

J C Care Limited

Carlton House

Inspection report

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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

Carlton House is a care home which accommodates up to 16 people with learning disabilities in a purpose built building in Leeds. The home was split into the main house and an annex. At the time of the inspection, 14 people were living in the service.

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

We received positive feedback from stakeholders and a relative of a service user. We observed people appeared well kempt in a clean, safe environment.

Improvements had been made in relation to cleanliness and hygiene. There was clear accountability for staff in relation to cleaning responsibilities and the building was odour free and well presented.

We found governance systems had improved and issues identified at the previous inspection had been resolved.

We also assessed infection control procedures within the home. Overall, we felt assured that appropriate systems were in place to help keep people safe.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (13 July 2019). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this targeted inspection to check whether the requirement action we previously served in relation to Regulations 12 and 17 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.

CQC have introduced targeted inspections to follow up on breaches of regulation 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Carlton House 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?

At our last inspection we rated this key question requires improvement. 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 requires improvement. 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

Carlton House

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.

This was a targeted inspection to check whether the provider had met the requirements of the requirement notice in relation to Regulation 12 (Safe Care and Treatment) and Regulation 17 (Good Governance) 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 was conducted as part of our Thematic Review of infection control and prevention in care homes.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Carlton House is a 'care home'. People in care homes receive accommodation 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 48 hours' notice of our inspection. Due to the COVID-19 pandemic, we needed to check the COVID-19 status of the home and make arrangements to enter the home safely to reduce the risk of infection transmission.

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 judgements in this report.

During the inspection

We looked around the home and observed care. We spoke with three members of staff including the registered manager and support staff. We spoke with one relative over the telephone. We reviewed a wide range of documents and records relating to infection control and COVID-19 management.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data 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. 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 if the provider had met the requirements of the breach of regulation we previously identified. We will assess all of the key question at the next comprehensive inspection of the service.

S5 How well are people protected by the prevention and control of infection?

At the last inspection, we found there were concerns with systems around infection control and prevention in the home, and concerns around the cleanliness of the home. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Since the last inspection, we found work had been undertaken to improve infection control systems and processes, and when we visited we found the home to be clean and well presented. We concluded that the service was no longer in breach of regulation.

- We were assured the provider was taking reasonable action to reduce the risk of visitors catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was using PPE effectively and safely.
- We were somewhat assured the provider was accessing testing for people using the service and staff, regular testing had not yet been made fully available to the service.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy and practice was up to date.
- We conducted a tour of the premises and found the home to be clean and odour free. Cupboards containing hazardous cleaning materials were stored safely, and new systems were implemented in the laundry rooms to prevent cross-contamination.
- There were monthly audits of cleanliness in the home. This included reviewing housekeeping documentation and practice, storage, internal areas of the home and external areas of the home.

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. 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 if the provider had met the requirements of the breach we previously identified. 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

At the last inspection, we found people did not have end of life care plans in place. We also found quality monitoring systems and processes did not identify concerns we found in infection control, accident and incidents and medicines management. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Since the last inspection, we found work had been undertaken to update end of life care plan records. We also found evidence that the providers quality systems and processes had been improved and we found issues identified at the last inspection were resolved. We concluded the service was no longer in breach of the regulations.

- A relative we spoke with said, "As far as we are concerned the home works well under difficult circumstances. We are constantly in touch about [Name's] care. The home so far has been very good as they have avoided being affected by COVID-19".
- People had end of life care plans in place. We reviewed three end of life care plans and found they were person centred and in an easy read format. They clearly identified people's wishes such as where they would like to be if they became very unwell and who would be responsible for carrying their wishes out. This was in line with the provider's end of life policy.
- Accidents and incidents were analysed and discussed at monthly 'reflective practice' meetings where incidents in the month were discussed in detail and any trends or themes were identified individually and across the service. An action plan was generated as a result which was followed up at the next reflective practice meeting. The provider had positive behaviour practitioners employed who provided detailed analysis of people's behaviours, their triggers and what measures staff could take to prevent future incidents.
- We found improvements had been made in relation to PRN protocols. This issue had been resolved and we reviewed PRN protocols which demonstrated a good level of person-centred detail and records of medicines administered reflected the scope of the protocols.
- Infection control was monitored through internal and external quality assurance processes. This included

daily 'walkarounds' by the registered manager and external visits by NHS infection prevention and control professionals. Where issues were identified, action was taken to ensure they were resolved in a timely way. For example, the last external Infection Prevention and Control visit identified there were posters available showing best practice guidance that were not on display in the home. When we visited, we found they had been prominently displayed throughout the home.