

Buckland Care Limited

The Orchards Residential Home

Inspection report

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Date of inspection visit:
24 March 2022

Date of publication:
21 April 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

The Orchards is a residential care home providing accommodation to up to 44 people. At the time of our inspection there were 39 people living at the service.

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

People living at The Orchards received safe care from skilled and knowledgeable staff. Staff knew how to identify and report any concerns. The provider had safe recruitment and selection processes in place.

Risks to people's safety and well-being were managed through a risk management process. There were sufficient staff deployed to meet people's needs.

Medicines were managed safely, and people received their medicines as prescribed. The provider had made significant changes and ensured there were clear processes and procedures to manage all aspects of medicines safely.

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.

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.

The home was well-led by a registered manager who was committed to improving people's quality of life. We received positive feedback about the management of the home from people, relatives and staff. The provider and registered manager had made significant changes to the service including the environment. They had effective quality assurance processes which were used to improve people's care. The service had a clear management and staffing structure in place and staff worked well as a team. Staff worked well with external social and health care professionals.

Rating at last inspection

The last rating for this service was good (published 26 September 2019)

Why we inspected

We received concerns in relation to staffing, recruitment, staff knowledge of people's needs and management of the home. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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 remained good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The orchards Residential 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.

The Orchards Residential Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on the specific concerns we had in relation to staffing, recruitment, staff knowledge of people's needs and management of the home.

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 one inspector.

Service and service type

The Orchards 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. This means 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

We reviewed information we had received about the service. 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. 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. This information helps support our inspections. We looked at notifications received from the provider. A notification is information about important events which the provider is required to tell us about by law. This ensured we were addressing any areas of concern. We looked at the service's last inspection report. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service. Some people living in the home could not verbally give us feedback. As such we looked around the home and observed the way staff interacted with people. We looked at three people's care records and four medicine administration records (MAR). We spoke with five members of staff including the area operations manager, the registered manager, carers and domestic staff. We reviewed a range of records relating to people's care and the way the service was managed. These included staff training records, five staff recruitment files, quality assurance audits, incidents and accidents reports, complaints records, and records relating to the management of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We received further feedback from five staff, five relatives and three healthcare professionals.

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.

The purpose of this inspection was to check specific concerns we had about staffing, recruitment, staff knowledge of people's needs.

Assessing risk, safety monitoring and management

- We had received concerns of lack of staff knowledge of people's needs. We found staff knew people well. Staff regularly assessed risks associated with people's care and well-being and took appropriate action to ensure these risks were managed and that people were safe.
- People's risk assessments included areas such as nutrition, choking and pressure area management. Staff were familiar with and followed people's risk management plans.
- People felt safe and acknowledged that the team was meticulous in preventing infections and noted that extra regulations had been introduced recently to increase existing procedures. These extra measures did not impact on people's rights and well-being.
- People's environmental safety was maintained through the maintenance and monitoring of systems and equipment.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- We had received concerns of staff shortages. During the inspection we observed staff did not look rushed and responded to call bells in a timely manner. One person told us, "There is always someone when I need help, they are all nice."
- Relatives said they had no reason to think there were not enough staff.
- We looked at staffing rotas and these showed planned staffing levels were often met apart from when there were short notice staff absences. Staff told us the registered manager did all they could to ensure there

were enough staff at all times.

- They registered manager told us they were actively recruiting and were now fully staffed.
- We had received concerns of poor recruitment practices. We found, the provider followed safe recruitment practices and ensured people were protected against the employment of unsuitable staff. Appropriate recruitment checks were carried out as standard practice including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and harm and they said they trusted staff to keep them safe. One person told us, "I feel safe, they look after me well. If there is something I am not happy about, I tell them."
- Staff received regular safeguarding training and updates. They were able to tell us about different types of abuse and what steps they would take if they believed people were at risk of harm. One member of staff said, "Yes I know whom to report to for any abuse noticed within my organisation. Following the organisational policies and procedures, Care Quality Commission (CQC) could be contacted if matters are not being handled properly or through whistleblowing."
- The provider had a safeguarding policy in place which staff followed. Where concerns had been identified, the registered manager had raised these issues with the local authority safeguarding team and worked to help resolve the issues.

