

Cadogan Care Limited

Goldcrest

Inspection report

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Tel: 01305830400

Date of inspection visit:
19 October 2022

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23 November 2022

Ratings

Overall rating for this service	Inadequate ●
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Is the service safe?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Goldcrest is a residential care home providing personal care for up to 26 people. The service provides support to older people living with dementia. At the time of our inspection there were 12 people using the service. Goldcrest provides accommodation in one adapted building in a residential area of Weymouth.

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

People did not always receive their medicines as prescribed. The senior team addressed the issues identified immediately.

People lived in a home where most environmental risks had been identified and were being addressed. Additional risks identified by inspectors were addressed following our visit.

People were at reduced risk from harm. Risk management and medicines management had improved. Further work was required to ensure improved practice was embedded and consistent.

People were supported with their medicines by staff who had received training and been assessed as competent. This was an ongoing process with tailored support provided to staff when needed.

People were protected from the risks associated with cross infection.

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 Inadequate (published September 2022)

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains Inadequate.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We have found evidence that the provider needs to make further improvements. Please see the safe section of this full report.

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 Goldcrest on our website at 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 monitor the service and will take further action if needed.

We have identified a continued breach in relation to risk management at this inspection.

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 from the provider to understand what they will do to improve the standards of safety. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

Special Measures:

The overall rating for this service is 'Inadequate' and the service is therefore in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe. And there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it. And it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Goldcrest

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 Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 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 was carried out by two inspectors.

Service and service type

Goldcrest is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Goldcrest is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before 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 (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

During the inspection visit we spoke with five people living at Goldcrest and one relative. We spent time observing the care and support people received. We spoke with the manager, three members of the staff team and an agency member of staff. We also looked at records related to the four people's care, multiple people's medicines administration records, and records relating to the oversight of risk in 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 our last inspection this key question was rated Inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong; Using medicines safely.

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 12

- Most people received their medicines safely and as prescribed. Two people had received medicines that should have been given when required (PRN) at times contrary to the guidance in place. The manager and a senior member of staff had only identified one of these situations, prior to our inspection, and had started to address it. The manager assured us that they would continue with work to ensure staff fully understood when PRN medicines should be given.
- Medicines were stored securely and in line with legislation. The storage temperature of medicines had not been consistently recorded; some medicines do not work effectively if stored at the wrong temperature. Following our inspection, the temperature record was moved to a more accessible place to ensure staff to carried out this task.
- We noted some creams did not have the date they were opened recorded; creams need to be used within a specific time frame to be effective. A senior member of staff told us, following our visit, they had ordered stickers to put on tubes to support staff with this.
- Environmental risks we identified at the last inspection had been addressed but further risks had not been identified by the provider. We, therefore, highlighted a number of additional environmental risks. The manager told us these would all be addressed.
- Recording related to risk management had improved substantially in relation to the support people received to reposition themselves to protect their skin. Recording related to the support a person received with their continence aid was not always sufficient to monitor the support they had received.

Systems to assess, monitor and mitigate risks to the health, safety and welfare of people using the service had not been effective. Medication was not always administered as prescribed. This placed people at risk of

harm. This was a continued breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- People told us they felt safe. People who didn't use words to communicate due to their dementia sought out staff with smiles. When people were unsettled or disoriented, they responded positively to staff intervention.
- The risks people faced were reduced because staff had better understanding of their needs. They knew the support they needed to provide to reduce these risks. Where new staff did not know the detail of care plans, they told us they could check with staff who had been in the home longer and could also review care plans.
- People were supported with equipment safely.
- Health related risks were addressed. This work remained ongoing to ensure people received the most appropriate support.

Preventing and controlling infection

- We became assured that the provider was promoting safety through the layout and hygiene practices of the premises. The manager implemented a program to improve hand hygiene after our visit.
- We became assured that the provider was using PPE effectively and safely. The manager sought guidance from a health care professional with expertise in infection control and updated a member of staff's risk assessment regarding the use of PPE accordingly.
- 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 accessing testing for people using the service and staff.
- 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 have also signposted the provider to resources to develop their approach.

Visiting in care homes

- People were able to see personal and professional visitors without restrictions.

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 Systems to assess, monitor and mitigate risks to the health, safety and welfare of people using the service had not been effective. Medication was not always administered as prescribed. This placed people at risk of harm.