

Flightcare Limited

Orchard Residential

Inspection report

St. Mary's Road
Huyton
Liverpool
Merseyside
L36 5UY

Tel: 01514806056
Website: www.flightcare.co.uk

Date of inspection visit:
01 December 2020
02 December 2020

Date of publication:
21 December 2020

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 Residential is registered to provide residential care to up to 26 older people and those living with dementia. At the time of our inspection 26 people were living at the service.

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

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. We also found governance systems were not effective at ensuring regulations were met. Enough improvement had been made at this inspection and the provider was no longer in breach of Regulations.

Risks relating to the environment, infection-control and the care needs of people were safely managed. Action to reduce risk had been taken in response to any accidents and incidents. People received their medicines as prescribed by competent staff. Medicines were stored and recorded in line with national guidance and best practice. People spoke positively about the safety of the care provided at Orchard Residential. Staff understood their responsibility to report anything of concern and had done so in accordance with the relevant guidance. Staff were safely recruited subject to the relevant checks and deployed in sufficient numbers to meet people's care needs.

Following the last inspection, the service had improved systems to monitor, assess and improve the safety and quality of care being provided. Staff demonstrated kindness and respect in their interactions with people. It was clear they knew people well and provided care in an individualised manner. Staff and relatives spoke positively about the level of communication from managers at the service. People had been provided with information regarding COVID-19 and changes that were being implemented to keep people safe. Referrals to other health services were managed well and appropriately followed up on. For example, where people did not meet the criteria for specialist support, staff engaged with GP's to ensure health conditions were managed in the person's best-interests.

Rating at last inspection and update

At the last inspection the service was rated requires improvement (report published 22 November 2019).

During the last inspection we found a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection enough improvement had been made and the provider was no longer in breach of regulations.

Why we inspected

The inspection was prompted in part due to concerns received about infection control. A decision was made

for us to inspect and examine those risks. 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 coronavirus and other infection outbreaks effectively.

We carried out an unannounced comprehensive inspection of this service on 19 and 2 September and 4 November 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has improved to Good. This is based on the findings at this inspection.

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

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?

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 Residential

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

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 completed by one inspector.

Service and service type:

Orchard Residential is a 'care service'. People in care services 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 did not have a manager registered with the Care Quality Commission although an application was being prepared. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

Day one of this inspection was unannounced. Day two was used to complete telephone conversations with relatives and staff.

What we did before inspection:

Before the inspection we checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. The

provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also obtained feedback from the local authority and healthcare professionals.

During the inspection:

We looked around the premises, observed the interactions between people living at the service, care delivery and activities provided at the service. Because of the increased risk of cross-infection we were unable to complete more extensive observations.

We spoke with one person living at the service, four relatives and several staff who held various roles at the service, including the care manager, deputy manager, senior managers, chef and carers. We looked at a range of documentation including three people's care records, medication storage and records, four staff files, accident and incident records, safeguarding records, health and safety records, audits and records relating to the quality checks undertaken by staff and other management records.

After the inspection:

We continued to seek clarification from the provider to validate evidence found. We looked at training data, risk assessments and quality assurance records.

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 Requires Improvement. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management.

At our last inspection, systems were either not in place or robust enough to demonstrate safety was effectively managed. This was a breach of Regulation 17 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17.

- The building and essential equipment were clean and free from odours.
- Before the inspection we received information of concern relating to the cleanliness of the environment. Cleaning schedules had been increased to address the findings from a recent external audit and the additional risk posed by COVID-19.
- The environment and systems in relation to fire were safely managed. Regular checks of emergency equipment and systems were completed.
- Individual risk was reviewed regularly and following incidents and accidents. Risk assessments were sufficiently detailed and led to changes in people's care to keep them safe.

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.

Learning lessons when things go wrong

- Accident and incident policies and procedures were in place and there was a system to record and report them.
- Records indicated what action had been taken in response to any accidents and incidents that had occurred. This information was also regularly reviewed to help identify any emerging patterns or trends.

Using medicines safely

- Medicines were managed safely.
- People received their medicines as prescribed by competent staff.
- Medicines were stored and recorded in line with national guidance and best practice.

Systems and processes to safeguard people from the risk of abuse

- Most people were unable to discuss their experience of care due to varying health conditions. However, one person we spoke with told us they felt safe living at the service. They said, '(Safe) Oh God yes. It's just a nice place to be.' The relatives we spoke with were all positive about the safety of the care provided.
- Policies and procedures were in place to guide staff in relation to safeguarding vulnerable adults and whistleblowing.
- Staff received safeguarding training and information about how to raise safeguarding concerns was visible throughout the service.
- Records showed how staff took appropriate action when any such concerns arose.

Staffing and recruitment

- There were enough staff to meet people's needs and staff attended to people promptly. With the exception of rare delays caused by staff sickness, people and relatives said there were enough staff to support people living at the service.
- Staff were safely recruited. Records showed the required information and pre employment checks, such as criminal records checks, had been completed.

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 Requires Improvement. At this inspection this key question has improved to 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

At our last inspection, the systems for checking on the quality and safety of the service were not always effective. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17.

- Following the last inspection, the service had improved systems to monitor, assess and improve the safety and quality of the care provided.
- The concerns identified by the recent external audit had been addressed immediately.
- Systems demonstrated the completion of actions and the development of learning following significant incidents.
- A manager had been appointed in September 2020 and was in the process of registering with CQC.
- A range of policies and procedures were in place that staff could access if they needed any guidance; these were up-to-date and regularly reviewed. Staff had been selected to a 'champion' for a specific area of care. This provided additional assurance and specialist knowledge for colleagues.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- Staff demonstrated kindness and respect in their interactions with people. It was clear they knew people well and provided care in an individualised manner.
- People and their relatives spoke very positively about the person-centred nature of the care provided and the impact this had. Comments included, 'The staff seem to be genuinely interested and caring', and 'I think the care they're giving is 100%. If [person] wasn't with them [they] wouldn't be alive today'.
- Managers and senior staff were open and supportive during the inspection. They acknowledged previous concerns and showed how safety and quality were regularly monitored and improved.

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

- Staff and relatives spoke positively about the level of communication from managers at the service.

- People had been provided with information regarding COVID-19 and changes that were being implemented to keep people safe. Information had been adapted to make it more accessible as required.

Working in partnership with others

- Staff engaged well with other health and social care professionals to ensure people's health and wellbeing was maintained.
- Referrals to other health services were managed well and appropriately followed up on. For example, where people did not meet the criteria for specialist support, staff engaged with GP's to ensure health conditions were managed in the person's best-interests.