

Dryband One Limited

Cloverdale Care Home

Inspection report

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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

Cloverdale Care home is a residential care home providing accommodation and personal care for up to 40 people, including people living with dementia. At the time of our inspection 26 people were living at the service.

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

People were happy with the care they received, they felt safe and well looked after. Staff had been recruited safely. There were enough staff on duty who were provided with the appropriate training to enable them to carry out their roles effectively.

The home was clean and tidy and additional cleaning ensured people were safe from the risk of infection. Care plans were up to date, risk assessments were in place and regularly reviewed.

People received their medicines on time and when they needed them. Staff had positive links with healthcare professionals which promoted people's wellbeing.

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.

People and staff spoke highly of the registered manager and their commitment to the service.

A system was in place which was used to monitor the quality and safety of the service. The registered manager carried out regular checks and analysis of incidents to ensure learning from events was shared with staff and actioned appropriately.

People were regularly asked their views on the service provided and action had been taken when suggestions were made.

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

Rating at last inspection

The last rating for this service was requires improvement (published 29 November 2019) and there was a breach of regulation 17. The provider completed an action plan after the 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 regulation 17.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 14 October 2019. 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 Good Governance.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Cloverdale Care Home

Detailed findings

Background to this 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 Care Act 2014.

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

The inspection team consisted of two inspectors.

Service and service type

Cloverdale Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with three people who used the service and four relatives about their experience of the care provided. We also spoke with six members of staff including the registered manager, senior care workers, care workers and the activities co-ordinator. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We spoke with two professionals who regularly visit 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

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

- Risk assessments were in place and reviewed regularly to minimise risks. These provided staff with a clear description of any risks and guidance on the support people needed.
- The service was well maintained. Regular checks of the environment were undertaken to make sure it was safe. For example, checking the fire panel, fire exits, security and water temperatures to minimise risks to people. There was an ongoing programme of servicing, repairs and maintenance.
- Learning was shared through discussions and handovers between staff and at staff meetings.

Systems and processes to safeguard people from the risk of abuse

- People were protected from potential abuse and avoidable harm.
- Staff had regular safeguarding training and demonstrated a good understanding of how to protect people from abuse. They felt confident concerns reported were listened and responded to.
- Where potential safeguarding concerns had been identified, the provider worked in partnership with other agencies to protect people.
- People said they felt safe with the staff who supported them. There was a friendly and relaxed atmosphere, people spent time with staff and enjoyed their company. People's comments included; "The carers are top notch," and "I like living here." Relatives said, "We are perfectly happy, they have never been looked after so well."

Staffing and recruitment

- Staff had been safely recruited.
- All staff had pre-employment checks to check their suitability before they started working with people
- There were enough staff to meet people's needs. For example, where people were unable to use a call bell, staff visited them regularly to anticipate their needs and keep them company.

Using medicines safely

- People received their medicines safely.
- Staff members had been trained in the safe administration of medicines and were assessed as competent before supporting people with their medicines.
- Medicines management was audited regularly with systems in place for investigating any potential medicine errors.
- Where people were prescribed pain relieving medicines, on an 'as required' basis, clear guidance was in place to ensure staff had information about when these medicines should be given.
- Where people were unable to communicate, staff used comprehensive information within PRN protocols

to assess and identify if they suspected a person was in pain.

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 meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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 the provider had failed to use systems effectively to monitor and improve the quality of the service which meant people were at risk of harm and of receiving a poor 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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved 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; Continuous learning and improving care

- A clear auditing system was in place to monitor the quality and safety of the service provided. Any actions required were implemented, shared with staff and used to improve the service.
- The registered manager analysed accident and incident reports to identify trends, make changes and improvements to prevent recurrence.
- An improvement plan captured ongoing improvements. For example, further improvements to the environment and internet provision to expand activities and embrace technology.
- The registered manager communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.
- The service was welcoming, and the atmosphere was warm and supportive. We observed people using the service were treated with respect and in a professional manner. A professional told us, "The home is quick to raise any issues or concerns and they are very responsive and quickly adapt to any recommendations."

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; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager was clear of their role and responsibilities to be open, honest and apologise if things went wrong.
- The service benefited from having a registered manager who was committed to providing good quality care to people who used the service.
- People spoke highly of the registered manager and staff team and their commitment to the service. Comments included, "[Registered manager's name] does a very good job, she is a lovely person" and "The staff all work together very well."
- One relative said, "I have spoken to [Registered manager's name] on numerous occasions and continue to

do so on a weekly basis. [Registered manager's name] has done a good job in very difficult circumstances and keeps us up to date regularly."

- Staff told us they felt listened to and that the registered manager was approachable. A staff member said, "The door is always open, and the manager is very approachable to everyone."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were consulted and involved in day to day decisions about the running of the home through regular meetings. For example, people decided on colour schemes throughout the home and developed their own menu's.
- A recent survey of people and relatives showed they were happy with their care and feedback about any suggestions for improvement were implemented.
- Staff were consulted and involved in decision making and were encouraged to contribute ideas and raise issues at regular staff meetings. Minutes of meetings showed equipment, training, equality and diversity issues and professionalism were discussed. Also, staff were praised for ongoing changes and improvements.

Working in partnership with others

- People benefitted from partnership working with other local health professionals. For example, GPs, community nurses and a range of therapists.
- The registered manager kept up to date with best practice developments. They encouraged staff to take on more responsibility through introducing lead roles to champion dignity, nutrition and hydration, as well as medicines management.