

Village Green Care Home Limited

# Village Green Care Home

## Inspection report

Bedford Road  
Marston Moretaine  
Bedford  
Bedfordshire  
MK43 0ND

Tel: 01234768001

Website: [www.villagegreencarehome.co.uk](http://www.villagegreencarehome.co.uk)

Date of inspection visit:

23 February 2021

26 February 2021

03 March 2021

04 March 2021

05 March 2021

Date of publication:

16 March 2021

## 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

Village Green Care Home is a residential care home providing personal and nursing care to 17 people aged 65 and over at the time of the inspection. The service can support up to 60 people.

The home is spread across two floors in one building and has access to various communal areas as well as private bedrooms and garden.

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

People and their relatives were happy with the care provided. One relative told us, "The staff work hard. [They] genuinely appear to be caring. My [family member's] care has been good, and a couple of staff have been outstanding. They keep good humour too."

People's needs were assessed, and risk assessments and care plans updated as result. People were supported by staff who knew them well and understood the impact of their conditions on their well-being.

People were supported to take their medication safely and on time. Staff were trained in safe administration of medicines and had their skills and competency assessed regularly by the registered manager.

The risks to people from COVID-19 were minimised through cleaning regimes and staff training in infection prevention and control. Staff used and disposed of personal protective equipment (PPE) correctly and safely. People were supported to isolate in their bedrooms on admission as a precaution against the risk of spreading infection.

Changes to people's needs were monitored and audited by the registered manager to identify any additional action needed to meet changing risks. Clear records were kept of all support and actions taken when any further interventions were required. Systems were in place to ensure good managerial oversight of people's care.

People had access to various health professionals when required and all personal and clinical needs such as catheter care and personal care were supported by nursing staff who understood how to safely support this type of care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 20 November 2017).

### Why we inspected

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 undertook this targeted inspection to check on a specific concern we had about catheter care, PEG Tube feeding, medicines, continence care, record keeping and the management of the service. Percutaneous endoscopic gastrostomy (PEG) is an endoscopic medical procedure to provide a means of feeding when oral intake is not adequate. The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices 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.

#### 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?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Village Green Care Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check on specific concerns we had about catheter care, PEG Tube feeding, medicines, continence care, record keeping and the management of the service.

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

This inspection was carried out by two inspectors.

#### Service and service type

Village Green care 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.

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 inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, Healthwatch England and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with people who used the service and eight relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, nurses, care workers and catering staff.

We reviewed a range of records. This included five people's care records and two medication records. We looked at five staff files in relation to training. A variety of documents relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service.

# 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 good. 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 about we had about catheter care, PEG Tube feeding, medicines, continence care, record keeping and the management of the service. We will assess all of the key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

- People told us they were happy living at Village Green Care Home and felt the staff kept them safe. One person told us, "Staff are very good, we get on well in here, [they are] nice people. If you fall down [staff] are there right away."
- Relatives were also positive about the care, treatment and safety of people living at Village Green Care Home. One relative told us how their family member had been admitted unable to walk. They told us, "I am very happy with where [family member] is, they are safe and happy. They have made enormous progress and can now walk with the aid of a walking frame; this is either down to them or the persistence of the staff but fantastic news."
- Risks to people were assessed and reviewed at least monthly. There were systems in place to monitor, identify and analyse risks and action was taken when changes were needed. Changes were communicated to all staff through handover systems and care records.
- There was clear guidance in people's care plans about how to safely manage people's risks while still considering their individual preferences. A relative said, "Staff make sure [family member] is eating as they sometimes refuse, so staff keep an eye on their weight and make special drinks to keep their weight up, I haven't got any complaints, staff always listen. [The registered manager] has really made a difference."
- Staff had a good understanding of people's risks and were able to describe detailed care requirements, including personal and continence care needs and how people's characters and conditions could impact the management of those risks.
- Staff also understood people's rights to refuse care and treatment and what to do in those circumstances in terms of seeking support to ensure care and treatment remained in a person's best interest.

### Using medicines safely

- Medicines records and administration were observed to be completed safely and staff had a good knowledge of people's preferences.
- Staff had built good relationships with people which helped them to accept the care and treatment offered. An example of this was turning fortified drinks into mock cocktails to encourage people to accept them. This had been successful.
- Following staff training in medicines administration, the registered manager checked the competency of staff authorised to administer medicines. Staff demonstrated a good knowledge of the processes to follow to appropriately support people who required a PEG tube or catheter care and other conditions.

### 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 somewhat assured that the provider was making sure infection outbreaks can be effectively prevented or managed. This was due to risks in relation to people and staff in high risk groups such as people in the Black, Asian, Minority Ethnic (BAME) communities not being assessed. The registered manager told us they had already begun completing these risk assessments prior to the end of the inspection process.
- 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.



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

The purpose of this inspection was to check specific concerns about we had about catheter care, PEG Tube feeding, medicines, continence care, record keeping and the management of the service. We will assess all of the 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

- Relatives told us they felt the home was well managed and quality of care had improved since the employment of the current registered manager. They felt comfortable to approach the registered manager if they had concerns and said they were listened to.
- Staff and the registered manager showed a good understanding of the requirements of their roles and worked closely as a team.
- Staff were able to describe how person-centred practices were at the core of the support they gave. One staff member explained the impact of the environment on nutrition for people living with dementia. They said, "We think about what people want, for example, breakfast in bed and having that quiet time before going into communal areas which can be difficult for people living with dementia. It is about building a relationship with your residents and treating them well, assessing their needs and how they are feeling at the time too."
- Staff told us they felt supported by the registered manager and received regular supervision and guidance. Staff and relatives often used the term 'family friendly' and 'family feel' to describe the culture of the service.
- Robust audit and monitoring systems were in place to ensure that all care and treatment was monitored and reviewed to continuously improve practices. This also ensured the registered manager and provider were aware of any concerns or changes that required action.
- The registered manager openly reported incidents and accidents in a timely manner to the appropriate agencies and put action plans in place to reduce the risk of repeat events.