

First Care Services Limited

Orchard House Nursing Home

Inspection report

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Date of inspection visit:
18 January 2023

Date of publication:
01 February 2023

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

Orchard House Nursing Home is a nursing home providing personal and nursing care to 68 people with mental health needs and dementia at the time of the inspection. The home accommodates up to 72 people in one adapted building. People have access to their own bedroom along with communal spaces including lounges.

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

There were safeguarding procedures in place that were understood and followed by staff. Risks to people were assessed and reviewed. Medicines were managed in a safe way and there were infection control procedures in place. We found there were enough staff to keep people safe.

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.

There were systems in place to monitor the quality in the home, audits were completed. The registered manager was able to demonstrate when lessons were learned when things had gone wrong. People felt happy living in the home and staff felt supported and listened to. We were notified of events within the home as required.

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 30 August 2019).

Why we inspected

The inspection was prompted in part by notification of an incident following which a person using the service died. This incident is subject to further investigation by CQC as to whether any regulatory action should be taken. As a result, this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the management of risk of moving and handling. This inspection examined those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

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.

Orchard House Nursing 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 Health and Social Care Act 2008.

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 one inspector, a specialist nurse advisor (mental health) 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

Orchard House Nursing 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.

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

The 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 professionals who work with the service.

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

During our inspection we spoke with 2 people and 4 relatives. We also spoke with the registered manager and the director. We spoke with the care manager, three registered nurses and three care staff. We looked at the care records for 7 people. We checked the care they received matched the information in their records. We looked at records relating to the management of the service, including recruitment file and audits carried out within the home.

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 for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Individual risks to people were assessed, monitored and reviewed. This included any health needs. When incidents or changes had occurred, plans were updated to reflect this.
- During our inspection we observed several moving and handling occasions where staff supported people in a safe way and in line with their care plans. This included when people were hoisted. On one occasion we saw one person was not supported in line with their care plan, they came to no harm due to this. We spoke with the registered manager who took immediate action to resolve this and we were happy with the action they took.

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.

Systems and processes to safeguard people from the risk of abuse

- People were safe living in the home. One person told us, "The staff here make me feel safe. Nothing worries me here, it's too nice to have any worries".
- There were procedures in place to identify and report safeguarding concerns. These procedures were followed when needed, so that appropriate action could be taken.
- Staff had received training and understood when people may be at risk of abuse. One staff member told us, "I have had safeguarding training, its keeping people safe from abuse." They told us the management team raised safeguarding alerts and felt confident they did so when needed.

Staffing and recruitment

- There were enough staff available to support people. We saw staff were available for people when they needed support.
- People and relatives raised no concerns about staffing levels. One relative said, "I do think there's enough

staff for my relation". Another relative commented, "From what I've seen I think there's enough staff".

- There was a system in place that ensured the correct amount of staff were available for people, this was reviewed regularly. When people needed support from one staff member, we saw this was provided.
- Staff had received the relevant pre employment checks before they could start working in the home to ensure they were safe to work with people.

Using medicines safely

- People received their medicines when needed. Records we reviewed confirmed this. One person told us, "They bring me my tablets right here at this table. I take about 5 tablets to keep my insides well. They give me them every morning and every night".
- When people had 'as required medicines' there were protocols in place stating when this should be administered, and we saw people received this in line with these.
- Staff administering medicines to people had completed training and their competency was regularly checked to ensure they were safe to do so.

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 Personal Protective Equipment (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 placed on visiting and visitors could access the home freely.

Learning lessons when things go wrong

- The registered manager was able to demonstrate lessons had been learnt when things went wrong. Information was reviewed from safeguarding's and incidents and accidents to see if anything could be completed differently if they reoccurred.

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.

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

- The audits that were completed in the home were effective. These covered areas such as medicines management, infection control and audits of equipment such as slings. When areas of improvement had been identified there was evidence to show what action had been taken and how this information had been used to drive improvements.
- Systems had been introduced to ensure the registered manager had oversight in relation to moving and handling following the incident that had occurred within the home. This included staffs training and observations they completed.
- The registered manager told us, and we saw they completed a walk around of the service where they completed visual checks, they then compiled a daily audit log to show them any actions they needed to take or follow up on.
- Staff understood their roles and responsibilities and there were clear lines of delegation.
- Staff felt supported by the management team. They told us they had the opportunity raise concerns by attending staff meetings and supervisions with the care manager.
- The registered manager had notified us about events that had happened within the service, as required.

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

- People and relatives spoke positively about the home and the care they received. One relative said, "They always ask me if I want to speak to the nurse before I leave to keep me up to date. They ask me verbally all the time if I'm happy. I speak to a nurse if not happy. It gives me peace of mind my relation being here. They are happier and more settled than before". Another relative told us, "I think it's well led; they tell me when things go wrong. They communicate well. I can go in the office anytime to ask questions".
- Staff and professionals involved with people's care worked closely with them to ensure they received good outcomes and the care and support they required.

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

- People felt listened to. Feedback was sought from people who used the service. A survey was completed in June 2022 and this collated all the feedback. This information was used to make improvements where needed however, the information we reviewed was positive.

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

- Duty of candour requirements were understood and met by the registered manager. When needed they worked openly with people and their families to ensure information was shared.

Working in partnership with others

- The service worked closely with other agencies to ensure people received the care they needed.