

Random inspection report

Care homes for older people

Name:	Priscilla Wakefield House
Address:	Priscilla Wakefield House Rangemoor Road Tottenham London N15 4PL

The quality rating for this care home is:	two star good service
The rating was made on:	19/03/2009

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:							
Margaret Flaws	2	6	0	3	2	0	1	0

Information about the care home

Name of care home:	Priscilla Wakefield House
Address:	Priscilla Wakefield House Rangemoor Road Tottenham London N15 4PL
Telephone number:	02088087196
Fax number:	02088852481
Email address:	reception@precious-homes.com
Provider web address:	

Name of registered provider(s):	Flagswan Two Ltd
Name of registered manager (if applicable)	
Alexis Josephine Sally Wood	
Type of registration:	care home
Number of places registered:	112

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	18	39
dementia	80	80
learning disability	23	0
old age, not falling within any other category	0	24
old age, not falling within any other category	0	24
physical disability	8	8
physical disability	8	0

Conditions of registration:
The maximum number of service users who can be accommodated is :112
The maximum number of service users who can be accommodated is :112

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: Physical disability - Code PD (maximum number of places: 8) Dementia - Code DE (maximum number of places: 18) Dementia , over 65 years of age - Code DE(E) (maximum number of places: 39) Old Age, not falling within any other category - Code OP (maximum number of places: 24) Learning disability - Code LD (maximum number of places: 23)

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: Physical disability - Code PD, Dementia - Code DE, Old Age, not falling within any other category - Code OP

Date of last inspection

0	5	1	0	2	0	0	9
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Brief description of the care home

Priscilla Wakefield House is a large, newly built Nursing Home with 112 places for people with dementia (including early onset dementia) and physical disabilities. The majority of places are for Older People. There are three floors, which contain different specialist units. As the home is relatively new only two floors at present are occupied. The building and environment have been built to an excellent standard and all bedrooms have en-suite facilities. There are a number of lounges and dining areas in each unit as well as outside terraces and gardens. The home has been very well designed. Priscilla Wakefield House has the equipment and facilities required to meet the needs of the people using the service. The stated aims of the home are, 'To help service users remain in control of their lives as far as possible and thus, to maintain their personhood through Person Centred Care'. The home is situated in Tottenham, North London and although there is limited parking the home is near to local bus services and the Victoria Line Underground station. The range of fees are between five hundred and one thousand and five hundred pounds per week.

What we found:

This random inspection was carried out on 26 March 2010. The home is currently subject to a Serious Case Review following the death of a resident in February 2010. A Coroner's Inquest will be held in August 2010. The London Boroughs of Haringey and Islington have suspended admissions to the home while investigations are taking place.

The purpose of this random inspection was check on the safety of people in the home in relation to the availability of food and drink, fluid management and accessibility of the nurse call bells. These issues were identified as concerns by social workers from the London Borough of Haringey.

A further key inspection was also planned to follow up on outstanding requirements from previous inspections.

This random inspection took place over three and half hours. The Registered Manager was on leave at the time and the Deputy Nurse Manager assisted with the inspection. On this inspection, we toured two units, the first floor dementia unit, Dorrit and the second floor nursing care unit. We sampled care files, talked to seven residents, one relative and to three nursing staff members. We also spoke by telephone to the Registered Manager when she returned from leave.

At the time of the inspection, there were 19 residents on Dorrit Unit, 13 residents on the nursing unit and a total of 67 residents in the home.

We sampled three care files on Dorrit Unit and three files on Copperfield unit to check fluid and nutritional intake charts. These were in place and up to date. There were good risk assessments that identified steps to be taken for residents with hydration or nutritional concerns and steps taken were documented and signed off. Risk assessments were in place and subsequent risk management steps had been taken for a resident identified at risk of self harm. Weight charts were also in place for residents identified at risk of weight loss.

We toured both units and observed hot and cold drinks being provided for the residents. We also saw some residents being assisted to drink. Staff told us that fluid charts are usually filled in by the carers who provide the drinks.

