

Mr Mukesh Patel Orchard Lodge Care Home

Inspection report

Stanbridge Road Tilsworth Leighton Buzzard Bedfordshire LU7 9PN Date of inspection visit: 14 July 2020

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Ratings

Overall rating for this service

Inspected but not rated

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

Orchard Lodge Care home is a residential care home providing accommodation and nursing care to five older adults who may be living with dementia or life limiting conditions. The service can support up to 28 people. The service consists of two floors and has been adapted to support people living with dementia and physical disabilities. At the time of our inspection the first floor of the service was not being used and people were living on the ground floor.

People's experience of this service and what we found

We inspected this service to check for improvements in the areas we identified at our previous inspection in March 2020. We also received information from the local authority with concerns around there not being enough food and drink available at the service and staff not following infection control practices.

We inspected the care home from 11:00am to ensure that we saw people being supported with food and drink at lunch time.

People were supported safely with their pressure area care and health professionals were involved in this area. There was plentiful food and drink available and people were supported in line with their dietary requirements. Staff wore the correct PPE and the service was visibly very clean. However, improvements could be made to infection control processes when visitors enter the service. We have made a recommendation that this be reviewed.

The culture of the service had improved since our last inspection. However, some staff did not speak to people in a kind manner at all times. We have made a recommendation to the provider to support staff in this area. Some staff also told us that they did not feel comfortable raising concerns with the registered manager or the provider. We have made a recommendation that the provider work to support the staff team to do this.

We reviewed numerous documents and records about people's care and support. These were detailed and completed correctly by the staff team, giving a good overview of the support which people were receiving. Where shortfalls were found, these were being addressed by the management team.

Staff received training, supervision and competency assessments to ensure that they had the knowledge to support people safely. External health professionals were consulted to support people with their care needs where this was necessary.

Most staff interacted with people in a kind and compassionate manner and felt well supported by the registered manager and the provider. The registered manager was aware that the service still needed to make improvements and had plans in place to make and sustain these.

Rating at last inspection The last rating of this service was inadequate (published 03 April 2020)

Why we inspected

We undertook this targeted inspection to follow up on breaches found at the last inspection, to ensure that the service had made the necessary improvements. We also followed up on concerns found during visits by the local authority around the availability of food and drink, health professional involvement in people's care and the accuracy of people's care records.

CQC have introduced targeted inspections to follow up on Warning notices or breaches 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.

Please see the safe and well-led section of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Orchard Lodge Care Home on our website at www.cqc.org.uk

Follow up

The rating for this service remains unchanged and the service remains inadequate and in special measures. We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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
We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.	
The purpose of this inspection was to check specific concerns we had about Orchard Lodge Care Home. We will assess all of the key question at the next comprehensive inspection of the service.	
Is the service well-led?	Inspected but not rated
Is the service well-led? We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.	Inspected but not rated



Orchard Lodge Care Home 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.

Inspection team This inspection was completed by two inspectors.

Service and service type

Orchard Lodge Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 since the last inspection. We sought feedback from the local authority and other professionals who work with the service. The provider had not been asked to complete a recent provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection. We had requested information from the provider prior to the inspection and this information was used as part of the inspection plan.

During the inspection

We observed staff supporting people and spent time looking at areas of the service such as the kitchen. We spoke to nine members of staff including care staff, nursing staff, the deputy manager, the registered manager, the cook and activities coordinator, the registered manager and the provider.

After the inspection

We asked the provider to send us information relating to people's care records and concerns that we had at the last inspection. We sought clarification from the provider about the findings of our inspection.

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

The purpose of this inspection was to check specific concerns we had about Orchard lodge Care Home. We will assess all of the key question at the next comprehensive inspection of the service.

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

- At our last inspection people were at risk of harm as they were not being supported safely with regards to pressure area care. The manager and nursing staff were making decisions about people using equipment or not being supported with turning and repositioning regimes, without consulting relevant professionals.
- People were now receiving support from professionals such as occupational therapists and tissue viability nurses. This helped to ensure that equipment was safe for people to use and that people were receiving the correct support with their pressure care.
- We looked at people's pressure relieving equipment. This equipment was set correctly, and records showed that this was checked regularly. Staff also followed turning and repositioning regimes for people to help prevent pressure sores developing.
- People's care plans and records regarding pressure area care were detailed. Advice from health professionals had been used to update these so that staff were up to date with the correct way to support people with their pressure care.
- At our last inspection we found concerns where staff and nursing staff training did not equip them to understand and support people with complex needs, such as different dietary requirements. We also received concerns from the local authority that there was not enough food to support people to eat healthily. This meant that people would be at risk of malnutrition or dehydration.
- There was plenty of food at the service including fresh fruit and vegetables. Food prepared looked appetising and the cook and staff team had a good understanding of people's different dietary requirements. Food had been prepared based on people's needs and preferences.
- People were supported and encouraged to eat and drink regularly throughout the day. Detailed records were kept by the staff team to show how much people had to eat and drink. People at the service had gained weight because of the support they were being given to eat and drink healthily.

