

Four Seasons (Evedale) Limited

The Cedars and Larches

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

The Cedars and Larches is a residential care home providing personal and nursing care to up to 69 people in 2 adapted buildings. The service provides support to older people. Each building is over 2 floors with communal spaces for dining and relaxation. At the time of our inspection there were 54 people using the service.

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

Systems in place to monitor the quality of the service did not always identify gaps in recording of monitoring charts and investigation of accidents and incidents.

The registered manager was focused on developing a positive culture by strengthening the staff team and providing specific competency-based training for people to achieve better outcomes. People were regularly consulted to give feedback on the service; this was used to drive improvements.

Systems were in place to protect people from abuse. Risks to people were regularly assessed and appropriate measures were in place to minimise risk. Staff understood the principles of safeguarding people from the risk of abuse and were aware of how to raise a concern.

There were enough staff to meet people's care needs. Staff were recruited safely and appropriate checks were completed prior to employment. People received their prescribed medicines safely and staff followed correct infection control procedures.

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.

People told us they were happy with the support provided to people and staff were professional and friendly. The provider worked alongside other healthcare professionals to support people's care needs.

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 16 October 2019).

Why we inspected

We received concerns in relation to care and treatment. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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.

We found no evidence during this inspection that people were at risk of harm from this concern.

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 changed from good to requires improvement based on the findings of this inspection.

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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

The Cedars and Larches

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.

Inspection team

The inspection was carried out by 3 inspectors.

Service and service type

The Cedars and Larches 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. The Cedars and Larches is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we held about the service since the last inspection and we sought feedback from the local authority. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what

they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people using the service, 4 relatives and 2 healthcare professionals. We spoke with 5 staff members, including the registered manager, deputy manager, nurse, carer and domestic. We looked at 3 staff files in relation to recruitment. We reviewed a variety of records, including 6 care files and records relating to the management of the service including policies and procedures.

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 good. At this inspection the rating has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Learning lessons when things go wrong

- The system in place to record accidents and incidents did not ensure all incidents were investigated. We identified an incident which was not investigated, relating to a person's urinary catheter. This incident could have posed a risk.
- The registered manager took immediate action and the incident was investigated. We received an investigation report following the inspection.
- The registered manager was focused on strengthening the systems in place to ensure all accidents and incidents are recorded and analysis completed to minimise the risk of reoccurrence.

Assessing risk, safety monitoring and management

- People's care plans and risk assessments included information to guide staff on how to support people safely to minimise the risk of avoidable harm.
- Care plans and risk assessments were clinically focused to include specific health risks, for example, we saw information to support people with diabetes, choking risk, hypertension and epilepsy.
- Personal emergency evacuation plans were included in people's care records. This meant specific information could be shared in the event of a hospital admission or emergency evacuation of the building.
- The provider carried out regular checks to ensure the environment was safe for people, for example, maintenance, fire safety and equipment.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff understood how to recognise signs of abuse and report any concerns. One staff member told us, "If I had any concerns I would go to [manager]."
- People told us they felt safe. Comments included, "I feel totally safe, I am looked after well" and "Yes I feel safe, I press a bell if I need anything."
- The provider had a safeguarding policy in place and staff received training in safeguarding.

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

- There were enough staff to meet people's needs. One relative told us, "They are fully staffed now, I am very happy with the Home." The registered manager regularly reviewed staffing levels in line with people's care needs.
- Staff were recruited safely. Appropriate pre-employment checks were completed and Disclosure and Barring Service (DBS) checks were carried out prior to starting employment. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed safely and people received their prescribed medicines safely. A new ordering system was recently put in place to help minimise the risk of errors.
- Written protocols were in place to guide staff to administer "as and when required medicines".
- Staff received competency training on administering medicines to ensure staff remained competent in this area.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

There were no restrictions to visiting at the time of the inspection. The provider followed government guidance in relation to visiting procedures.

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 has changed to requires improvement. This meant the service management and leadership was inconsistent. The culture created by leaders was not fully embedded into the service to deliver consistent high-quality, person-centred care.

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

- Systems were in place to audit aspects of the home, however not all audits identified concerns found on the day. For example, food, fluid and cream charts were not always completed. The registered manager addressed this immediately by scheduling staff meetings and implementing new procedures following the inspection.
- People were weighed monthly, however people's weights were not monitored in relation to identifying trends for each person. The last analysis we saw was dated January 2023. The registered manager acted promptly and provided us with an up-to-date weights analysis and evidence of actions taken following the inspection.
- The provider and registered manager understood their responsibility to act with candour and statutory notifications were submitted to us in a timely manner.

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

- The provider and registered manager focused on providing a positive culture amongst the staff team to achieve positive outcomes for people, however, this was not fully embedded into the service.
- Plans were in place to help promote a positive culture for example, specific competency training and the registered manager supporting and communicating to staff on the floor to create an open and approachable environment.
- A range of person-centred activities were in place for people to take part in, this included meditation sessions, sing a longs and craftwork. This meant people were empowered and included in the Home to take part in an activity of their choice.
- Relatives told us they were happy with the care provided. Comments included, "It really is lovely, the people are so caring", "I don't have any issues at all, the staff are professional and friendly" and "Staff are friendly and approachable. The home is nice, they deal with everything professionally."

Continuous learning and improving care

- The registered manager was focusing on strengthening the staff team culture by making staff's role and responsibilities clearer. This meant care practices and the recording of care interventions would be more effective for people to achieve their outcomes.
- Following issues identified in relation to a person becoming distressed, the registered manager worked on clear effective communication with a healthcare professional to ensure specific support could be given in

the home, rather than seeking an alternate placement.

- Staff felt supported by management, comments included, "I feel supported by management to do my job properly, I have training and supervision", "We have seen a lot of change, things are better now. I am supported by [manager]" and "I am happy here, people are safe, I am supported to do my role."

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 was open and transparent about recent challenges they had faced within the service in relation to staffing and embedding systems and processes.

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

- The registered manager sought feedback from relatives, professionals and people using the service. We saw a "You Said, We Do" poster displayed sharing information on changes that were made following feedback. For example, the request for more themed events was actioned.

Working in partnership with others

- The provider worked in partnership with a variety of healthcare professionals, for example we saw involvement with the local advanced nurse practitioner, GP and district nursing team.