

Report to: **Adult Social Care and Community Safety Scrutiny Committee**

Date: **1 March 2012**

By: **Director of Adult Social Care**

Title of report: **Update on Milton Grange - Quality and Standards**

Purpose of report: **To inform the Scrutiny Committee of the measures in place at Milton Grange, Eastbourne to meet the required Care Quality Commission (CQC) standards.**

RECOMMENDATIONS

The Scrutiny Committee is recommended to:

Consider and comment on the measures in place to ensure Milton Grange is compliant with care quality standards.

1. Financial Appraisal

1.1. The costs delivering the actions outlined in section 3 have been met within the existing revenue budget of Milton Grange.

2. Background and Supporting Information

2.1 Milton Grange, Eastbourne, was reopened in January 2010, following a twelve month refurbishment. Located in the Old Town area of Eastbourne, it provides a range of support services to promote independence for older people with a variety of mental health needs. They are supported by a multi-disciplinary staff team, which includes care workers, occupational therapists, physiotherapists and registered specialist mental health nurses.

2.2 There are 37 en-suite bedrooms, arranged in four units across two floors; 19 of the 37 beds provide intermediate care and reablement for older people with dementia.

2.3 There is a day service for 45 people Monday to Friday and 25 people on Saturday and Sunday with extended days on Wednesday and Friday (up to 7.30pm). People who attend day care generally have some form of dementia.

2.4 A café, providing refreshments for visitors and staff, is operated by service users with a learning disability, providing training and practical experience in preparation for gaining paid employment in the catering industry.

3. Inspection by the Care Quality Commission

3.1 The CQC undertook an unannounced inspection of services at Milton Grange on 2 August 2011, and identified 'minor concerns' in respect of two outcome areas and 'moderate concerns' in respect of two other outcomes. Milton Grange was found to be compliant with all other outcomes inspected. The areas of concern were as follows:

- Outcome 2 – Consent to Care Treatment – minor concern
Care plans did not evidence that decisions taken on behalf of individuals are supported by the presence of mental capacity assessments and Best Interest meetings.

- Outcome 8 – Cleanliness and Infection Control – minor concern
Clarification of staff and managers roles and responsibilities was required to ensure the effective management of infection control issues and minimise any risk to people using the service.
- Outcome 4 – Care and Welfare of People – moderate concern
Information provided to people before people move into the home needed to be standardised and comprehensive. In addition, care plans and risk assessments needed to be enhanced to cover and minimise the risk of falls.
- Outcome 14 – Supporting staff – moderate concern
Some mandatory training was overdue for staff members and required updating and refreshing.

3.2 All of the concerns have been swiftly addressed and details of the action plan developed in response to the inspection report are contained within Appendix 1.

3.3 In order to sustain the required quality and standards a continuous development programme has been created alongside a competency programme for all staff (and managers), to ensure they have the relevant skills and training to meet the needs of the user group, who may be acutely ill as well as suffer from a dementia-type illness and require rehabilitation to help them return to live independently in their own homes with the necessary support.

3.4 More comprehensive records have been introduced, and provide an audit trail for activity. All service user records are revised and all staff record treatments and interventions, including recording of investigation of incidents, risk assessments and service users support profiles. The new quality monitoring system ensures that this is monitored closely and any shortfalls are identified.

4. Conclusion and Reason for Recommendation

4.1 Following the CQC inspection of Milton Grange in August 2011, a comprehensive action plan was developed to implement the improvements necessary to ensure and sustain compliance with the relevant regulations. These have now been fully implemented and Milton Grange continues to deliver high quality care to older people with dementia.

KEITH HINKLEY
Director of Adult Social Care

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Local member: Councillor Carolyn Heaps

BACKGROUND DOCUMENTS
None

East Sussex County Council
Adult Social Care Directly Provided Services

Milton Grange Mental Health Services

Action Plan to address issues raised by Care Quality Commission inspection, 2nd August 2011

September 2011

Outcome 2

Outcome 2: Consent to care and treatment	Required Action to ensure compliance	Responsible person(s) and date	Progress made in meeting compliance requirements as at 6 th January 2012
Consent to care and treatment (Minor concern)	Care plans to evidence that decisions taken on behalf of individuals are supported by the presence of capacity assessments and best interest meetings	Caroline Pulleyn, 10 th October 2011	Where applicable supported decision making forms are completed. Capacity assessments and details of best interest meetings are obtained from referrer prior to admission. <u>Completed</u>

Outcome 4

Outcome 4: Care and welfare of people who use services	Required Action to ensure compliance	Responsible person(s) and date	Progress made in meeting compliance requirements as at 6 th January 2012
Care and welfare of people who use services (Moderate concern)	Information before people move into the home needs to be standardised and comprehensive ensuring the home is able to meet all care needs.	Caroline Pulleyn 10 th October 2011	Pre Admission assessment visits are carried out for all referrals to Milton Grange. All paperwork is thoroughly checked prior to accepting referrals to ensure relevant details service user's needs are recorded. <u>Completed</u>
Care and welfare of people who use services (Moderate concern)	Care plans and risk assessments to include all required information to minimise the risk of falls.	Caroline Pulleyn, registered manager and Mark Butterworth OT Practice Manager 10 th October 2011	Risk of falls is identified at pre admission screening and appropriate measures put in place prior to admission, with advice from the therapy team. Monitoring of risk is on going and all paperwork is updated as soon as any changes are noted. <u>Completed</u>

Outcome 14

Supporting Staff (Moderate Concern)	Overdue Mandatory Training to be addressed	Caroline Pulleyn	Medication and safeguarding training completed for all staff. Mandatory training is established on a continuous rolling programme. <u>Completed</u>
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Outcome 8

Outcome 8: Cleanliness and infection control	Required Action to ensure compliance	Responsible person(s) and date	Progress made in meeting compliance requirements as at 6th January 2012
Cleanliness and infection control (Minor concern)	Clarification of roles and responsibilities to effectively manage infection control issues and minimise risk to people using the service.	Caroline Pulleyn	Fully comprehensive cleaning schedule now provided by cleaning contractors (Kier) specifically detailing all processes relating to infection control. Infection control lead for Milton has been identified within the team. <u>Completed</u>