



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for older people

<b>Name:</b>	Portelet House Residential Care Home
<b>Address:</b>	22 Grand Avenue Southbourne Bournemouth Dorset BH6 3SY

The quality rating for this care home is:

two star good service

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 assessment of the service. We call this a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Tracey Cockburn	2   6   0   2   2   0   0   9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

**Outcome area (for example Choice of home)**

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people staying in this care home experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

Copies of the National Minimum Standards – Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought 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](http://www.tso.co.uk/bookshop)

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- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

## Reader Information

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## Information about the care home

Name of care home:	Portelet House Residential Care Home
Address:	22 Grand Avenue Southbourne Bournemouth Dorset BH6 3SY
Telephone number:	01202422005
Fax number:	01202433362
Email address:	portelet@gmail.com
Provider web address:	

Name of registered provider(s):	Portelet Care Limited
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Type of registration:	care home
Number of places registered:	14

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	0	14
mental disorder, excluding learning disability or dementia	0	14
Additional conditions:		
In addition to registered places a day care service of up to 7 hours per day may be provided for one person in the categories MD(E) DE(E).		

Date of last inspection								
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Brief description of the care home
Portelet House is a care home for up to 14 older people with dementia or mental disorders over sixty five years of age who also have need of personal care. The home also offers respite care and day care. Portelet House is part of Portelet Care Ltd. The Proprietors are Jean Alain Henri Moccarme and David Lallana. Mr Moccarme takes an active role in the running of Portelet House and is registered as the manager. Portelet House is located in the centre of the Southbourne area of Bournemouth. It is a short walk to the cliff top, sea views and also to the shops and local community facilities.

### Brief description of the care home

Portelet House is a double fronted detached converted property. There is a paved area to the front of the house and off street parking is available. At the rear of the home there is an enclosed courtyard garden. Service user accommodation is over 3 floors with a 2-person passenger lift that enables easy access around the home. There are 10 single rooms and 2 double rooms available. Eight of the single rooms and both double rooms have en suite facilities. The home has a comfortable lounge, adjoining dining area and conservatory, overlooking the rear garden. Current fees are 485 to 550 pounds per week. See the following website for further guidance on fees and contracts [www.offt.org.uk](http://www.offt.org.uk)

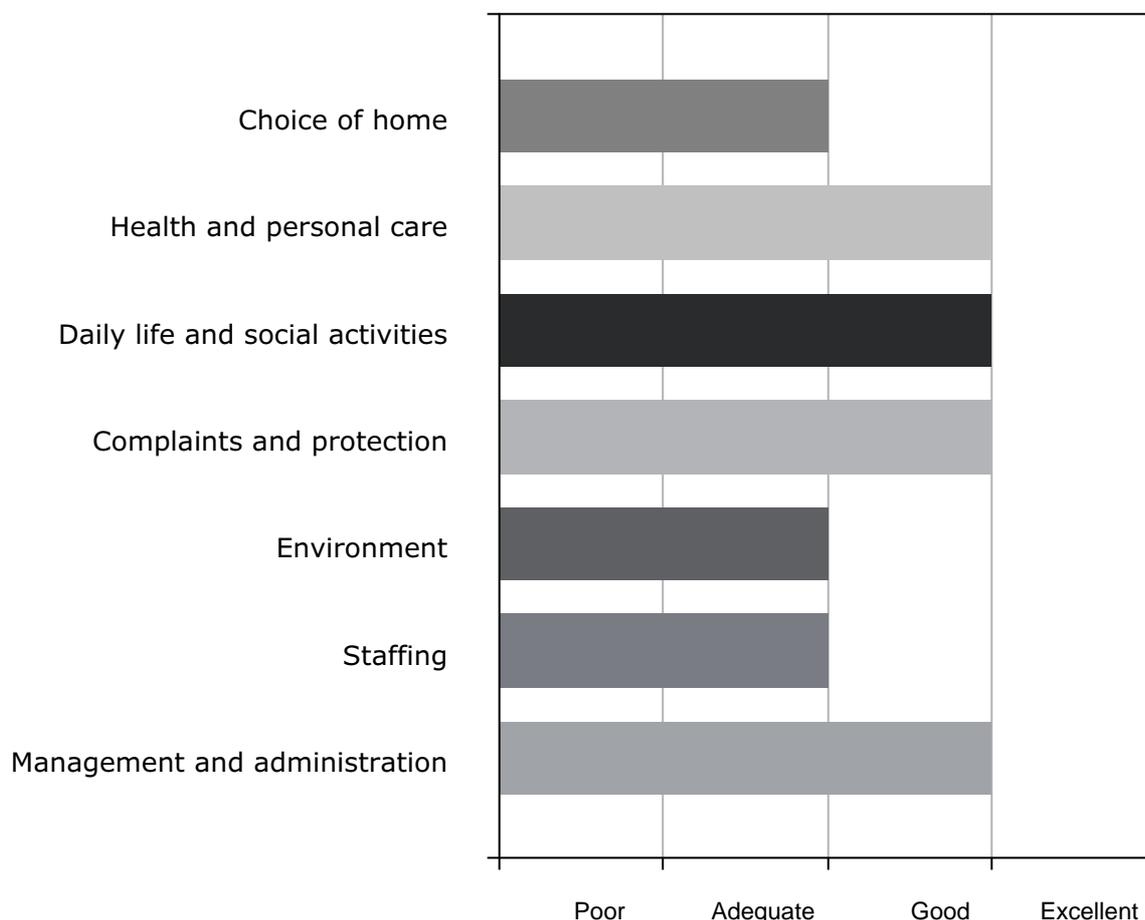
## Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

