

# Random inspection report

## Care homes for older people

Name:	Birchy Hill Nursing & Residential Home
Address:	Birchy Hill Sway Lymington Hampshire SO41 6BJ

The quality rating for this care home is:	zero star poor service
The rating was made on:	21/09/2009

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.

<b>Lead inspector:</b>	<b>Date:</b>
Craig Willis	0 8 0 1 2 0 1 0

## Information about the care home

Name of care home:	Birchy Hill Nursing & Residential Home
Address:	Birchy Hill Sway Lymington Hampshire SO41 6BJ
Telephone number:	01590682233
Fax number:	01590682217
Email address:	
Provider web address:	

Name of registered provider(s):	Angel Care Plc
Name of registered manager (if applicable)	
Type of registration:	care home
Number of places registered:	70

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	70	0
mental disorder, excluding learning disability or dementia	70	0

Conditions of registration:
The maximum number of service users to be accommodated is 70
The registered person may provide the following category of service: Care home with nursing (N) to service users of the following gender: Either whose primary care needs on admission to the service is within the following category: Dementia (DE) Mental disorder, excluding learning disability and dementia (MD)
The registered person may provide the following category/ies of service only: Care home with nursing (N) to service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Dementia (DE) Mental disorder, excluding learning disability or dementia (MD)

Date of last inspection

2

1

0

9

2

0

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9

Brief description of the care home

The home is registered to provide nursing and personal care for up to 70 older people who have dementia or mental health issues. The home has a garden to the rear and a large car park to the front. The village of Sway has a train station and shops, chemist, post office, GP surgery, church, hotels and pubs. People wishing to live in the home or their representatives are given written information about the home and the service that it provides and are invited to visit the home. A copy of a report of the most recent inspection of the home is made available to people.

## What we found:

This random inspection was completed to assess whether the home had complied with three statutory requirement notices issued on 15 December 2009. We issued these requirement notices because we found that previous requirements issued in inspection reports had not been complied with.

We made a requirement that the home needed to have systems to assess and take action to minimise the pain that people experience and to have a system to audit and keep clear records of medicines within the home. During this visit we looked at the medication records for six people who live in the home. Each person had a record of pain assessments that had been completed. Staff had completed the pain assessments four times each day and the records indicated whether people had taken any pain relieving medication as a result. We also looked at the medication administration records for these six people. This gave a record of all medication that people had been supported to take. The charts had been fully completed for five of the people, with one gap in the record for one person. The medication that had not been signed for was a tablet that had been removed from the blister pack, indicating it had probably been given to the person, however the manager was not able to be certain about this. The medication records were being regularly reviewed by senior members of staff and assessed each month by a representative of the provider. There was evidence that action had been taken to address errors and omissions with individual staff members where necessary. We found that the home had complied with this statutory requirement notice.

We made a requirement that the home needed to have systems in place to ensure new staff members are thoroughly checked before they start working in the home. During the visit we inspected the records of four staff members, including two staff whose records were not complete at the last inspection and two staff who were due to start work in the week following the visit. All four staff had details of an enhanced criminal records bureau disclosure, two written references and confirmation of identity. These documents were all in place for the two new staff members before a start date was arranged with them. The manager reported that she has taken more control of this process herself to ensure that all the required checks are completed before a staff member starts work in the home. We found the home had complied with this statutory requirement notice.

We made a requirement that the provider or their representative must have a system in place to ensure they visit the home each month and a report of the visit provided to the manager. We also said the home must send us a copy of the report. We received a copy of the report, completed by a Director of Care for Angel Care. During the visit we found that the manager had also received a copy of the report. The manager reported that the Director of Care had been in the home the previous day and she expected to receive the next report the following week. The reports seen included an assessment of medication, training, complaints and staffing issues. The Director of Care received feedback from people who live in the home and their relatives and made observations about the way staff were working. The report contained actions that were required and an update on actions required from the previous report. We found that the home had complied with this statutory requirement notice.

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

The home has taken action to comply with the statutory requirement notices.

There are now safe systems for managing people's medication and people's pain levels are assessed and action taken where necessary to relieve pain.

Staff are now thoroughly checked before they start work in the home which will help to ensure they have the appropriate skills and experience to meet people's needs.

The home is being regularly assessed by the provider's representative and action is being taken to address any shortfalls that are identified in the service provided.

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

We have not made any requirements as a result of this visit.

The manager and provider need to ensure that the action taken to comply with the previous requirements is sustained.

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

## 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](http://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](http://www.tso.co.uk/bookshop)

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