to us the regulator but only one was recorded by the home. During the inspection a visitor told us, I would not feel confident taking a concern to

the manager. Three allegations regarding care staff have been referred to Social services in the last few weeks. The procedures to be followed regarding allegations of abuse were not followed by the home and this has left residents at risk of abuse. The area of complaints is adequate. The management is adequate. The manager is not running the home in the best interests of the residents. We received information from nine staff in the home and all expressed serious concerns about the management. The staff told us the manager rarely leaves the office, was often absent and was unapproachable. Senior staff who ran the home in the manager's absence said they received no support from senior managers in the company. Monthly visits to the home by senior managers of the company did not report on these issues as required by regulations. Staff said they had infrequent meetings and no minutes were kept of either staff or residents meetings that had been held.

My Comments, This Company should be ashamed to treat good staff in such a shabby way. The regulator can note all of the above and do nothing. There are many things I would call this care home but ADEQUATE is not one of them.

The Home is rated 1 STAR ADEQUATE.

REGULATORS INSPECTION REPORT DATED 1ST OF APRIL 2009.
(One Year Later)

THE REPORT, HEALTHCARE, This area is good. The home needs to carry out more detailed assessments before people are admitted to the home. Management of medication has improved. We visited the home in March and approved the homes application to care for more residents with dementia.

My Comments, The home failed to care for the one resident with Dementia it was previously registered to care for. The home was found to have admitted many residents with Dementia in breach of its registration conditions and in spite of staff telling inspectors they were not trained to care for residents with dementia, the inspectors approve the homes application to have twenty four of the most vulnerable residents instead of the previous one person. Incredibly the inspectors note the homes manager carried out two assessments of residents admitted to the home and in spite of both people having a diagnosis of

dementia the manager failed to record any information on this at all. Yet they approve this home as fit.

THE REPORT ACTIVITIES, ACTIVITIES, This area is adequate, There were little activities taking place daily. People in the home are likely at risk of social isolation and care staff has little knowledge of resident's mental and emotional needs.

My Comments, Why did the inspectors note this and approve the homes application to admit residents with needs that could not be met?

THE REPORT STAFFING, This area is good. Staffing levels were good on the day of the inspection. Training is not up to date and there has been little improvement since our last inspection. The Company told us new staff was being recruited for the new unit. The company told us more staff were trained than those indicated by the documentation. We looked at two new staff files one was in order but the second had a reference that was not satisfactory and there was no explanation why this was not followed up. Residents are not fully protected.

My Comments, Very few people other than a CQC inspector would consider any of the above to be good. Other than the word of the home and contradictory evidence there is little evidence to support the inspector's presumptions. The inspectors are told that staff gives up their days off to take residents to hospital appointments but fail to see this as evidence that the home has insufficient staff to care for residents, or that staff are being exploited by the company. What would happen if a resident suffered injuries whilst outside the home with a member of staff not on duty?

THE REPORT, COMPLAINTS, MANAGEMENT. The area of complaints is good, there have been few complaints recorded in the last year and those that have been recorded have been investigated, which indicates improvement.

Management is good, the manager was absent during the inspection but one member of staff said the manager was very good.

My Comments, when a home has a previous history of not recording complaints, to presume there has been improvement you cannot presume few complaints recorded, means few complaints have been

made.

As for the same dire manager now being good, the inspectors should have spoken to the numerous staff members they spoke to last time. The matter of not assessing residents correctly and employing staff with unsuitable references is not my idea of good. The inspector is told that the manager has sent a survey to all staff for their views but could not actually produce any presumably because they were not favorably. The staff told the inspectors at the previous inspection that the manager was not good and was often absent, even though inspectors found her to be absent on this inspection they fail to see its significance.

The report says there are no outstanding requirements which a total travesty is given the shortfalls that were noted and previous requirements made on exactly the same issues again and again.

The home is now graded 2 STAR GOOD.

I suggest the following when looking at how CQC rates homes,

CQC 1 Star Rating=Almost fit for human habitation.

CQC 2 STAR Rating=Fit for human habitation

CQC 3 STAR Rating= we don't know but were in a good mood.