### Our judgement for each outcome:



### How we did our inspection:

We completed a key inspection without any warning. We looked at information sent by the home before we visited. We spoke to people who live in the home as well as people who work in the home. We also spoke to people who visit the home.

During the site visit we looked at a variety of care records to find out how people were being supported, we also observed care in the home.

### **What the care home does well:**

We found that the homes policy, practice and training on the handling of medication ensures that people living in the home are protected.

We found that work to develop and maintain people's interests continues and this is being enhanced by further training for staff.

People who live in the home are able to see the people who are important to them and they tell us they are made to feel very welcome.

People are supported to make choices in their daily lives.

There is a varied menu on offer and people are supported to maintain a balanced diet.

People should be confident that complaints will be listened to and acted upon.

Staff receive the training they need to know how to protect people from abuse.

People live in comfortable surrounding where there is a regular programme of maintenance.

The home has a quality assurance system which listens to peoples views and takes action to improve.

The home has a policy in place to safeguard peoples finances.

The health, safety and wellbeing of people in the home is promoted.

### **What has improved since the last inspection?**

At the last key inspection in 2007 we made three requirements and no recommendations.

We found that care plans were being reviewed and that the information they contained was up to date and relevant to the care of the person.

We found that the home is completing an assessment on each person to find out their nutritional needs and they are also completing risk assessments on people when they are concerned about their mobility.

We also found that the hours the registered manager works in the home is recorded on the staff roster.

### **What they could do better:**

At the end of this inspection there is one requirement and seven recommendations. It is very important to have a consistent approach to recruitment to ensure that vulnerable people are protected. Pre admission assessments should have more information in them on which to base a decision to admit someone to the home and to develop comprehensive care plans. To ensure that people are being moved correctly professional advice and assessment should always be sought. It is important that information around the home maintains an individuals dignity and confidentiality. The flooring in the laundry room should be changed to maintain good infection control and the kitchen should be cleaned to also maintain good infection control. The staff roster should have the full names and jobs that staff do on it. It is important that all new staff receive induction training within the agreed guidelines in order to ensure that people living in the home are supported by trained and competent staff.

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 4.

The report of this inspection is available from our website [www.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line –0870 240 7535.

## Details of our findings

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Requirements and recommendations from this inspection

## Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People have their needs assessed before they move into the home however the documents need to contain more information to ensure that their needs can be fully met.

Evidence:

We looked at the assessment documentation for three people to find out if their needs were recorded in sufficient detail to enable person centred plans to be developed. We found that their religious needs give little information other than their faith. One person was Roman Catholic but the assessment makes no reference to whether they are still practicing or how they need to be supported to maintain in contact with their beliefs.

Under occupation for all the three files looked at they all state 'retired' no reference to previous job or career. Limited information was recorded on the assessment about hobbies, interests. However we found more information was recorded following admission and as they get to know the person and their friends and family.

## Evidence:

In the assessment area around mental health under 'orientation' it states 'none' for one person under the heading, clients perception of mental health, it states 'none'. For a home which is registered to specialise in mental health namely dementia there is very little information about this area on assessments. However staff were observed clearly understanding individual needs, but it has to be recorded more clearly in assessments.

They told us in their annual quality assurance assessment:

"To have a more formal meeting with representatives every three months to discuss general health and well being of their relative, or anything they would like to bring up."

This would also assist in the gathering of information about people's individual life histories.

## Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Systems are in place to ensure that people receive the care and support they need. To ensure they are protected and safe at all times professional advice must always be arranged for individuals if their needs change.

Evidence:

They told us in their annual quality assurance assessment that: "Within the Care Plans there are now risk assessments completed separately for Mental health risk assessments and skin and pressure area risk assessments, to enable staff to quickly find the information they require, care plans are thorough and updated as and when required. All care plans are discussed with representatives and signed when in agreement."

