

Random inspection report

Care homes for adults (18-65 years)

Name:	Parkside Health Care Ltd
Address:	1a Tibbington Terrace Parkside Tipton West Midlands DY4 9HJ

The quality rating for this care home is:	zero star poor service
The rating was made on:	15/06/2010

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

Lead inspector:	Date:							
Karen Thompson	0	5	0	8	2	0	1	0

Information about the care home

Name of care home:	Parkside Health Care Ltd
Address:	1a Tibbington Terrace Parkside Tipton West Midlands DY4 9HJ
Telephone number:	01709565822
Fax number:	
Email address:	
Provider web address:	

Name of registered provider(s):	Parkside Health Care Limited
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	20

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
mental disorder, excluding learning disability or dementia	20	0

Conditions of registration:									
The maximum number of service users to be accommodated is 20.									
The registered person may provide the following category of service only: Care Home with Nursing (Code N) To service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Mental Disorder (MD) 20									
Date of last inspection	3	0	1	0	2	0	0	8	
Brief description of the care home									

What we found:

Two inspectors of which one was a specialist pharmacist inspector, visited the home on 5 August 2010 to assess compliance with requirements made following our key inspection of 15 June 2010. We are aware that commissioners for the service have suspended placements at the home. This means that no new people are being placed at the home by the commissioners and they are carrying out their own checks as to the quality of the service provided. We were unable to check compliance with three requirements previously made. The first one was in relation to the pre-admission process and there have been no new people admitted to the home since June 2010. The second one was in relation to complaints and the home has received no new complaints since June 2010. The third one was in relation to staff recruitment and whilst recruitment has been taking place new staff are not due to start working in the home till mid August. The fourth requirement we have carried over is in relation to a bank account being specifically designated for people living in the home. We have been informed an application has been submitted to a bank and the organisation is waiting for this to be processed.

The pharmacist inspector visited the home on 5th August 2010 to check the management and control of medicines. The purpose of this inspection was to check compliance with requirements relating to medicines. We looked at medication storage and one person's medicine records and care plan.

We found that there was good documentation and recording of medicine records. We looked at the medication administration record (MAR) chart for one person who was prescribed 18 different medicines. We found that the MAR chart was documented with a signature for administration or a reason was recorded if medication was not given. We saw that the times of administering medicines were clearly highlighted on the MAR chart. We saw that staff documented the quantity of tablets given when the directions stated to give one or two tablets. We saw that the receipt of all the medicines was recorded including any balances brought forward from an old MAR chart. We checked all 18 medicines and our checks showed that the person had been given their medicines as prescribed. This means that there were arrangements in place to ensure that medication is administered as directed by the prescriber to the person it was prescribed, labeled and supplied for.

We saw that the person was prescribed a medicine to be given when required or if necessary for agitation. We saw a document dated 24th June 2010 which informed staff under what specific circumstances this medicine should be given to the person. We saw clear supporting information to ensure that all necessary calming techniques were used before the medicine needed to be given. This means that the staff were supported with guidance to ensure the person was looked after in a calm and supportive environment.

We looked at the medicine storage of peoples medicines. We saw that medicines were stored neatly and tidily, which made it easy to locate peoples medicines. We found only the required medicines were available to give. Any medicine no longer required was disposed of. This means that the home was ensuring that medicines for people were handled safely.

We found that there had been improvements in the management of medicines to ensure

that medicines are given to people safely and as prescribed. We gave feedback to the Manager and explained that the service had complied with all of the requirements relating to medicines.

We looked at how people's needs are assessed and reassessed during or following a change in needs. We looked at one person's care records, they had recently had a change in needs. The home was able to demonstrate via written records that they had taken the appropriate action to meet these needs. The home was also able to demonstrate that the care plan for this person met the standard. The records also demonstrated that people living at the home and their representatives were being involved and kept informed of changes. Thus the requirements in relation to assessment and care planning have been removed.

The home was able to evidence that both the lift and hoists in the home had had a thorough examination carried out. A thorough examination is required of lifting equipment to ensure they are safe for use.

Procedures in relation to safeguarding of people living in the home were observed to be being followed. Safeguarding procedures protect and promote the rights of people living in the home.

The organisation has written to us asking permission for Criminal Record Bureau (CRB) disclosure to be kept off site. The Commission needs to consider this application.

What the care home does well:

The organisation since our visit of June 2010 has worked hard to ensure that people living in this home have their health and well being protected and promoted. There have been improvements in a number of areas.

What they could do better:

Record keeping in relation to pre-admission assessment, complaints and recruitment was not assessed at this visit, therefore we can not draw a conclusion as to whether the home meets the standard in these areas. However as stated above there are valid reasons for this and the home has met the other requirements made at the June 2010 inspection.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes



No



Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
1	2	14	<p>The home must make sure that people's pre admission assessments are a reflection of peoples current needs</p> <p>They should do this so that peoples needs are recognised by the home and so people can feel confident their needs will be met.</p>	30/07/2010
2	22	22	<p>All complaints should be logged and fully investigated in a timely manner and the home must have a retrievable audit trail.</p> <p>This will ensure that people concerns are listened to and responded to appropriately.</p>	31/07/2010
3	34	17	<p>The home must make sure that staff allowed to work in the home whilst awaiting a satisfactory CRB and only have an ISA first check have a written risk assessment completed and a copy of this risk assessment is kept in the staff members file.</p> <p>This will demonstrate how the home intends to protect the people living in the home when staff start work without all the required safety checks</p>	31/07/2010

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
			in place	
4	37	20	<p>The home must set up a bank account specifically identified for use of people living in the home.</p> <p>To ensure that money belonging to people living in the home is not regarded as a company asset.</p>	23/07/2010

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations

Reader Information

Document Purpose:	Inspection Report
Author:	Care Quality Commission
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Adults (18-65 years) can be found at www.dh.gov.uk or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

© Care Quality Commission 2010

This publication may be reproduced in whole or in part in any format or medium for non-commercial purposes, provided that it is reproduced accurately and not used in a derogatory manner or in a misleading context. The source should be acknowledged, by showing the publication title and © Care Quality Commission 2010.