

Georgetown Care Limited

The Haven

Inspection report

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Ratings

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

Overall summary

About the service

The Haven is a residential care home providing accommodation and personal care for up to 12 older people in one adapted building. There were seven people using the service at the time of the inspection, some of whom were living with dementia.

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

Some action had been taken to make the environment more secure and safe for people, following concerns raised at our last inspection. However, other aspects had not been addressed and required further attention.

The measures taken to restrict access to the stairs to the second floor, were ineffective. This was because people could walk around or climb over the sofa, which had been positioned to restrict access. Locks had been fitted to the doors to rooms, which posed risks to people's safety. This included the sluice and boiler room, but the locks had not been set so they were not in working order. There was an external fire door, which although alarmed, did not have a lock on the outside. This had not been addressed, which posed a security risk.

Other than a window on the second floor, restrictors had been fitted to identified windows, to stop them being opened in full. This minimised the risk of people falling from a height. The provider had not undertaken an assessment of all other windows, to ensure people's safety. Mould had been removed from the walls in the laundry room. The cause of the leak had been attributed to blocked guttering outside. Redecoration was planned once the walls had dried out.

All toilets and bathrooms, except a shower, had been repaired and were in good working order. Bolts were fitted to the kitchen doors but these were not always used, to minimise risk, when staff were not in the vicinity. Cleaning substances had been moved from an unlocked cupboard to an outbuilding.

Water from hand wash basins in some areas of the home, was over 50 degrees. This increased the risk of scalding. The temperature of the water was being controlled by a thermostat on the boiler. This did not ensure a safe, consistent temperature of the water throughout the home at all times.

The home was experiencing staff shortages, and there was a reliance on agency staff. The same agency staff were employed to ensure consistency of care. Staff were also committed and doing extra shifts to cover any shortfalls.

People and staff were recovering from a COVID-19 outbreak, which affected each person in the home. Staff were wearing personal protective clothing and following the government's guidance on testing. People and staff had been vaccinated. The home was now open to visitors, where specific procedures were followed. The layout and size of the home, however, did not enable social distancing to be easily adhered to.

Rating at last inspection and update

The last inspection of this service took place on 10 December 2021, but a rating was not awarded. The report was published on 27 January 2022. A previous inspection, which took place on 10 December 2021, rated the service requires improvement. The report was published on 28 January 2022. A warning notice was issued at both inspections to ensure the provider took action to address the shortfalls identified.

At this inspection we found the provider remained in breach of regulations.

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 15 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 requires improvement.

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 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. This included checking the provider was meeting COVID-19 vaccination requirements.

Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. 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?

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

Inspected but not rated

Is the service well-led?

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

Inspected but not rated

The Haven

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 15 Premises and equipment, 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 included checking the provider was meeting COVID-19 vaccination requirements. 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

This inspection was carried out by one inspector.

Service and service type

The Haven 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.

The service did not have a manager registered with the Care Quality Commission. A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. There was a manager employed who we will refer to as the manager throughout the report.

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. This included notifications we had received for this service. Notifications are information about important events the service is required to send us by law. 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 used all of this information to plan our inspection.

During the inspection

We toured the environment with the manager. We spoke with the manager and two members of staff.

After the inspection

We continued to seek clarification from the manager to validate evidence found. We spoke to the manager on the phone to confirm practice being followed in relation to COVID-19.

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 requires improvement. 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

At our focused inspection in November 2021, 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.

- Not all risks associated with the environment had been identified and assessed, with steps taken to minimise potential harm.
- Water from the hand wash basins in the shower room and two people's bedrooms was very hot. The temperature of the water could not be measured, as it was off the scale of the thermometer. This was in excess of 50 degrees. Whilst people would not be immersed in the water, there was a risk of scalding. Staff said the boiler may have been adjusted, as some water in the older side of the home, was cool. This practice did not ensure a safe temperature of the water, throughout the home, which increased the risk of people sustaining harm.
- One of the doors of the oven, which was used daily, did not close securely. This meant the door could swing open when the oven was in use. This placed those in the galley style kitchen at risk of harm. The provider had been made aware of this, and a week later, had not taken action to resolve the fault. After the inspection, the manager told us quotes were being gained to repair or replace the oven.
- The doors to the manager's office and the staff changing room on the second floor, were held open with door wedges. This did not enable the doors to close if the fire alarm was activated, in the event of the fire. The manager told us they had mechanical devices, which would enable the doors to be held open safely. They said the maintenance person would fit them without delay.