There are four people who need assistance to move about the home with the aid of a variety of moving and handling equipment. All staff have received training in moving and handling and apart from two new members of staff all have been trained in the last year. There are moving and handling assessments in place for all the people who are hoisted. They have been completed by the deputy manager, who has received

## Evidence:

training. There is no evidence that an occupational therapist has been involved in assessing the appropriate equipment and sling. The moving and handling assessment seem to be based on the one moving and handling are plan completed by an Occupational Therapist. When asked the deputy manager confirmed that she had completed the moving and handling assessment and used the good practice from one care plan to inform the others. None of the moving and handling assessments have been signed or dated. Telephone reviews of equipment have taken place by the local authority.

There are two care plans, one is a tick box and another contains more detailed person centred information on how people like to be supported and how they should be supported if their behaviour is challenging. The tick box does not seem necessary as it is neither person centred or giving clear instruction on action to be taken. For example under reasoning and logic for one person the box 'relapses into unreality' is ticked with no explanation of how this happens or what to do to support the person if it does. Under fulfilment 'help needed to pursue own interests is ticked with no other explanation as to how. The care plan is not dated or signed. Other care plan documents we looked at were signed and dated. The manager and deputy told us that they will not longer be using the tick boxes as they had found them not to be providing the information they needed. In the files we looked at there was good evidence that people are being supported to see health care professionals and receiving regular health checks with opticians and audiology.

They also told us in the annual quality assurance assessment what areas they had improved on and changes they had introduced such as: " malnutrition universal screening tool (MUST) will be completed on all new admissions into the rest home." In the files we looked at this had already been done.

Examination of medication storage and records indicated that a safe system of medication management is in operation. Records of medicines received into the home, those given to residents and those disposed of when no longer required were in accordance with stocks held. Most medicines are issued from the supplying pharmacist in blister packs (MDS), those that are not suitable for this type of dispensing are issued in their original containers, the container is dated when opened to ensure an accurate audit trail can be maintained.

## Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People participate in a variety of activities and see those who are important to them. Further development needs to take place to make activities individual.

Evidence:

There are activities on each day for people living in the home. Each Monday there is a minibus trip out. Other activities include, tactile activities but there is no further detail, ball games, card games and word games. There is also free choice on the activity board. During the site visit we observed staff playing dominoes with one person and engaging in one to one time with other people living in the home. One person who was visiting the home said they were very happy with the one to one attention given to her relative. They told us that staff always had time to sit and chat to the people living in the home.

The annual quality assurance assessment said they had made the following changes: "Recording detailed information on a daily basis by staff have improved and new procedures are being followed to maintain this. There is now a separate diary to record meals kept in the kitchen. All staff have been on training day for more understanding and knowledge specifically for people with dementia. Students from a local school are coming into the home as volunteers to talk and interact with the residents on a weekly basis."

## Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There is a complaints policy and procedure for people to use and people should be confident their concerns will be listened to and acted upon.

Staff are trained in understanding the importance of protecting people from harm.

Evidence:

All staff have completed safeguarding training in the past year. There have been no safeguarding issues at the home.

They wrote in the annual quality assurance assessment:

"Any new staff go on the one day training course in Adult protection offered by Bournemouth Borough Council. All staff have received Dementia training."

## Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There is a system of maintenance to ensure that the home is well maintained and a pleasant place to live.

Work to improve the laundry and maintain a good standard of hygiene in the kitchen would ensure that people were protected.

Evidence:

The annual quality assurance assessment told us about the changes they have already made to the environment: "New windows have now been fitted throughout the home. New carpets in communal area's have been fitted and all radiator covers have been painted. The maintenance audit recording has improved and maintenance is ongoing. A window has been fitted at the end of the long lounge to create more natural lighting. A new freezer has been purchased. A smoking shelter has been erected to the side of the building." The notice board in lounge has a variety of different picture of activities which have taken place within the home. One relative said that there is a lot if time spent by staff in one to one support. There is an L shaped lounge and dining area and a conservatory leading to a small garden area. The home was clean and people's rooms were individually furnished.

The skirting boards around the home are scuffed. The shelves in the kitchen cupboards need to be cleaned as there was food crumbs in some of the cupboards. The laundry room which is in an outhouse needs to have a floor that is easily

Evidence:

cleanable and does not harbour germs. The floor at the moment is concrete and cracked.

A laundry facility is available which includes a domestic and commercial style washing machine and a tumble dryer. the last inspection report in 2007 states: "A requirement of the last inspection has been partially addressed, the door to the laundry has been repaired and the homes annual quality assurance and development plan identifies that the laundry room will receive attention in the next 12 months. The specific issues are to ensure there is a non permeable covering to the floor and walls to prevent cross infection. The home has an infection control policy."

