

Suzanne Marie Clague

# Conifers Care Home

## Inspection report

66 Victoria Road East  
Thornton Cleveleys  
Blackpool  
Lancashire  
FY5 5HQ

Tel: 01253822122

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service

Conifers Care Home is a residential care home providing personal care to 13 people aged 65 and over at the time of the inspection. The service can support up to 15 people in one adapted building.

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

Medicines record keeping did not always support and evidence that medicines were given as prescribed. The management team had a system for auditing and monitoring the service to check on the quality and to make sure staff were providing good care. Auditing was generally good and identified issues that had been attended to. However medication audits had shortfalls that may not identify issues and put people at risk and we made a recommendation regarding this. Following the inspection visits the management team had introduced new medication systems to ensure any discrepancies would be found and improvements made.

People and their relatives told us they felt they were cared for safely by the staff team. People were protected from the risk of abuse and kept safe by staff who were trained to protect them. A staff member said, "We have all the training we need the owner is really hot about training its very good." The management team recorded and audited any incidents and accidents and learnt from them. People felt safe living at the service and one person told us, "I never had brothers and sisters, I do now."

Staff continued to be recruited safely and sufficient numbers of staff supported people to live as independent a life as possible. The provider ensured safety checks of the home environment were completed regularly. Recent repairs and renewals to fixtures and fittings highlighted by the first inspection visit were promptly attended to by the provider. There were good stocks of PPE and infection control stations throughout the home. Staff used equipment correctly, such as disposable gloves, masks and aprons and had received enhanced training throughout the COVID-19 crisis.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 22 May 2018).

### Why we inspected

We initially undertook a targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in part due to concerns received about medicines, the environment, the provision of meals, and care provided. A decision was made for us to inspect and examine those risks.

We inspected and found there was a concern with the safe management of medicines so we widened the scope of the inspection to become a focused inspection which included the key questions of safe and well-led.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from Good to Requires Improvement. This is based on the findings at this inspection. We have found evidence that the provider needs to make improvements. Please see the safe and well-led sections of this full report.

You can see what action we have asked the provider to take at the end of this full report.

We discussed our concerns with the provider who took action to ensure improvements were made and risks minimised.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Conifers Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified a breach of regulations in relation to the safe care and treatment linked to the management of medicines.

Please see the action we have told the provider to take at the end of this report.

### Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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?**

The service was not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

### **Is the service well-led?**

The service was not always well-led.

Details are in our well-led findings below.

**Requires Improvement** ●

# Conifers 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 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 first visit as part of this inspection was carried out by one inspector and one medicines inspector on 27 January 2021. A further visit took place on 25th February 2021 and was carried out by one inspector and an inspection manager.

#### Service and service type

Conifers 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 on the first day and announced on the second day.

#### What we did before the inspection

Before the inspection we reviewed information we held about the service. The provider was not asked to complete a provider information return prior to the inspection. This is information we require providers to send us to give us 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 judgements in this report. We sought feedback from the local authority commissioners of the service to help us plan the inspection effectively. We used all this information to plan our inspection

During the inspection

We spoke with four people who used the service and five relatives shared their views of the service. We spoke with four members of staff, the provider and two deputy managers. Also three members of staff responded with their feedback through email.

During the inspection we reviewed five medicine administration records, medicines stocks and storage and observed medicines administration. We looked at records linked to people's care and the management of the service. Following the inspection, we requested additional information including about people's care, medicines, training and audits at the home.

On the second visit 25th February 2021 we spoke with four members of staff, the provider and a deputy manager.

After the inspection

We continued to communicate with the provider, and further information was sent by the provider in response to the feedback provided during the inspection visit. In addition, we looked at emails and letters sent to us by staff. The provider forwarded feedback from six relatives who shared their views, as well as eight members of staff.

# 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 good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Using medicines safely

- Medicines records did not always support and evidence that people medicines had been administered correctly. For example, two records showed that more doses of medicine had been given than were recorded as received into the home. Where variable doses of medicine were prescribed the actual dose given was not always recorded. The reason for non-administration was not always clearly recorded.
- The required controlled drugs records were not always completed to evidence the safe handling of these medicines. We saw examples of both duplicate and missing records of administration. We also found examples where doses were not administered as frequently as prescribed. Not all Controlled Drugs were entered into the Controlled Drugs Register.
- Medicines audits were completed but had not fully identified the issues found during the inspection.

We found no evidence that people had been harmed, however systems had not been robust enough to ensure medicines safety was effectively managed. This placed people at risk of harm. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Although we received evidence that some medicines training had been delivered to staff, we were not fully assured that an annual review of knowledge, skills, competencies and accredited training had been carried out as per national guidance.
- Systems were in place to ensure medicines were ordered, received and disposed of appropriately. Medicines including those needing refrigeration were stored securely. However, we discussed with the provider to seek advice to ensure the Controlled Drugs cupboard meet with current standards.

