

Angel Care (Orchid Care Homes) Ltd

# Orchid Care Home

## Inspection report

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Swindon  
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Date of inspection visit:  
09 December 2020

Date of publication:  
29 December 2020

## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

### About the service

Orchid Care Home provides care to people who may require nursing care and for people living with dementia. Orchid Care Home accommodates up to 84 people in three separate units, each of which comprises separate purpose-adapted facilities. There were 51 people using the service at the time of the inspection.

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

People using the service felt safe. Staff had received training to enable them to recognise signs and symptoms of abuse and they felt confident in how to report these types of concerns. Risks to people were well managed. Individual risks had been considered and incorporated into care plans.

The home was clean and odour free. People were protected from the spread of infection. Staff had access to PPE and had received training in how and when to use it effectively. We observed staff used PPE appropriately.

There were sufficient staff with the correct skill mix on duty to support people with their required needs and keep them safe. Medicines were managed safely.

People and staff felt supported by the manager. The provider had effective systems and processes in place to ensure the quality and safety of the service. Staff were proud of the service and felt well supported by the manager and the provider.

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 (27 November 2019).

### Why we inspected

We undertook this targeted inspection to check on a specific concern we had about the management of medicines and concerns about staffing levels. The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific 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 found no evidence during this inspection that people were at risk of harm from these concerns.

### 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?

Inspected but not rated

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### Is the service well-led?

Inspected but not rated

At our last inspection we rated this key question Requires Improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Orchid Care Home

## **Detailed findings**

### Background to this inspection

#### The inspection

This was a targeted inspection aimed to check whether the provider had met the requirements of the specific concerns we had about staffing levels and management of medicines. We will assess all of the key questions at the next comprehensive inspection of the service.

#### Inspection team

This inspection was undertaken by two inspectors and an Expert by Experience. 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

Orchid 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.

There was no registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run. The service was run by a manager who had applied to register with the Care Quality Commission.

#### Notice of inspection

This inspection was announced. However, the specific date of the inspection was not given to the provider.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 asked the manager to provide us with electronic copies of various records such as four staff recruitment folders, a dependency tool, policies and staff meeting minutes. We used all of

this information to plan our inspection.

#### During the inspection

We reviewed a range of records. These included a variety of records relating to the management of the service, including health and safety records, and records related to management of medicines. We spoke with four members of staff, 11 people who used the service and eight relatives about their experience of the care provided.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at four people's care plans and at the provider's quality assurance systems.

# 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 Good. We have not changed the rating of this key question, as we have only looked at the part of the key questions we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about administration of medicines and staffing levels. We will assess all of the key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

- Risk assessments were personalised and regularly reviewed. These were in areas such as pressure sores, manual handling, self-neglect and behaviours that could challenge.
- People had individualised fire risk assessments and emergency evacuation plans where necessary. Fire drill records showed staff and people were involved in regular fire drills.
- The provider carried out regular health and safety, and maintenance checks. These included fire equipment, water and electrical equipment to ensure people's safety.

### Staffing and recruitment

- The provider operated a safe recruitment procedure which helped to ensure only staff who were suitable to work with vulnerable people were employed.
- Staff told us that staffing levels at the home were stable and described them as good. A member of staff told us, "We have enough staff to do our job without rushing." Records confirmed there were enough staff to meet people's needs.
- People told us the staffing levels were adequate to their needs. One person told us, "Staffing improved in the last 12 months." Another person told us, "There is usually staff around and you don't wait for a long time."

### Using medicines safely

- Medicines were managed safely. There were clear processes and systems to ensure they were ordered, stored, administered and disposed of safely. We checked a sample of medicines and found that the stock agreed with the records maintained which demonstrated safe systems were in place.
- The usage of medicines administered when required (PRN) was closely monitored and reviewed if there was an increase in usage. Antipsychotics were only used when necessary and were reviewed regularly. Antipsychotics are a type of psychiatric medication which are available on prescription to treat psychosis. Regular reviews took place by the mental health team.
- Pain management processes were in place. A pain assessment tool was used with people who were unable to express their pain verbally. Records were completed when PRN pain medicines were administered.

### 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.



# 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 Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key questions we have specific concerns about.

The purpose of this inspection was to check a specific concern we had about the overall management of the service. We will assess all of the key question at the next comprehensive inspection of the service.

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

- People and their relatives told us the service was well-led. One person told us, "The manager made a phenomenal difference, there was a 180-degree shift. She is interacting and engaging." Another person's relative told us, "I am very happy, since the manager took over again. She certainly puts work in, there is lots going on and now [person] seems happy and looks good on [IT application] and I have a visit this afternoon."
- Staff understood and were committed to the values promoted by the manager and the provider. The manager realised the potential in staff working for the service. There was an incentive scheme for staff who performed exceptionally well.
- Staff meetings were held regularly during which staff could discuss matters affecting people using the service, or recruitment and staffing matters. Staff were encouraged to comment and share ideas about how the practice and care might be improved. This demonstrated a focus on ensuring effective communication with staff in all roles.

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

- Leadership at the service had a clear vision of how they wanted the service to be and put people at the centre of what they did.
- The manager was supported by an operations director who regularly visited the service to provide the manager with guidance and support.
- The provider had quality assurance systems in place which were used effectively to monitor key aspects of the service. The manager completed audits and checks on a regular basis and acted to improve the service. There were appropriate systems in place to manage people's medicines and staffing levels.