The laundry floor has not yet been completed.

## Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **adequate** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The recruitment policy and practice in the home has to be consistent to ensure that people are supported and protected.

A consistent approach to the induction of staff is essential in ensuring that staff have the competency to do the job well.

Evidence:

We looked at three staff files, all three had completed applications, proof of identity, two written references. However one person had started work without a Criminal Records Bureau check being returned and we could not find evidence of the POVA 1st check being completed. There was evidence of a police check completed from this persons home country however it demonstrated a possible inconsistent approach to recruitment. The annual quality assurance assessment says: "The procedure for recruitment and employment policy is clearly laid out. Appropriate screening is carried out before employment commences and all staff receive skills for care induction training by Bournemouth borough council. Staff rota is in place showing which staff are on duty and in which capacity. We do not use agency staff to enable the residents to have continuity in their care. There are four member of care staff on duty during the morning and three on the afternoon shifts, and two waking night staff. There is also a cook and housekeeper plus the manager on duty." The registered manager told us that they had completed a POVA 1st check before one person started working in the home. They said they would send us the proof. The manager also told us that the

Evidence:

person had not worked unsupervised. In the staff files we looked at staff received induction training but we noticed that one person did not do induction training until several months after they started working in the home. The annual quality assurance assessment also said: "All night staff now work on days as well to familiarise themselves better with the care needs of all the residents, the busy day to day running of the home and to be able to cater for training needs in house." Management also told us that over the next twelve months they are putting all their staff through further dementia care training to improve the service they provide to people living in the home.

## Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home has good systems in place to run the home effectively but is sometimes inconsistent in its approach which could leave people vulnerable.

Evidence:

Insurance certificate displayed and expires 15/04/09. The deputy manager has gained her Registered Managers Award and NVQ level 4. The registered manager and deputy manager run the home between them and both have a clear understanding of the needs of the people using the service. They are in the process of improving the care plan documentation and removing some tick box paperwork that they consider is not person centred. During the site visit they demonstrated an understanding of the areas which need improving and were able to tell us the action they had taken to improve. They also demonstrated that they were accessing training and had recently attended a workshop on the Mental Capacity Act 2005. The registered manager told us that they are involved in learning hubs and use the local partners in care network, which provides access and funding to training. There are some inconsistencies in their approach to recruitment and training however they have systems in place and already

## Evidence:

taken action. Policies and procedures in the home are reviewed annually. They told us in their annual quality assurance assessment that: "Every year we send quality assurance questionnaires to relatives, staff and some residents who are able to understand the questionnaires, who are helped by either their advocate or relatives. The findings are summarised into an annual development plan of which Portelet House will improve upon. Timescales for this are also included. Furthermore, we have a comments, compliments and complaints book which is readily available to residents, staff and visitors to the home. Staff meetings are held monthly where care plans are reviewed, care needs are discussed and identified. The care plans are then updated with current information. Usually a multidisciplinary meeting take place in order to continually improve the residents care needs."

The Commission for Social Care Inspection send all care homes an Annual Quality Assurance Assessment (AQAA\_ to complete each year. A completed AQAA which provided detail of the homes intention to continue to monitor and evaluate quality of service provided was submitted in September 2008. The document identifies what the home feels they do well and sets out their plans for improvement over the next twelve months.

In order to protect residents, it is the policy of the home not to have any involvement in their personal finances. Therefore, any resident unable or not wishing to handle their own affairs has a relative or other representative to deal with their finances.

The homes fire exits were not obstructed and fire fighting appliances were in place and evidenced regular servicing, staff have received training. The homes up to date fire risk assessment was seen.

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, Care Homes 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, Care Homes 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	29	19	<p>A registered person may allow a new member of staff to start work at a care home as long as a Criminal Records Bureau disclosure has been applied for and a POVA first check has been obtained and all other elements of schedule 2 have been obtained.</p> <p>Appropriate checks must be completed to ensure that the people living in the home are safe from harm.</p>	30/04/2009

### 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	3	The registered manager should ensure that improvements are made to the quality of information in assessments.
2	8	The registered manager should seek professional advice on the moving and handling care plans to ensure that individual's who are being hoisted have the right equipment to meet their needs.

## 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
3	10	The registered provider should ensure that information around the home does not compromise the confidentiality of individuals, both people who live in the home and people who work in the home.
4	26	The registered provider should ensure that the flooring in the laundry room is impermeable and these and the walls are readily cleanable.
5	26	The registered provider should ensure that the cleanliness of the kitchen is in accordance with relevant legislation and published professional guidance.
6	27	The registered manager should ensure that the staff rota shows full names of staff and in what capacity they are employed.
7	30	The registered manager should ensure that all new staff employed to work in the home receive induction training within six weeks of appointment to their post.

## Helpline:

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