

MAPS Properties Limited

# The Limes

## Inspection report

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10 September 2020  
14 September 2020  
15 September 2020

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About the service

The Limes is a residential care home providing personal care to 34 older people at the time of the inspection. The service is registered for 46 people but does no longer use many of their bedrooms as doubles. All accommodation is on the ground floor.

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

We have made a recommendation about ensuring current guidance is available and followed on infection prevention and control especially in relation to COVID -19.

People, relatives and staff were all positive about The Limes. People we spoke with were complimentary about the care and support they received and had no complaints. Relatives felt they were involved and were kept informed. One relative said, "I cannot fault it and I have told you the truth." One other relative felt that there could be more activities for people to join in but was satisfied with the care.

People receive care and support from sufficient staff that have the appropriate training. People were supported to stay safe, monitored and their freedom of choice is respected.

People, relatives and staff said that they found the registered manager to be approachable, caring and supportive. One staff member said of the provider, "I know the owner of the home contacts us regularly to ask for any updates, how we are coping and any ways he can help/support us."

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 requires improvement (published 17 October 2019). The service remains rated requires improvement. This service has been rated requires improvement for the last two consecutive inspections.

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

### Why we inspected

The inspection was prompted in part due to notifications received about falls resulting in injury, a person going missing and a decision was made for us to inspect and examine those risks.

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 have found evidence that the provider needs to make improvement. Please see the Safe and Well Led sections of this full report. You can see what action we have asked the provider to take at the end of this full report.

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.

Since the inspection the provider has taken steps to address some of the shortfalls identified including medicines management.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Limes on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Enforcement

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. We will continue to monitor the service.

### Follow up

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?

**Good** ●

The service was safe.

Details are in our safe findings below.

### Is the service well-led?

**Requires Improvement** ●

The service was not always well-led.

Details are in our well-Led findings below.

# The Limes

## 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.

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.

Due to the COVID -19 pandemic, the first day of inspection was carried out by visiting the service. The remaining days were carried out remotely. This means we made telephone calls to staff and relatives away from the site and asked for documents to be sent to us by the provider.

#### Inspection team

The inspection visit on 8 September 2020 was undertaken by two inspectors. A third inspector reviewed records and spoke with people's relatives and staff remotely and provided feedback to the management team.

#### Service and service type

The Limes 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. Registered managers 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 called the service to announce our inspection visit 20 minutes before the inspectors arrived. This was to

ensure we could ask the service for specific information including if there were any people using the service who had a positive test for COVID -19 and the provider's procedures for infection control and COVID -19 to ensure we were working within these procedures.

#### What we did before the inspection

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 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 all of this information to plan our inspection.

#### During the inspection

We spoke with the registered manager, the provider, three staff and the three people residing at The Limes. We spoke by telephone with four relatives of people using their service for their views of the service provided. We spoke with or had email exchange with seven staff members who had differing roles with The Limes. We had feedback from one professional who had contact with the service.

During our visit we observed the care and support provided to people, including interactions between staff and people using the service.

We reviewed a range of records. This included three people's care records and medicine records, including medicines audits. A variety of records relating to the management of the service were reviewed, including audits and quality assurance records.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 had improved to Good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- On the whole medicines systems and practice was safe, but two elements could be improved. The first related to ensuring people had a written protocol that was followed for 'as and when required' medicines [sometimes known as PRN] One person was prescribed PRN, but it had been administered regularly. If this medicine becomes too frequent it must be reviewed by an appropriate practitioner. We were informed the next day that the GP had reviewed the medicines for this person. The second related to ensuring there was a clear written audit trail of returned high risk medicines such as controlled drugs. This has been addressed.
- We examined medication administration records and found no gaps. Staff were aware of time sensitive medicines. We sample checked stock, and this tallied with the records. This showed that people received their medicines as intended. One person confirmed they always received their medicines on time and staff helped them with a cream that was prescribed.
- Staff confirmed that they had received training in medicines management. They said they were well supported and had observations of their practice to ensure they administered medicines correctly. One staff member said, "We also do a medication audit as part of our role to make sure that all the medication is correct which is very helpful so you can check every resident has had their medication when needed. If I am ever unsure of anything, I know I can ask my deputy manager or BNF (British National Formulary) online to find the right answer."

### Preventing and controlling infection

- The Limes was clean and tidy, but practices around infection prevention and control could be safer. The registered manager implemented enhanced daily cleaning in response to the COVID-19 pandemic which was still in place. We saw that on the cleaning schedule for Snowdrop kitchen there were gaps. This matter had been raised by the registered manager in a recent staff meeting. Therefore, we could not assume practice followed the set procedure.
- We observed that two staff wore their masks below their noses but pulled the mask back on when observed by the inspector. This was not necessarily a risk as no people using the service were present. But it was not in line with guidance of sessional use - taking off, disposing and putting a new mask on. One staff member did not wear gloves or an apron when supporting a person to drink.
- The policy in relation to COVID-19 had been written in May 2020. The risk assessment and plan were dated March 2020. This had no evidence of review despite the government publishing revised guidance on a regular basis as the pandemic unfolded. However, one staff member did tell us, "Our deputy manager has

always kept us informed of any changes with the government guidance and ensured when advice was given, we followed it correctly. If we were ever unsure of anything management would contact public health or social services to make advice clearer."

We recommend the provider consider current guidance on COVID-19 and take action to update their policy to ensure practice is as safe as it could be.

