

Flightcare Limited

Courtfield Lodge

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

About the service

Courtfield lodge is a residential care home providing personal care for up to 70 older people or, people living with a dementia in purpose built accommodation over two floors. There was 34 people living in the service at the time of the inspection.

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

We made recommendations in relation to the management of medicines and the training of staff to complete these. Staff knew what medicines people took and observed people taking them. Safeguarding investigations had been undertaken and referrals made to the local authority. People and relatives told us people were safe in the service. Staff were recruited safely. There was a recruitment drive ongoing and a number of new staff had started at the service. We received mixed feedback some people said that the staff numbers were being filled with the use of agency staff. Risks had been assessed in the service.

Staff were positive about the new manager and the changes being made in the service. The provider told us they had sent letters to all relatives when the manager came into post. We received mixed feedback about the support provided to people and staff. Team and flash meetings were taking place and records of the topics discussed had been recorded. A range of audits and monitoring was seen. A range of policies were seen and there was evidence of the involvement of professionals in the service.

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

Rating at last inspection

The last rating for this service was Good (published 15 June 2021).

Why we inspected

We undertook this focused inspection to review the key questions of safe and well-led only. 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. 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 Courtfield lodge 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.

Courtfield Lodge

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

Two inspectors and an Expert by Experience undertook the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Courtfield lodge 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 however they had not yet registered with the Care Quality Commission. They confirmed they have commenced the application to become registered with the Care Quality Commission. This would mean that they and the provider are 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

Prior to our inspection we looked at all of the information we held about the service. This included complaints or concerns, investigations or notifications which the provider is required to send to us by law.

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. We used all of this information to plan our inspection.

During the inspection

We spoke with two people and undertook observations in communal areas in the service. We spoke with five staff this included, three care staff, the clinical lead and the newly recruited manager. With permission we also spoke with the relatives of five people over the telephone and two people in receipt of care. We sought feedback from three professionals. We looked at a range of records these included, risk assessments, investigations, staff recruitment and records relating to the operation and management of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We emailed a number of staff to ask about their experiences of working at the home, three staff provided information

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 remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were being managed. Staff told us they had received medicines training, and we saw some evidence of training undertaken. However, one staff record for theory training had not been completed in full. The manager took immediate action to ensure this was addressed. One person told us they had no concerns in relation to their medicines. Relatives said, "Yes, they do keep me informed and tell me which tablets [person] is taking on a daily basis." However, one said, "I haven't had any communication with [Person's] new nurse (Care staff), so I don't know (about their medicines)."
- We observed one of the medicine rounds. Whilst no harm occurred, we noted improvements were required in relation to the handling of medicines and recording following administration. The manager confirmed following our inspection that an immediate competency check and supervision had been completed, meaning staff had the required knowledge and skills to administer people's medicines safely.
- Records had been developed for recording the fridge and room temperatures for storing medicines. However, these had not been completed regularly. One room had no thermometer and the second room we noted temperatures were being recorded from the air conditioning unit. The manager took immediate action to ensure temperatures were being recorded in line with best practice guidance.

We recommend the provider consider current guidance on ensuring medicines were provided to people in line with current best practice. And that all staff complete training to support the safe administration of medicines.

- Staff responsible for administering medicines understood people's needs. We observed people taking their medicines and saw that the staff member had a good rapport with them. Records were checked and signed and, the medicines trolley was locked in between each administration.

Staffing and recruitment

- Staff were recruited safely. Staffing numbers were sufficient. We received mixed feedback about the staffing in the service. Staff said that there was, "Enough staff to look after people." However, another said, "No, on paper there might be, but we rely on agency staff a lot and, the dependency tool used isn't reflective of the actual workload" and, "Another member of staff around meal-times would be good."
- The manager told us they had undertaken a significant recruitment programme and staffing numbers were increasing in the service. They told us where agency staff were used to cover gaps, they used the same agency to support consistency of care.
- A visiting professional told us, "I have noted a higher use of agency staff but there has always been a regular senior on duty when I have visited." We noted a number of newly recruited staff on duty on the day of the inspection.

- A relative told us, "Unfortunately so many staff have changed. But what I have seen so far is that [person] has been looked after well. But they need more qualified staff trained in dementia to provide stimulating activities for the residents [people who used the service]." One person who used the service said, "They help with everything [person] needs. They come quite quick and help. There are new faces in the home. They are very good I think they are doing very well."
- Staff records confirmed they had been recruited safely, relevant checks had been completed. Staff confirmed suitable recruitment procedures were followed. This ensured people were supported by an appropriate staff team. A staff member told us the manager, "Has employed staff who have a good work ethic about themselves."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from the risks of abuse. Records confirmed safeguarding allegations and investigations had been completed and, referrals to the local authority had been made. The findings were noted as well as the actions taken as a result.
- People and relatives told us they were safe in the service. They said, "Oh yes most definitely, it's a lovely home, I can't praise it enough." Staff understood the actions to take if abuse was suspected. They told us, "I would report it to the manager and senior in charge and make sure the correct paperwork is followed up." Professionals told us they felt people were safe in the service.
- Incidents and accidents were noted and reflected where safeguarding investigations had been completed. Summary records had been completed to record where incidents and accidents had occurred. The service told us about the actions taken as a result of these and confirmed the actions taken would be recorded in more detail going forward. This would support lessons learned.

