

Barchester Healthcare Homes Limited







Chater Lodge

Inspection report

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Ratings

Overall rating for this service	Requires Improvement	
Is the service safe?	Requires Improvement	
Is the service effective?	Requires Improvement	
Is the service caring?	Good	
Is the service responsive?	Good	
Is the service well-led?	Good	

Overall summary

This inspection took place on 23 December 2014 and was unannounced. When we last inspected the service on 22 August 2013 we found the provider was compliant with the standards we assessed.

Chater Lodge is a care home without nursing. The service provides care and support for a maximum of 45 older people. At the time of our inspection there were 36 people using the service. Part of the first floor accommodation (known as Memory Lane) is specifically for people with dementia.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they felt safe. People were protected from the risk of abuse because staff had received training and knew what to do and who to report to should they

Summary of findings

suspect abuse. Accidents and incidents were recorded but the action taken to reduce any further risk was not. Some people, relatives and staff said they sometimes had to wait for staff to attend to them and staff were very busy in the mornings. People said they got their medicines as prescribed by their doctor.

People told us they liked the staff. Staff had received all the training they required and were due to receive updated training about dementia care. People were asked for their consent before receiving care and treatment but the principles of the Mental Capacity Act 2005 were not always followed. People had their needs assessed and a plan of care was developed for each assessed need. Some plans of care were not as focused on the person or specific in their detail as they should have been to ensure that staff were fully aware of people's individual needs and how to meet them.

People told us about the things they liked to do and we observed people engaged in activities which they enjoyed. Information about people's life history and preferences were recorded for most but not all people. Social and recreational activities on offer did not fully reflect everyone's individual interests and hobbies. People were supported to eat and drink and maintain a balanced diet. They said they liked the meals provided. People had access to healthcare professionals when required but there was one incident where a person had not attended a doctor's because staff had failed to arrange it.

People said the management team were open and approachable. There were quality monitoring processes in place and these included seeking the views of people who used the service and their relatives.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not consistently safe.

People were protected from abuse because staff knew how to recognise the signs of abuse and how to respond to this. Risks were assessed and people were able to take informed risks. Some people felt that staffing numbers were not always sufficient. Evidence of action taken in response to accidents and incidents was limited. Staff recruitment procedures ensured that in so far as possible only staff suitable to work at the service were employed.

Requires Improvement



Is the service effective?

The service was not consistently effective.

Staff received the training and support they required to do their jobs and meet people's needs. Consent to care and support was obtained but staff did not always follow the principles of the Mental Capacity Act 2005. People were supported to eat and drink and maintain a balanced diet. Plans of care did not always focus on the person. They did not properly instruct staff about the action to take to meet needs and keep people safe.

Requires Improvement



Is the service caring?

The service was caring

Positive and caring relationships were developed between staff and people who used the service. People told us they liked the staff and they had their privacy and dignity protected.

Good



Is the service responsive?

The service was responsive.

People received care and support in the way they preferred. Most people were able to follow their hobbies and interests. The provider had a complaints procedure but had not recorded all verbal complaint or the action taken to resolve the issue. Therefore we could not be certain they were responded to appropriately.

Good



Is the service well-led?

The service was well led.

People and staff were asked for their feedback. The management approach was open and inclusive. Quality assurance systems were in place so the provider could monitor the quality of service provision and drive improvement.

Good

