

Later Years Care Limited

Orchard House Care Home

Inspection report

290 Scalby Road
Scarborough
YO12 6EA

Tel: 01723378220

Website: www.orchardhousecare.co.uk

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21 November 2022

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Orchard House Care Home is a residential care home providing personal care to up to 6 older people, young adults and people with dementia. They also provide respite accommodation. At the time of our inspection there were 6 people using the service.

People's experience of using this service and what we found

Improvements had been made since the last inspection. Governance systems were now in place and effective in monitoring the quality and safety of the service. Timely action had been taken where shortfalls had been identified. The provider visited the service on a regular basis to ensure they had oversight.

Risks to people were now assessed and action had been taken to ensure risks were mitigated where possible. Improvements had been made with regards to the recording of checks used to ensure the service was safe.

Medicines were stored, administered and recorded safely. Guidance for staff was now in place for medicines that were prescribed as and when required.

Thorough recruitment processes were now in place and followed. All appropriate pre-employment checks were evident and completed prior to new staff commencing employment.

People and relatives spoke highly of the staff team and there was enough staff on duty to meet people's needs.

People were safe living at Orchard House Care Home. There was a warm, friendly, relaxed atmosphere and positive relationships existed between people, relatives and staff.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 16 December 2021) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 21 October 2021. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve their records keeping and governance processes.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Orchard House Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Orchard House Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was conducted by one inspector.

Service and service type

Orchard House Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Orchard House Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. The previous registered manager left the service in October 2022. The deputy manager had been promoted to manager and they had been in this post for one month. They had submitted an application to register. We are currently assessing this application.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 1 person who used the service and one relative about their experience of the care provided. We spoke with the manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We conducted a tour of the service and looked at a wide variety of records. These included people's care and medicine records, monitoring documentation, staff files and audits used to monitor the service.

Following the inspection site visit we also contacted 4 members of staff via email to request feedback on the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

At the last inspection the provider failed to ensure they had complete, accurate and contemporaneous records in relation to the management of risk. This was a breach of Regulation 17 of the Health & Social Care Act 2008 (Regulated Activities) Regulation 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Risks to people had been identified and recorded. Thorough management plans were in place to reduce risks wherever possible.
- Improvements had been made to records relating to fire safety checks. Regular fire drills had taken place and checks to ensure the safety of the service and equipment had been completed on a regular basis.
- Accidents and incidents were recorded, and action had been taken to mitigate risks to prevent reoccurrence.
- Audits were used to identify any shortfalls in practice. When shortfalls were found, lessons had been learnt and shared with the staff team.

Staffing and recruitment

At the last inspection the provider failed to ensure they had complete, accurate and contemporaneous records in relation to recruitment records. This was a breach of Regulation 17 of the Health & Social Care Act 2008 (Regulated Activities) Regulation 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Thorough recruitment processes were now in place and followed. All appropriate pre-employment checks had been completed prior to new staff commencing employment.
- There was enough staff on duty to meet people's needs. A relative told us, "I can't fault the staff at all. They are always on hand to offer support, or just have a chat. I have no concerns over staffing levels."
- The manager had introduced a tool they used to ensure staffing levels were safe. This had been reviewed on a regular basis to ensure safe staffing levels were maintained.

Using medicines safely

At our last inspection we recommended the provider consider current best practice guidance on in relation to 'as and when required' medicines and act to update their practice. The provider had made improvements.

- Medicines were stored, administered and recorded safely.
- A number of improvements had been made with regards to medicine management since the last inspection. Guidance was in place to assist staff with when to administer 'as and when required' medicines and clear body maps were in place to show where topical medicines should be applied.
- Medicines were managed by staff who had the appropriate training and their competencies assessed. A relative said, "Staff are on the ball with medication. If there are any issues or concerns at all they are on it straight away."
- Thorough medicine audits were in place and were effective in identifying any issues or concerns.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service. Government guidance in relation to testing was being followed.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

Visits to Orchard House Care Home were in line with government guidance. We observed visits taking place during the inspection.

Systems and processes to safeguard people from the risk of abuse

- People were safe living at Orchard House Care Home. A relative told us, "I am 100% confident [Person's name] is safe here and because of this, I can relax a little bit as I know they are in very good hands." A member of staff said, "People are safe here. Staff treat people like their own loved ones, with empathy, dignity and respect."
- Systems and processes were in place to safeguard people from the risk of abuse. Staff had received appropriate safeguarding training and referrals had been made to the local authority when any concerns had been raised.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is

usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection the provider failed to establish and operate robust systems to monitor and improve the service. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Effective quality assurance processes to monitor the quality and safety of the service were in place.
- Audits had been completed regularly by the manager and were effective in highlighting any shortfalls. Audits contained clear action plans to address any concerns found.
- The provider was actively involved in the service. The manager provided them with weekly and monthly reports which they used to monitor performance.
- The provider had recognised they needed a thoroughly recorded process to evidence effective provider oversight. They were in the process of introducing monthly meetings where they could discuss any issues or concerns as well as conduct checks on quality audits completed by the manager.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- There was a positive culture at the service which created a warm, relaxed and caring atmosphere.
- Staff told us there had been many positive improvements to the service since the last inspection and they now felt much more included and listened to. One member of staff told us, "[Manager's name] is excellent at their job and it is a pleasure to work with them."
- Positive relationships existed between people, relatives and staff. People spoke highly of the staff team and their approach. Comments included, "The staff are wonderful" and "I consider myself very lucky that my relative lives here. I cannot fault the home at all."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People were actively involved in the service. Regular resident and relative meetings took place and people

were encouraged to share their views.

- Staff felt valued and fully involved in the service. Comments included, "[Manager's name] and the team leader are very supportive. We get asked our views and informed of what action has been taken as a result."
- The service had good links with other professionals. Records showed that staff actively engaged with other professionals to ensure people received the support they required in a timely way. This help achieve positive outcomes for people.

Continuous learning and improving care

- The provider had learnt lessons following the last inspection and worked hard to ensure they improved the service.
- The new manager had been recruited due to their experience and knowledge of managing a care home and to help drive forward improvements. The provider told us, "[Manager's name] is a breath of fresh air. Their knowledge has helped with the improvements made and we will continue to strive for excellence."