We spoke to one resident and her relative. Both told us that they were generally happy with the quality of care in home, that food and drink was reasonable and that the staff were responsive. Another resident we spoke said that they were generally well cared for in the home, and that their needs were met. Other residents told us that staff understood and responded to their needs.

We spoke to two other residents who told us that they were unhappy being in the home and that it wasn't where they wanted to be.

We looked at the accessibility of the call bells to the residents on both floors. These were seen to be kept within reach of the residents. Residents told us that they knew how to call the staff and that they were responsive. In one case, an alternative bell was provided

in response to a risk assessment.

We looked at the records of communication with the GP surgery. These included faxes requesting visits and requests for prescriptions. The Registered Manager told us that the home has had difficulty finding a GP practice that will provide the level of input that the home needs. This led, over a period of nine days in late 2009, to the home being without GP cover. Following this period, the CQC Pharmacist Inspector did a random inspection to check on access to medication for residents. He found that cover had been appropriately restored. Staff told us that the home has good access to Camidoc out of hours doctors.

The Registered Manager told us that the current contract with the GP surgery allows for one scheduled visit by the GP per week, to increase in frequency as the occupancy rate increases. She told us that she is meeting with the PCT to discuss increasing GP services in the coming week. The Registered Manager also expressed concern that prescribed nutritional supplement drinks, such as Ensure, were only available to residents who had a low Body Mass Index (BMI) of 18.5. A requirement is given that the home review its GP services for residents to ensure that an appropriate and timely level of medical input is available as and when needed. This review should include a review of access to prescribed food supplements.

The Registered Manager told us that four new nurses had recently been recruited to the home which will enable the home to reduce agency use. The staffing level appeared reasonable for people's needs on this inspection (covering several hours in the late afternoon and early evening).

Following this inspection visit, further concerns have been raised concerning the care of residents, particularly in relation to medication arrangements. A full key inspection will be carried out soon.

What the care home does well:

The home is in a purpose built new building, with a high quality environment provided for residents.

What they could do better:

A requirement is given that the home review its GP services for residents to ensure that an appropriate and timely level of medical input is available as and when needed. This should include a review of access to prescribed food supplements.

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	9	13	<p>The registered person must ensure that medication policies and procedures are accurate and complete.</p> <p>This is to ensure that people who use the service are protected by the home's policies and procedures regarding medication.</p>	19/06/2009
2	9	13	<p>The registered person must ensure that medication records are complete and accurate.</p> <p>This is required to ensure to the auditable control of medication at the home.</p>	06/04/2009
3	20	13	<p>Medication with the expiry limited when in-use require record to indicate the expiry.</p> <p>To ensure the therapeutic viability when in use.</p>	26/10/2009
4	20	13	<p>Medicine administration records are required to be accurate, complete and accountable with full information provided.</p> <p>To ensure that medicines are handled safely and administered to the home's</p>	05/11/2009

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
			service users, as prescribed.	
5	20	13	<p>Medicines are required to be stored in accordance with labelled directions.</p> <p>To ensure the therapeutic viability.</p>	26/10/2009
6	35	13	<p>The registered person must ensure there is a clear record for each resident of how they manage their personal finances and that where support is needed systems must be in place that have been agreed with the most appropriate care professional. Any risk management issues must be discussed with care professionals as needed and a plan agreed</p> <p>This is to ensure that residents at the home are protected from possible financial abuse</p>	01/05/2009
7	35	24	<p>The registered person must ensure that formal quality monitoring reviews take place on a regular basis and residents and other stakeholders are asked about their views of the service.</p> <p>This is to ensure that residents and other stakeholders can see how well the home is doing to meet the aims and objectives of the service.</p>	01/07/2009

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	8	13	<p>The Registered Person's should ensure that the home review its GP services for residents to ensure that an appropriate and timely level of medical input is available as and when needed. This should include a review of access to prescribed food supplements.</p> <p>Access to medical care should be appropriate to people's needs and available when required.</p>	31/05/2010

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

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

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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