

Loven Larchwood Limited

Larchwood Nursing and Residential Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

Larchwood Nursing and Residential Home is care home providing personal and nursing care to 34 people aged 65 and over at the time of the inspection. Some of those people were living with dementia. The service can support up to 48 people.

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

People we spoke with were very happy living at Larchwood. One relative we spoke with said, "I've been very impressed with [Family member's] care. Staff are lovely and delightful."

Overall improvements had been made to the medication processes. Although we did find improvements were required in the records, the peripatetic manager provided evidence that these had been dealt with appropriately.

Systems ensured that people's risks were well managed, and lessons were learnt when things went wrong. There was an open culture within the service, where people and staff could approach the peripatetic manager who acted on concerns raised to make improvements to people's care.

The peripatetic manager notified the CQC of incidents they were required to. The peripatetic manager and staff promoted satisfactory infection control and cross contamination processes.

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 2 May 2019).

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.

The service remains requires improvement. This service has been rated either requires improvement or inadequate for the last four inspections.

Why we inspected

We undertook this focused inspection to check they had made the necessary improvements and to confirm they now met the legal requirement. This report only covers our findings in relation to the Key Questions Safe and Well-led.

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

remained the same. 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 Larchwood Nursing and Residential 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.

Larchwood Nursing and Residential 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

This inspection was undertaken by one inspector.

Service and service type

Larchwood Nursing and Residential 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.

The service had a manager registered with the Care Quality Commission. Although they are currently on maternity leave and a peripatetic manager was covering the service. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

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 health professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and four relatives about their experience of the care provided. We spoke with six members of staff including the peripatetic manager, regional support manager, senior care worker and care workers.

We reviewed a range of records. This included one person's care records and multiple medication records. A variety of records relating to the management of the service, including, audits, policies and procedures were viewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We received feedback from one professional who had recently visited 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.

Using medicines safely

At the last inspection the provider had failed to ensure the proper and safe management of medicines. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

- Staff received training and competency checks to ensure they had the skills to support people safely with their medicines. One person told us, "[Staff] make sure I take my tablets."
- People had protocols in place for any as and when required (PRN) medicines and these were understood and followed by the staff team. Staff completed audits and checks of medication stock to ensure that medicines were being handled and administered safely.
- Medicines were mainly administered safely. We observed that staff explained to people and sought their permission before undertaking a health check. During our observations we found a couple of mistakes with recording. The manager told us they would follow this up with a staff supervision. We received evidence following the inspection that this had been undertaken

Systems and processes to safeguard people from the risk of abuse

- Staff had been trained in safeguarding and told us what action they would take if they had any concerns around poor care and harm.
- Staff were aware of the provider's safeguarding systems and procedures. A staff member said, "I have had training in safeguarding, and I would definitely report any concerns and feel I would be listened to. If I wasn't, I would report it to the local authority, CQC or police."
- Relatives told us that the care and support staff gave their family member reassured them. A relative said, "I've never been concerned about anything because they look after [relative] well."
- Relatives knew how to raise any concerns they may have had. They told us communication with the registered manager was good. Although at the present time they are on maternity leave.

Assessing risk, safety monitoring and management

- Risk assessments were in place for people's known risks. For example, for a person at risk of falls and a person at risk of poor skin integrity.
- Risk assessments assessed the risks for people and the corresponding care plan gave guidance for staff. This included how to support these risks safely and what to look out for and when to seek help, including

seeking external professional guidance.

- We observed staff supporting people safely and patiently. Staff were able to explain the people's risks and identify their individual needs.

Staffing and recruitment

- Recruitment checks continue to be undertaken to make sure that staff were suitable to work with the people they were supporting. This included a criminal records check, a health declaration and obtaining references.
- There was a mixed view on staffing levels, but everyone agreed that people's basic needs were being met, although staff mentioned, sometimes people had to wait a short while. One relative said, "[Staff] probably don't always have enough staff to support everyone quickly. Staff seemed to be always busy." Another relative told us, "[Staff] have always given me time and they answer my questions."

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.

Learning lessons when things go wrong

- Staff record any incidents or accidents. The management team analysed these and discussed any learning with all staff at relevant meetings. Staff confirmed that lessons were learnt and shared with other staff.

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 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.

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

- People were involved in making decisions about the care they received.
- The manager and staff encouraged feedback and acted on it to improve the service.
- People had knowledge of who the manager was and felt they could speak up if they needed to. A relative said, "I've been impressed with the care that [relative] receives". Another relative told us, "The [peripatetic] manager has always been pleasant, and we know they are doing a difficult job".

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 manager was aware of the need to be open and transparent with people and their relatives when mistakes happened.
- People and their relatives told us when an error was made management informed them of the incident and told them the action that was being taken to ensure it didn't happen again.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements, Continuous learning and improving care

- The registered manager was on maternity leave at the time of the inspection. The service was well-run by a peripatetic manager. The peripatetic manager was accountable for their staff and understood the importance of their roles.
- Audits were completed on a wide range of areas of the service. Information gathered from audits and from the review of incidents and accidents was used to improve the service.
- Staff told us they were well supported. There were staff meetings which provided a forum for discussion. One member of staff told us, "The [peripatetic] manager is approachable and always willing to help. They are learning about the residents, but we can always ask questions."
- Staff told us, that the peripatetic manager was visible in the service and was available if anyone needed to speak with them. One staff member said, "[Peripatetic manager] is approachable, their door is always open."
- Records showed that legally required notifications were submitted to the CQC as required, and when things went wrong there was evidence that people and their relatives were responded to and kept informed.

Working in partnership with others

- The staff team worked in partnership with healthcare professionals to ensure people received appropriate care with good outcomes. The local health professionals gave the following feedback, 'The service was very open and transparent, they invited us back to review our residents whenever needed. They were keen to learn and be supported to improve, they asked for feedback from our visit.'