Assessing risk, safety monitoring and management

- Risks were assessed and managed. Environmental and individual risk assessments had been developed, and evidence of servicing and checks on the environment and equipment was seen.
- Fire risk assessments had been completed. We saw evidence of fire evacuation logs to confirm fire drills had been undertaken. However, they required more detail about the drill and the findings or actions required going forward. The manager confirmed they would ensure records were detailed to provide information about the findings.
- We undertook a tour of the building. Areas were clean and tidy and free from clutter. The manager took immediate actions to address the minor issues in the environment. An example was a bracket that required removal from a corridor wall. The manager told us of their plans to improve the environment for people who used the service. This included themed corridors and changes to the communal areas. This would support a more positive living environment for people to live in.

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.

- One staff member told us, "Over all COVID-19 has been managed well, tests are taken and protocols are being followed as per government and company policies. There is enough PPE etc. I have had both vaccines and a booster." We saw records to confirm the actions taken by the management to ensure sufficient numbers of staff were in place to undertake cleaning schedules in the service.

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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People and staff were sometimes engaged and involved. Not all relatives told us they felt involved or listened to in the service. They said, "No we don't feel supported. There are a few staffing issues, although the place is cleaner and the general feel of the home is better. There is nothing for the residents [people who used the service]." However, others told us, "Yes we do feel supported and listened to, very much so" and, "(They) talk to her about changes in the home (service) and keep her involved."
- We saw evidence of completed questionnaires and surveys for people and relatives. The dates for these were prior to the last inspection. There was a record of the actions taken. Some relatives told us they had been asked for their views and had attended meetings. Comments included, "Yes I have completed a couple of questionnaires, and I have been invited to relatives meetings" and, "No I haven't had a questionnaire but the manager has invited us to relatives meetings in the new year."
- Staff told us regular meetings were taking place. One said, "We often have staff meetings daily regarding any changes to any residents or changes around the home. We are asked at the end of the meetings whether there is anything we would like to express." However, another said, "We do have staff meetings we can express our views and make suggestions but rarely are they actioned after a management decision has been made." Evidence that clinical and daily flash meetings were being held was seen. These included the topics discussed and the dates for these
- We saw evidence of completed staff questionnaires, however these had not been dated.

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

- The manager and the staff team were clear about their roles and responsibilities. The manager was new to the service and had commenced the process of registering with the Care Quality Commission. The manager understood his role and responsibilities and discussed the changes planned to make improvements.
- Not all people were able to confirm they had met the manager. One said, "I have met the new manager twice, but not spoken to them." However another told us, "Yes I have met the new manager and she is good." We raised this with the manager during feedback, he told us all relatives had been contacted by letter on commencement to his post.
- Staff were positive about the new manager. Comments included, "As of now I feel I haven't got any concerns within my job role, if I ever felt like I needed to speak to anyone I would most definitely speak to [manager] or [deputy manager] I feel they are very approachable", "[Manager] is a good manager is making

changes but the right changes, things have improved since he came to post, it is a team, all staff are involved" and, "The manager is approachable and supports the ethos of teamwork."

- Audits and monitoring of the service was ongoing. The manager told us they were looking at developing electronic systems to monitor the service. Staff confirmed the manager was introducing different technology which had been commented on positively.
- We observed staff undertaking their duties in a timely manner during the inspection.

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 understood its responsibility and duty of candour. A range of audits had been completed. Areas covered included, care plans, staff files and infection prevention and control.

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

- A person centred, and open culture which supported good outcomes for people had been developed. One person told us they, "Couldn't get any better care. I couldn't have come to a better place." Another said, "They have been fantastic and would recommend it (Courtfield lodge) to anyone."
- All staff members were supportive of the inspection process and our requests for information was provided promptly to the inspection team on the day as well as following the inspection.
- Certificates of registration and the ratings from the last inspection were on display in the entrance to the service, as well as their employers liability insurance certificate.

Continuous learning and improving care

- The manager had ensured that continuous learning was ongoing in the service. A range of information and guidance was on display and policies and procedures were in place for staff to access to support the delivery of care.

Working in partnership with others

- The service worked in partnership with others.
- Good working relationships had been developed. There was evidence of the involvement of professionals involved. One person we spoke with told us that the staff involved professionals when it was required. We received positive feedback from a professional who had visited the service. They told us, "If extra support is needed for a [person] the staff will call me and do follow the advice given."