- All staff we spoke with said that they felt safe during this time of COVID-19. One saying this was down to management ensuring there was consistently enough PPE and that staff were tested weekly and people living at The Limes were tested monthly. One staff member said, "We have plenty of PPE and guidance, I personally change my uniform before I go home and was provided with a reusable bag to be able to do this more easily, so this was great."
- 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.

#### Assessing risk, safety monitoring and management

At our last inspection 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 (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 12.

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained basic explanations of the control measures for staff to follow to keep people safe.
- Risks to people were assessed, and professional advice was sought where needed. People were involved in the decision making. This led to people taking risks that did not restrict their freedom of choice. An example being a person who was at risk of choking but had chosen to not consistently follow advice from speech and language therapy about food being modified. The person was able to enjoy treats of their choice and staff explained the potential risk.
- Accidents and incidents were reported, investigated and where possible risks were minimised. The manager had oversight of falls that people had and involved appropriate professionals and equipment to minimise the risk. One relative told us that their relative has "A pressure mat in place, so staff can respond when he gets up."
- Staff were trained and had updates in safe practices such as moving and handling and first aid.
- Regular safety checks were in place. For example, fire safety procedures were monitored to ensure systems would be effective in the event of an emergency and water temperatures were monitored to ensure Legionella did not occur and that people were not at risk of scalding water.
- We checked a gate and found that the garden was safe, and people couldn't leave the premises undetected. Therefore, the risk had been minimised.

Systems and processes to safeguard people from the risk of abuse



- The processes the provider had in place helped to protect people from the risk of abuse. They reported matters as needed. People told us they felt safe living in the service and their relatives agreed.
- One person told us they felt safe at The Limes and were able to sleep throughout the night without being disturbed. One relative said, "I know [relative] is safe. I can have video calls or visit through the glass and use walkie talkies. Staff sit with [relative] when she is distressed. They are busy, but they wait until she is settled."
- Staff had received training in safeguarding people. The registered manager had appropriately reported concerns to the Local Authority safeguarding team.

#### Staffing and recruitment

- People, staff and relatives all told us that there were sufficient staff deployed within The Limes. A relative said, "Yes there is enough staff – no concerns there." A staff member said, "There is enough staff. We have an occasional hiccup, but we have a regular agency person who has been before and knows us well."
- Our observations on the day were that there were sufficient staff to meet people's needs. Staff were kind and caring in their approach to people and gave them the time they needed.
- The provider had systems in place to ensure staff were safe to work with people before they started working at the home. References were checked and a Disclosure and Barring Service (DBS) certificate obtained before staff started work at the home. The DBS allows employers to find out if a potential staff member has any criminal convictions or they have been barred from working with adults receiving care.

#### Learning lessons when things go wrong

- The registered manager demonstrated they had made changes in response to incidents and concerns to improve the service. An example of changes made was the introduction of weekly food and fluid charts to meet the needs of some people. These were also checked daily by the senior carer for completeness.
- The people we spoke with agreed that the service was continually striving to improve and responded to incidents appropriately.

# 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 remained the same. This meant the service was consistently managed. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong.

At our last inspection the provider had repeatedly failed to ensure compliance and good governance. This was a breach of regulation 17 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider also had failed to ensure statutory notifications were made. This was a breach of regulation 18 of the Care Quality Commission (Registration) Regulations 2009.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulations 17 and 18.

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

- There was a known and supportive structure above the level of registered manager. This included the provider being more involved with the service and appointing an appropriate senior manager to monitor quality and compliance. We could see improvements in the service provided but progress was slow. We have made a recommendation about how the service could be safer with regards infection prevention and control. This recommendation need to be actioned, sustained and embedded in the ongoing culture of The Limes.

- The registered manager was able to provide us with evidence of quality monitoring systems and how this was used to improve the service offered to people. The systems in place did not identify the issues we have highlighted around safe practices. Systems in place to ensure there is a record of safe practice had gaps. The audits relating to medicine management did not drive improvements.

- We have received regular information from the registered manager in line with the positive conditions set out as part of The Limes' registration. We have received appropriate statutory notifications. These are matters that the provider must notify us about - certain changes, events and incidents that affect the service or the people who use it.

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

- Information was available to people about the service letting them know what to expect. Information such as visiting during the pandemic and how to complain or make a safeguarding referral was on notice boards

or posted near the entrance.

- Relatives said that the service was 'well led'. One relative said, "I admire the staff. I have no complaints. They telephone me regularly." Another said, "Management are very caring. They look after the staff." Another felt very supported by the registered manager when their relative was unwell.

- Staff received ongoing support and systems such as team meetings, staff supervision and training were still happening despite COVID -19.

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

- There was appropriate policies in place relating to duty of candour. We saw an example where the provider had apologised, was keen to learn from matters and was open with people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff feedback about management and being kept informed and supported throughout the pandemic was positive. One staff member said, "Management do listen to feedback and act on it, not always as quickly as I would like but majority of the time, it is done and received well."

- Relatives felt involved and said communication was positive. One relative said, "They do ask for opinions and they also have a newsletter that keeps us informed." People at the service described the registered manager as, "Very good," and "Quite approachable."

- We saw examples where the service had worked with others to benefit the people who used the service. For example, working with social workers, healthcare professionals and the local authority safeguarding team. Feedback from professionals we spoke with was positive.

We could not improve the rating for The Limes from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.