

Indigo Care Services (2) Limited

Nesfield Lodge

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Nesfield Lodge is a residential care home providing personal and nursing care for up to 44 people aged 65 and over. At the time of the inspection, 36 people were living in the service. The building is purpose built with accommodation spread over two floors.

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

At this inspection the overall rating for the service has changed from good to requires improvement. This is because we found some aspects of cleaning and infection prevention practice needed improving and better records needed keeping. During the inspection, the registered manager started to take positive action to address these concerns.

Despite this, there were many positive aspects of the service. People and relatives consistently said the service provided good quality, person-centred care and everyone we spoke with said they were happy and content living in the home. We found staff were kind and compassionate towards people and treated them well. There was a person-centred approach to care and support.

The service had worked hard to ensure people received regular contact with their relatives through the COVID-19 pandemic through various means including using technology and supporting visits in a safe and appropriate manner. The registered manager understood the various COVID-19 support guidance for example relating to visiting, safe admissions, and Personal Protective Equipment and had implemented it appropriately within the home.

There were enough staff deployed to ensure people received good care and support and during the inspection we saw staff were attentive and supervised people appropriately.

Incidents and accidents were recorded, investigated and analysed for themes and trends. We saw evidence learning took place following incidents and the provider and registered manager had good oversight of these. People said they felt safe living in the home.

Overall risks to people's health and safety were assessed with clear and detailed risk assessments in place. Staff understood people's needs. In most cases we saw safe plans of care were followed although some inconsistencies were noted.

Overall medicines were safely managed. We felt assured people were receiving their medicines as prescribed. We found a small number of medicines were not properly accounted for and some guidance for staff on when to give "as required" medicines needed more detail.

People, relatives and staff praised the overall quality of the service and said they felt engaged with and supported by the management team. Systems were in place to seek and act on feedback from people who

used the service, relatives and staff.

In most areas the registered manager had good oversight of the home and undertook a range of audits and checks with actions being recorded on an action plan to drive improvement. However, issues relating to cleaning and hygiene should have been rectified sooner, particularly as many were identified by an infection control audit in 2020.

The service used an electronic care management system to record care interventions. This supported good oversight of care and support, although we found some inaccuracies with regards to information recorded on the system.

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 1 January 2019)

Why we inspected

Over the last year we received concerns in relation to hygiene and the management of the service. As a result, we undertook a focused inspection to review the key questions of safe and well led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. 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.

The overall rating for the service has changed from good to requires improvement. This is based on the findings at this inspection. We have found evidence that the provider needs to make improvements. Please see the safe and well led sections of this full report. Following our inspection the manager added items to their action plan and began implementing new paperwork to ensure improvements to the management of cleaning within the service

Enforcement

We have identified a breach in relation to cleaning and hygiene within the home at this inspection. Please see the action we have told the provider to take at the end of this report. We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection

Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Nesfield Lodge

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.

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 two inspectors 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

Nesfield Lodge 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

We gave the service an hour's notice of the inspection. This was because we wanted to make arrangements to enter the service safely during the COVID-19 pandemic.

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. 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.

During the inspection

We spoke with 13 people who used the service via video conferencing facilities and seven relatives over the telephone. We observed care in the communal areas of the home. We spoke with eight members of staff including the registered manager, care workers and domestic staff.

We reviewed a range of records. This included elements of five people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider 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. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not completely safe and there was not full assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection

- We were not assured that the home was consistently kept in a clean and hygienic state. On the day of the inspection we noted some areas of the home and equipment were not properly clean and there was a delay in the attendance of cleaning staff. Cleaning records also showed gaps on several days in December 2020 and January 2021 where there was no evidence of cleaning. On some days staff had written 'no cleaning today' leading us to conclude the situation on the day of the inspection was not a one off.
- Cleaning schedules did not contain a comprehensive schedule of items to clean, for example day time schedules did not include communal bathrooms and touch points and equipment were not included. We found lifting equipment was stored alongside clean Personal Protective Equipment (PPE) with no evidence of cleaning and we found some items such as pressure cushions and slings stored on the floor.

We found no evidence people had been harmed but systems to assess and prevent the risk of infections by ways of consistent cleaning and hygiene standards were not sufficiently robust. This was a breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Following the inspection, the registered manager implemented new paperwork to maintain a better oversight of cleaning activity.

- The registered manager had a good understanding of COVID-19 guidance and a range of new policies and risk assessments were in place to reduce the risk of an outbreak within the home. We saw staff wearing PPE appropriately. Staff had received training in infection control, hygiene and PPE and had their competency in these areas checked.
- The home had in place appropriate cleaning products and a monthly spray disinfectant of the whole home was undertaken
- A great deal of effort had been made to help people and relatives keep in touch during the COVID-19 pandemic. This included using technology, facilitating window visits and converting the quiet lounge into a screened visitor room. One relative said, "We are very happy. The company has tried its best with window and pod visits."

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from abuse and improper treatment. People spoke positively about the home and said they felt safe and comfortable in the presence of staff. One person said, "It's a lovely atmosphere here. The staff are very helpful and very good."
- Staff had received training in safeguarding vulnerable adults. Information was displayed around the home to assist staff to following safeguarding procedures. Staff were able to tell us how they would identify and

report concerns and said the registered manager was approachable and listened to them.