### Assessing risk, safety monitoring and management; Preventing and controlling infection

- Staff completed risk assessments in key areas such as moving and handling, falls and skin integrity. Staff were knowledgeable of the action to take to minimise these risks.
- Nutritional risk assessments were completed to ensure people received adequate nutrition and hydration. People told us they were happy with the meals provided and they had enough to eat and drink.
- A toilet seat was in need of repair it moved when it was sat upon and a bath hoist wasn't working effectively. This posed a potential risk to people's safety.
- We found no evidence that people had been harmed and discussed our concerns with the provider. They explained they were prioritising repairs to limit the risk and spread of infection from Covid-19. They assured us they would review the areas we had identified.
- Staff received training and regular infection control audits were undertaken to ensure standards were

maintained during the pandemic. A staff member said, "The training has been a lot but very good from [provider]."

- The management team and staff had a good understanding of supporting people safely during the current pandemic. The provider had developed relevant and enhanced infection control practices and protocols for staff to follow. A staff member said, "We have never been short of PPE and we have had so much guidance and training which is good."
- We checked personal protective equipment (PPE) and found sufficient stocks available and staff confirmed they were not short of equipment. From our observations staff used PPE correctly, such as disposable gloves, masks and aprons.
- Looking at IPC to determine the prevention and management of infection, The Conifers had remained covid free since the beginning of the pandemic.

#### Learning lessons when things go wrong

- The management team reviewed incidents to ensure risks were reassessed to prevent reoccurrence where possible and update any actions that were identified. However we discussed with the provider the introduction of further systems to be in place, to ensure risks are minimised and discussed when mistakes were made. Such systems enable the service to reflect, evaluate incidents and learn from them.

#### Systems and processes to safeguard people from the risk of abuse

- People gave positive feedback about their relationship with staff and said they trusted them. One person commented, "I never had brothers and sisters, I do now."
- Staff understood their responsibilities around safeguarding people. They were able to explain safeguarding processes should they witness any signs of abuse. Evidence of training was confirmed through discussion with staff and records looked at.

#### Staffing and recruitment

- Staff helped people quickly if they needed support and were attentive to people's needs. People told us they did not have to wait for help and staff said they were able to spend time with people in a relaxed way.
- Staff continued to be recruited safely. The provider continued to ensure checks had been carried out prior to staff commencing employment. A recently employed member of staff said, "The employment recruitment process I felt was thorough and all checks were done before starting work."

# 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 the last inspection this key question was rated as requires improvement. At this inspection this key question remains the same. This meant some aspects of service management and leadership were inconsistent. Care was person-centred but not always supported by effective systems to ensure safe, high-quality care.

Continuous learning and improving care

- The registered manager continued to regularly assess and monitor the service through formal and informal methods such as audits, and meetings with people. We saw evidence they had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop and improve the service.
- However, audit processes had not identified issues that we had highlighted during this inspection. In particular, medication audits did not always identify mistakes and ensure people received their medication as required. There was a risk that people may not maintain their health and wellbeing through poor medicines management.

We recommend the provider reviews their quality assurance systems, including the frequency and effectiveness of audits, to ensure the safety and quality of people's care are monitored efficiently and consistently.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider supported staff to deliver person centred care to people. Staff consistently told us they were supported by the provider to develop their skills and knowledge, access resources and given guidance and direction in a positive way. People told us they felt able to talk with the provider. One person told us the provider always asked for feedback about the service. They commented, "We're asked what we think about anything."

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

- Improvements were required with regards to some aspects of record-keeping. This was specifically in relation to the management of people's medicines, which we have reported on within the 'safe' section of this report.
- The provider understood their legal obligations, including conditions of the Care Quality Commission (CQC) registration. They had submitted statutory notifications to CQC in line with current regulations. We discussed with the management team of situations when notifications needed to be sent. This was to ensure they were knowledgeable about current guidance being followed and CQC were notified of all significant events.

- The provider gave direction to staff. Staff told us they received clear leadership and could speak to the provider for guidance. Staff praised the provider for the way in which they worked with them and told us they felt part of a team that was appreciated by the provider.

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

- The provider encouraged candour through openness. Staff spoken with confirmed this. One staff member said, "[Provider] is very open and honest with us. We always discuss any issues that may go wrong and learn from them." People told us good communication and relationships had been developed between staff, the provider, and people who lived at the home.

Working in partnership with others

- The provider worked with other agencies and health professionals to support collaborative working. For example, they attended local forums to share and learn about best practice and guidance and implemented this within the service.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment  Medicines records did not always support and evidence that people's medicines had been administered correctly.  The required controlled drugs records were not always completed to evidence the safe handling of these medicines.