Staffing and recruitment

- At our last inspection we found that staff and nursing staff did not have the correct training and experience to support people safely. This had led to people receiving unsafe care.
- At this inspection staff and nursing staff had received training in areas relevant to their job role. This helped them have the knowledge to support people safely. The registered manager and nursing staff had also started to completed competencies to ensure that training had been effective.

• Staff and nursing staff told us about the training which they had received and how they then used this to support people safely.

Preventing and controlling infection

- We received concerns from the local authority about the cleanliness of the kitchen area at the service and that staff were not wearing the appropriate personal protective equipment (PPE) to support people safely during the COVID-19 pandemic.
- Staff and the management team were wearing the correct PPE and following government guidance regarding COVID-19 to promote people's safety and wellbeing.
- Measures were in place when visitors came to the home to help prevent the spread of COVID-19 including taking visitors temperatures. However, some improvements could be made to this process with regards to social distancing and taking temperatures immediately when visitors enter the building.

We have made a recommendation to the provider that they keep the infection control procedure for visitors in to the service under review and monitor this for improvements.

• The kitchen area was visibly clean and smelt pleasant. The rest of the service was also clean, and we observed domestic staff completing cleaning duties.

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

The purpose of this inspection was to check specific concerns we had about Orchard lodge Care Home. 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

- At our last inspection people were not being supported to achieve good outcomes and were not given the opportunity to be included and empowered to be involved in their care and support. Staff did not always treat people with kindness and in a person-centred manner.
- We observed that staff treated people with kindness and spoke to them with respect for the most part. However, some staff did not speak to people in a person-centred manner when supporting them to eat their meals.
- We fed this back to the provider and the registered manager. They told us that they would complete more observations of the care people receive at this time.

We have made a recommendation to the provider that they support staff to understand and improve their practice when speaking to people using the service.

• Some staff told us that they did not feel comfortable raising concerns with the registered manager or provider. They explained that they were concerned that their ideas would not be listened to and that they would receive negative feedback from the management team.

We have made a recommendation that the provider review the way that they communicate and support the staff team to communicate and feedback about the service.

- Due to the support that people were receiving they were achieving some good outcomes. This included people maintaining and putting on weight leading to better health. One person's health had improved to the point where they were able to access communal areas of the service again, having spent a large part of their time at the service, being supported in bed.
- Most of the staff team told us they found the registered manager and the provider supportive.

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

• At our last inspection staff and the management team were not clear about all aspects of their job role. Decisions were being made about people's care and support which put them at risk of harm. Records were not completed correctly and information about people's care needs was not always current for staff to follow.

• At this inspection the management and staff team were receiving appropriate training and support to understand and effectively complete their job roles. The registered manager was working with a clinical manager from another of the provider's services and an external consultancy company to support nursing staff with clinical supervision and observation. This ensured that they had the knowledge to support people safely.

• We reviewed various documentation about people's care including daily notes, food and fluid charts and pressure care recordings. These were all completed correctly and with detail.

• Plans were in place to continue to update and improve records and care plans. The deputy manager showed us how information was now going to be collated to ensure that it was up to date and more easily understood by staff members. This had been effective, and we saw that care plans and records were now easier to follow and understand.

• However, we did find that further improvements could be made to some areas of people's care plans. This included protocols for as and when required (PRN) medicines, care plans for short term care needs and Mental Capacity Assessment and best interest decisions. These documents would have benefitted from more detail. The registered manager assured us that they were aware of this and showed us evidence that this was being addressed.

Working in partnership with others

• At our last inspection there was a lack of partnership working with health professionals to ensure that people received the support that they needed.

• At this inspection the registered manager and staff team were working with health professionals such as tissue viability nurses, to ensure that people received the support they needed.

• The service was working with and being supported by the local authority and an external consultancy company. The registered manager explained that this would ensure that the service continued to improve and sustained any improvements that were made.