- Where safeguarding incidents had occurred, these had been fully investigated and the registered manager had worked with other professionals to put plans in place to help keep people safe. The management retained good oversight of safeguarding incidents. These were discussed at clinical governance meetings also monitored by the provider.

Assessing risk, safety monitoring and management

- Overall, we found risks to people's health and safety were appropriately assessed and mitigated. People told us staff cared for them in a safe and appropriate way. Care records showed that people had a comprehensive range of risk assessments in place which were subject to regular review. Staff had a good understanding of the people they were caring for.
- In most cases we identified that appropriate care was provided to people in line with plans of care. However, there were some inconsistencies. One person's air mattress was on the incorrect setting and another person's monitoring equipment was not being used in line with their risk assessment. Records did not always demonstrate people had received hygiene interventions in line with their plans of care. We raised these things with the manager and were confident they would be addressed.
- The premises was safely managed. The home was appropriately maintained, and checks took place on fixtures and fittings to keep them in safe working order. Any improvements identified through checks, audits and risk assessments were added to the service's overall action plan for completion.

Staffing and recruitment

- We concluded there were enough appropriately skilled staff deployed to ensure people received appropriate care. People praised the staff who supported them. One person said, "Staff talk with me, they are lovely. She (the manager) listens to me. They are good to me. I am joyful and happy." Staff we spoke with told us there were usually enough care staff. We observed communal areas being appropriately supervised to help keep people safe.
- Whilst rotas showed there was usually two domestic staff available each day, some comments on paper and electronic cleaning records suggested cleaners were not always available in some areas of the home. We raised this with the registered manager to ensure it was addressed.
- We were assured that safe recruitment procedures were in place to help ensure staff were of suitable character to work with vulnerable people.

Using medicines safely

- We found people received their medicines as prescribed although some improvements were needed to some aspects of the medicines systems. Medicine Administration Records (MAR) were well completed and the electronic recording system provided good oversight of people's medicines. Staff received training in medicines management and had their competency to give medicines regularly assessed. Medicine errors were analysed.
- Whilst a system was in place to ensure all medicines were accounted for, we did find the quantity of three medicines in stock did not match with records. We also found the date of opening had not been recorded on a bottle of liquid medicines, in line with safe working practice. We raised these issues with the registered manager to investigate.
- In most cases, protocols were in place to support the administration of 'as required' medicines although those relating to bowel management needed more detail recorded about exactly what staff should look out for before administering those medicines.

Learning lessons when things go wrong

- A system was in place to log, investigate and learn from incidents and adverse events. Following incidents, care plans and risk assessments were updated and discussions held with staff where appropriate.

- Incidents and other adverse events were subject to analysis to look for themes and trends. There was good oversight of these by the registered manager and provider. We reviewed the homes analysis and found no concerning themes or trends.

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. At this inspection this key question has now deteriorated to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- People and relatives provided consistently good feedback about the service and the way it was managed. They all told us good quality, person centred care was provided. One person said, "I have found friends here. I've been made welcome. I'm really happy and I never thought I would be." A relative said, "The staff are friendly and we can phone when we want. The manager and the staff are lovely. (Relative] was very down at first but she has gained weight and she is settled." We found a person-centred culture within the home with people's individual rights promoted. Staff interacted positively with people and treated them with kindness and compassion.
- Staff provided good feedback about the service and the way it was managed. Staff had been well supported throughout the COVID-19 pandemic by the provider and registered manager. We found care staff were well organised and clear on their roles and responsibilities.
- When things had gone wrong, we saw the provider was transparent and open and full investigations were undertaken to help improve the service.

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

- In most areas we found regulatory requirements were met and the manager had good oversight of key areas of quality. However, systems should have been in place to ensure cleaning and infection control practice and documentation was consistently maintained to a high standard particularly in light of the COVID-19 pandemic. Some of the areas for improvement we found had also been identified on a local authority infection control audit in August 2020 but had not yet been actioned. We discussed this with the registered manager who explained this was due in part to waiting for documentation from the infection control team.
- The provider used an electronic care management system to log and monitor care provision. Whilst this provided the manager with good oversight of the service, we found some inconsistencies with instances of staff recording contradictory or inaccurate information. We raised this with the registered manager to ensure it was addressed.
- The registered manager was knowledgeable about the service and demonstrated they kept up-to-date

with the latest guidance and legislation. A range of audits and checks were undertaken by the registered manager and provider and areas for improvement identified were added on the service's overall management plan.

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

- People and relatives felt communication was good and they were kept involved and updated. Relatives praised the homes approach in keeping them informed during the COVID-19 pandemic when visiting was restricted. One person said, "They have sent us videos of [person] singing. I can't sing the staff's praises enough and can't wait to give them all a hug."
- A resident committee was in place and people were asked for their views on the service through various mechanisms including reviews and surveys.

Working in partnership with others

- The registered manager told us they had developed strong relationships with health professionals, who also confirmed this. The service worked closely with the local GP practice and professionals from the practice conducted regular visits.
- Relationships had also been built with the local community including schools to help provide activity and stimulation to residents.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment (1) (2h) Care and treatment was not provided in a safe way because systems to prevent and control infections were not suitable robust.