We found no evidence that people had come to harm, however the provider had not identified, assessed and mitigated the risks associated with the environment. This did not ensure people, staff or visitor's safety and was a continued breach of Regulation 12, (Safe Care and Treatment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Preventing and controlling infection

- We were somewhat assured that the provider was meeting shielding and social distancing rules. The home was small and finding space to implement social distancing was difficult. For example, when a person needed staff assistance in the downstairs toilet, there was no space to manoeuvre safely. The manager told us they were planning to turn an empty bedroom into another lounge to help with social distancing.
- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. The majority of the mould in the laundry room had been removed and a product had been applied to minimise a reoccurrence. Once dry, the manager said the area would be re-painted. There was an antibacterial hand sanitiser device, on a stand, outside of the front door. The device however, was empty and was covered in dust and debris. A staff member apologised when it was brought to their attention. They told us the device had not worked for a while and would be removed.
- We were not assured that the provider was making sure infection outbreaks could be effectively prevented or managed. The home had experienced a COVID-19 outbreak at the end of November 2021, whereby all seven people living at the home had the virus. At the time of this inspection, periods of self-isolation had expired and visitors were being welcomed.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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's infection prevention and control policy was up to date.

We have also signposted the provider to resources to develop their approach.

We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Staffing and recruitment

- At the time of the inspection, the service was experiencing some staff shortages.
- There were six care staff to cover the home, day and night. One member of staff told us this was tight, but staff were completing extra shifts to help out. This included doing one additional 12 hour shift every other week. Four agency staff had been employed on a full time basis, to ensure the required staffing levels were maintained.
- Staffing levels had remained at three care staff on duty during the day, with a cook and a housekeeper. The housekeeper only worked in the week, so care staff were undertaking all cleaning responsibilities over the weekend. An advertisement for a weekend housekeeper had been placed, but no interest had been received.
- The manager told us staff had worked hard, right through the pandemic. They said staff readily covered extra shifts to ensure there were always three staff on duty during the day. The manager said staff were very committed to people. They said this showed when some staff moved into the home for a period of weeks, to minimise the risk of COVID-19 transmission.
- The provider had said they would increase the hourly rate of pay for new and existing care staff to become more competitive. Staff told us they were hoping they would receive the increase at the end of January 2022. After the inspection, the manager confirmed the pay award had been implemented.
- An advertisement had been placed to recruit care staff and a weekend housekeeper. The manager said to date, this had been unsuccessful and no applicants had applied.

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 this key question was rated requires improvement. We have not changed the rating, as we have not looked at all of the well-led 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.

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

At our focused inspection in November 2021, the provider had failed to ensure the premises were secure or properly maintained. This was a breach of regulation 15 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 15.

- An external fire door on the ground floor, continued to be insecure. The provider had not fitted a lock on the outside of the door as they believed an alarm, which was activated when the door was opened, was sufficient. This did not minimise the risk and relied on the alarm being in good working order, not being switched off, and staff to be immediately available.
- Locks on internal doors, such as the sluice room and boiler room, had been fitted. However, the keypad operation had not been set, so the locks were not in working order. The manager told us this was to be addressed later that day.
- The stairs to the second floor were narrow and steep. They led to attic rooms, which were used for storage and by staff to change into their uniforms. Whilst not used by people who used the service, there was a risk they could be accessed, posing a risk of harm. To address the risk, a small sofa had been turned from its original position, to block the stairs. This did not ensure safety, as the sofa could be walked around or climbed over.
- Window restrictors had been fitted to four windows, which we had previously identified did not have them on. These are safety features fitted to make sure where needed, windows are not able to be fully opened. The provider had not completed a risk assessment for windows on the ground floor, which could be widely opened. These opened onto the main driveway, at the front of the property, which led to the main road. A restrictor had not been considered regarding a large, swing type window on the second floor.
- Work had been undertaken to ensure all toilets within the home were in good working order. A bathroom had also been repaired, but the shower was awaiting a new part. The manager said they were waiting for the plumber to return, but would be checking to see when this would be.

- There were bolts on the doors to the kitchen to restrict access if there were no staff in the room. However, these were not used whilst staff were supporting people in the lounge at lunch time. The manager was investigating whether the locks met fire safety requirements.

We found no evidence that people had been harmed however, the premises was not secure or properly maintained. This placed people at risk of harm. This was a continued breach of regulation 15 (Premises and equipment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

- Cleaning substances, which had been stored in an unlocked cupboard in the laundry room, which was also unlocked, had been moved. The manager told us they were now stored securely in an outbuilding. This minimised the risk of people accessing them, which reduced the risk of harm.