Using medicines safely

- People received their medicines as prescribed and the service had safe medicine storage systems in place.
- We observed staff administering medicines to people in line with their prescriptions. There was accurate recording of the administration of medicines. People on 'when required' medicines had a PRN protocol for each medicine which guided staff.
- Staff met good practice standards described in relevant national guidance, including in relation to non-prescribed medicines. Staff had been trained in administering medicines and their competence regularly checked.
- The provider had a medicine policy in place which guided staff on how to administer and manage medicines safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections. Thorough checks were in place prior to visitors crossing the threshold into the service.
- 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. Regular testing was in place to maintain staff and people's safety.
- 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. Management plans, policies and procedures were in place, implemented in practice and observed to be followed by staff.
- 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 understood and fulfilled their responsibilities to raise concerns and report incidents and near misses; they were fully supported when they did so.
- The registered manager ensured they reflected on where things could have been improved and used this as an opportunity to improve the service for people and staff. For example, following feedback through surveys, people and staffs' views were now sought on the wider service and more involved in changes around the service.
- Discussions with staff showed there had been learning following shortfalls. Records of staff meetings also highlighted where learning and change had been implemented.

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

The purpose of this inspection was to check specific concerns we had about the management of the home.

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

- We had received concerns of poor management of the home. We found the home was managed well.
- People told us the home was well led and said, "Manager does a good job and listens when I say what I want to say" and "[Manager] comes around to talk to me. I think she is alright."
- Relatives were complimentary of the way the home was managed and commented, "I believe the Orchards is well managed. I visit the home on a regular basis and have a good relationship with the management and staff, which has given me the confidence that the home is well run", "I believe it is well managed. [Manager] is regularly seen around the home and I have witnessed her talking to residents and my father about his or their needs" and "The Orchards is very well managed. It has a friendly culture and meals, activities, personal care etc are all run efficiently so that residents feel part of a community."
- Staff were complimentary of the support they received from the management team. Staff said, "My manager is very approachable and supportive. They demonstrated this through worst two years ever by being a great morale booster and support to all staff and residents", "[Manager] has been operating an open door policy and has been honest too and do listen attentively whenever issues are brought to her privately in her office. Some of the issues may take time because of administrative bottlenecks often which we know especially when money is involved" and "[Manager] is very open and honest, she understands me and listens even when she is really busy. I was struggling a few months ago with my job role and [Manager] has supported me listened and been able to change my role in the home."

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

- The registered manager had been in post for four years and had improved the home to a good standard. They were a knowledgeable and established registered manager with lots of experience. They had created a clear management and staffing structure and staff were aware of their roles and responsibilities.
- The registered manager was supported by an operations manager and were considering appointing a deputy manager. They received support from the provider, however, at times there was lack of understanding around need for changes. For example, approvals for environmental changes took longer than necessary pending approval of different quotes for the work required.
- Staff understood their roles and responsibilities, were motivated, and had confidence in the management team. It was clear The Orchards had had some challenges throughout the pandemic which had affected

staffing levels, but they were doing all they could to continuously recruit.

- There was significant emphasis on continuously improving the service. The staff team assessed the quality and safety of the service through audits. Audits included all aspects of care including health and safety checks, safe management of medicines and people's care records.
- The provider had a 'You said, We Did' approach to improving care. For example, people and relatives had identified shortage of skilled staff to meet people's needs. The registered manager had introduced further staff competencies as well as recruited new staff. The home now had staff with mixed skill sets staff with various qualifications enabling them to give good care.

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 registered manager and provider met their responsibilities in relation to duty of candour. Duty of candour requires that providers are open and transparent with people who use services and other people acting lawfully on their behalf in relation to care and treatment.
- Services that provide health and social care to people are required to inform the Care Quality Commission (CQC), of important events that happen in the service. The registered manager was aware of their responsibilities and had systems in place to report appropriately to CQC about reportable events.

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

- People and their relatives had opportunities to raise any comments via an open-door policy at any time.
- The service involved people, their families and friends in a meaningful way. People and their relatives had opportunities to provide feedback through surveys, suggestion boxes and care reviews. The information gathered was used to improve the service. For example, a survey had indicated that people were not always consulted and involved when environmental changes were made. As such, people had been involved in decisions around garden refurbishment and home decorations.
- Staff told us they felt listened to, valued and able to contribute to the improvement of care. They said, "Our manager is happy to listen to us. We have any complaints for our shift, we discuss that, she gives us positive ideas" and "Manager welcomes open suggestions during meetings and privately in her office. I have made certain suggestions during our meetings with her and she did listen to them. The most recent being the issue of staff recruitment and now we have reasonable number of staff."

Working in partnership with others

- The service was transparent and collaborative with relevant external stakeholders and agencies. It worked in partnership with key organisations such as healthcare professionals to support care provision, service development and joined-up care.
- The home had faced challenges during the pandemic when some professionals had stopped visiting the home resulting in disruption of people's care. However, this was starting to improve.
- Records showed the provider also worked closely in partnership with the safeguarding team and multidisciplinary teams to support safe care provision. Advice was sought, and referrals were made in a timely manner which allowed continuity of care.