Random inspection report

Care homes for older people

Name:	Hillsborough Residential Home
Address:	Southern Road Callington Cornwall PL17 7ER

The quality rating for this care home is:	two star good service
The rating was made on:	

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:**							
Mandy Norton	1	5	0	7	2	0	1	0

Information about the care home

Name of care home:	Hillsborough Residential Home
Address:	Southern Road Callington Cornwall PL17 7ER
Telephone number:	01579383138
Fax number:	01579383621
Email address:	hillsborough@tiscali.co.uk
Provider web address:	

Name of registered provider(s):	Hillsborough Residential Home Ltd
Name of registered manager (if applicable)	
Mrs Eileen Marie Danvers	
Type of registration:	care home
Number of places registered:	22

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	22

Conditions of registration:
The maximum number of service users who can be accommodated is 22.
The registered person may provide the following category of service only: Care home only - Code PC to service users of either gender whose primary care needs on admission to the home are within the following category: Old age, not falling within any other category (Code OP)

Date of last inspection	2	4	0	3	2	0	1	0

Brief description of the care home
Hillsborough Residential Home is a converted property on the outskirts of Callington. Care is provided to a maximum of 22 people of either gender who require personal care only. The accommodation is on 2 floors with access to the first floor via 2 stair-lifts.

Brief description of the care home
Communal space consists of a dining room and 2 lounges all on the ground floor. People have access to the mature gardens, where seating is provided. The provider/manager has owned and run the home for many years and likes to provide care in a friendly and homely environment. A variety of social and recreational activities are available. The food is home cooked and locally sourced with choices for each meal time. The current fees levels are available from the provider/ manager. Each person is issued with a contract once a settling in period has been achieved.

What we found:

This was an unannounced random inspection, which took place over 2 hours and 40 minutes on the 15th July 2010. For the purpose of this inspection the term 'we' will be used when referring to the Care Quality Commission. The inspection was carried out as a result of a safeguarding alert (June 2010) and to follow up on recommendations made following a random inspection carried out in March 2010, due to concerns being raised about the home looking after people out of their category of registration.

We found that written pre admission assessments were not routinely carried out on people already known to the home usually because they already have services from the Domiciliary Care Agency that is run from the home. The owner/manager added that they 'routinely make a visit to prospective clients to gather information before admission'. She said that referrals from the RATS (rapid admission team) will include a verbal and written assessment done by the healthcare professional referring the client to them.

We found that the care plans did not include tissue viability assessments or nutritional assessments. There is a lot of information about each person but it is documented in numerous places and therefore it is hard to identify what exact care and support needs each person has. Health professionals visits made are recorded in each persons individual diary and are not easily tracked and and a persons weight is recorded in the back of the diary in an ad hoc way.

We found that creams/lotions are often applied to people but they are not prescribed for an individual person, the care plan does not say where they are to be applied and because they are not prescribed they are not on the medication administration record (MAR) sheet and cannot be signed for.

We found that health care professionals are not always asked to assess people in a timely manner and that dressings have been applied and pressure relieving equipment provided that may not be suitable to meet a persons needs. The owner/manager pointed out that they do make requests for the District Nurses to visit in a timely manner but that there is sometimes a delay in the visit happening and the nurses do not always have the right dressings with them which can cause further delay. She added that they have used a mattress that may not be suitable for a client in the past due to the breakdown of the one provided by the professionals.

We were told that meals that needed to be pureed (blended) do not currently have each item separately pureed to retain colour and interest in the meal.

What the care home does well:

The home provides a caring, homely and comfortable environment for people to live in. The owner/manager has a system in place now for recording the meals that each person is eating. The staff have started making improvements to the care plans but this needs to be escalated.

A photograph of each person is now included with the MAR sheets.

What they could do better:

Everybody admitted to the home regardless of whether they are known to the home or not must have a pre admission assessment carried out. So that the owner/manager can be sure that the home can meet their needs and plan who else needs to be involved in the persons care once they are admitted to the home.

The care plans must be more detailed and logical to ensure that staff are able to use them to provide the required care and support to each individual. They must include a tissue viability and nutritional assessment. They must include a detailed life and social history to enable the group and individual activities to be tailored to meet peoples diverse needs.

All creams and lotions applied must be prescribed for each individual, the care plan must include instructions about where it is to be applied and how often and once applied the MAR sheet must be signed.

Any breakdown or discolouration in skin surfaces must be reported to the GP/Community Nursing Service as soon as it is noticed.

Any meals that need to be pureed should puree each individual item so that it still looks like a meal on the plate. This will make the meal look more attractive and people will be able to recognise what they are tasting.

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

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
1	3	14	The provider/manager must ensure that every potential Service User has a pre admission assessment carried out prior to admission to the home. This is to ensure that the home can meet the persons needs and have access to all of the appropriate equipment and health care support that may be required and to reduce the risk of somebody having to move to another home if Hillsborough cannot meet their needs.	31/08/2010
2	7	15	The registered provider/manager must ensure that the care plans reflect a persons current individual needs and include a tissue viability assessment, a nutritional assessment and a life/social history. They must be more logical and all information about a persons care and support needs should be kept in one folder.	31/08/2010

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
			This will enable staff to care for each person using the most up to date information about them and then record information about their ongoing welfare on a daily basis.	
3	8	13	The provider/manager must ensure that any broken or discoloured skin surfaces are reported to the GP/Community Nursing Service as soon as it is noticed. This will mean that the staff get the support and equipment they need in order to care for the individual in an appropriate manner.	31/08/2010
4	9	13	The provider/manager must ensure that all creams and lotions applied to an individual are prescribed. The care plan must describe where to apply the cream and how often and the MAR sheet must be signed once it has been applied. This will mean that procedures are correctly followed and medication is administered safely.	31/08/2010

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
1	15	The provider/manager should ensure that meals that need to be pureed are presented in a manner which is attractive and appealing in terms of texture, flavour and appearance, in order to maintain appetite and nutrition.

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 Older People 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

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