

Random inspection report

Care homes for older people

Name:	Spratslade House
Address:	Belgrave Avenue Dresden Stoke-on-trent Staffordshire ST3 4EA

The quality rating for this care home is:	one star adequate service
The rating was made on:	14/07/2009

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:								
Joy Hoelzel	1	1	1	1	2	0	0	9	

Information about the care home

Name of care home:	Spratslade House
Address:	Belgrave Avenue Dresden Stoke-on-trent Staffordshire ST3 4EA
Telephone number:	01782311531
Fax number:	01782311532
Email address:	
Provider web address:	

Name of registered provider(s):	Pearlcare (Spratslade) Ltd
Type of registration:	care home
Number of places registered:	30

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	10	0
old age, not falling within any other category	0	30

Conditions of registration:									
The maximum number of service users who can be accommodated is: 30									
The registered person may provide the following category of service only: Care Home Only (Code PC); To service users of the following gender: Either; Whose primary care needs on admission to the home are within the following categories: Dementia (DE) 10, Old age, not falling within any other category (OP) 30									
Date of last inspection	1	4	0	7	2	0	0	9	
Brief description of the care home									
Spratslade House is located in Stoke On Trent, Staffordshire. The home is accessible via public transport, and is close to local amenities. The large detached property provides residential accommodation for up to 30 older people. The home can also accommodate people with dementia needs and or have a physical disability. Corridors									

Brief description of the care home

and door frames are of a suitable width to accommodate people who use wheelchairs. Ramp access is also provided. The two-storey property offers 30 single occupancy bedrooms, 28 of which are equipped with an en suite facility. Bedrooms are located on both the ground and first floor. The installation of two passenger lifts allows access to all facilities within the home. Bathrooms and toilets are situated on both the ground and first floor and are found close to bedrooms and communal areas. All bathrooms are equipped with an assisted bath to promote the independence of people who have restricted mobility. The home is divided into units, having a small kitchen adjacent to each, allowing people access to drinks and light snacks. Three lounges are provided on the ground floor that are pleasantly decorated and equipped with essential furnishings and items to allow relaxation, and to enable people to socialise with other people living in the home. There are sufficient dining areas within the home. There is a pleasant and safe garden area. Sufficient parking is available at the front of the property.

Information of the home and the provision of the service are available in the statement of purpose and service user guide, both documents are available directly from the home.

The service user guide does not include information on the current level of fees for the service. The reader may wish to obtain more up to date information from the care service.

Care Quality Commission reports for this service are available from the provider or can be obtained from www.cqc.org.uk

What we found:

The purpose of this random inspection was to check whether the home had taken action to comply with the requirements made at the last key inspection. The home did not know that we would be visiting.

The last key inspection was completed in July 2009 and we made six requirements where the home had to make improvements to the service. We received a written response from the service following the key inspection confirming that they had taken action to comply with the requirements.

We asked for improvements to be made to the medication procedures, the quality assurance and monitoring systems and the staff training. We found improvements in these areas. Staff explained the amendments made to the medication procedures to ensure that people are offered their medication at the correct time and in accordance with the prescribing instructions. We looked at a selection of medication administration records, they appeared to be completed correctly, we did not see any gaps in the recording in the selection viewed. Staff told us of the training courses they had been offered which included moving and handling training. We observed staff assisting people to transfer from chair to chair in a safe way. Staff explained the development of systems to monitor the service to ensure that it is operating as it states it does.

We made requirements for improvements to be made to the content and information included in the care plans to ensure that staff have relevant information to fully meet people's individual needs. We looked at the same person's care plan that we had looked at at the key inspection, and found that there had been no improvement in providing relevant and specific information to ensure that this person's needs are fully met. For example, this person needs very close monitoring on a regular basis for a specific condition. A plan had been completed and reviewed at regular intervals but only contained very limited information on the intervention needed. There was no information on why, when or how often the intervention was needed. There was no information recorded on what action staff should take if anything abnormal or different was identified. Staff were unable to tell us of the action they should take when an abnormality was identified. We asked staff if there was any other documentation containing information relating to this specific care need of this person. Staff told us that there was not. We asked another member of staff if they were aware of any special needs for this person. This staff member told us that they were not aware of any special needs or requirements.

We were concerned that people are at risk of harm by the lack of relevant information in the care plans about their specific needs. We were also concerned that people may be at risk because staff are unaware of their individual needs.

We felt that the home continued to be in breach of the regulation. This resulted in the serving of a Code B notice, of the Police and Criminal Evidence Act (PACE) Codes of Practice. Code B notices are used whenever we are involved in an investigation, which may result in a criminal prosecution, in this instance Spratslade House care home had breached Regulation 12, (health and welfare of service users), of the Care Homes Regulations 2001, which is an offence under the Care Standards Act 2000.

Action will now be considered to ensure compliance in this area.

What the care home does well:

Staff told us they try very hard to make sure people are safe and happy.

People living at the home told us the staff are very good and that they are satisfied with the care provided.

What they could do better:

The care manager and area manager explained the planned changes to the way they assess and record peoples care needs. They were unable to confirm when the changes will be fully implemented. A good practice recommendation was made at the inspection in February 2009 for the care plans to record accurate information on specific care needs. A requirement for the same was made at the Key inspection in July 2009. This random inspection (November 2009) has found that the home is still omitting essential information in the care plans for people to have their care needs fully met with staff being aware of the care needs. We are now considering any further action we will take to ensure compliance with the regulations this will include referral to the regional enforcement team.

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	8	12	<p>All identified health care needs must be fully assessed and recorded in sufficient detail.</p> <p>This will ensure that all staff are aware of health care needs and the needs can be fully met.</p>	30/10/2009

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	12	All identified health care needs must be fully assessed and recorded in sufficient detail. This will ensure that all staff are aware of health care needs and the needs can be fully met	11/11/2009
2	15	12	Special dietary requirements must be recorded in the care plan and all staff must be aware of the need. This will ensure that a persons health is not compromised and they are not put at risk.	11/11/2009

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

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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