

Four Seasons (No 7) Limited

Norwood Green Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Requires Improvement ●

Summary of findings

Overall summary

This inspection took place on 24 April 2017 and was unannounced. We last inspected the service in July 2016 and found a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider did not maintain satisfactorily all parts of the premises and most bath and shower rooms were not fit for purpose. The provider sent us an action plan dated 11 August 2016 and told us they would carry out a "full replacement of all shower rooms and replacements for 3 bathrooms." At this inspection we found that, although some work had started in some shower rooms, this had not been completed and only one shower room was available for use by people using the service.

In March 2017 we received information from the local authority's Environmental Health team and the Clinical Commissioning Group's (CCG) infection control lead, following an outbreak of norovirus that affected people using the service and staff. The reports included a number of recommendations and actions for the provider to take to improve infection control in the service. At this inspection we found the provider had responded to the reports and had taken appropriate actions to improve infection control.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Norwood Green Care Home' on our website at www.cqc.org.uk.

Norwood Green Care Home provides accommodation, nursing and personal care for up to 92 older people, some of whom were living with dementia. The service is provided by Four Seasons (No 7) Ltd, a private company managing over 300 care homes in the UK.

The service had a manager who was registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We found that the provider was continuing to breach Regulation 15 and was also in breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

People using the service did not receive care and support in line with their preferences and their care plan.

The provider had not carried out works to upgrade the bathrooms and shower rooms and most people using the service had not had access to a bath or shower since our last inspection in July 2016.

The provider had taken appropriate action to implement recommendations made by the Clinical Commissioning Group (CCG) and the local authority to improve infection control in the service.

You can see what action we told the provider to take at the back of the full version of the report.

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.

The provider had taken appropriate action to implement recommendations made by the Clinical Commissioning Group (CCG) and the local authority to improve infection control in the service.

Is the service effective?

Requires Improvement ●

Some aspects of the service were not effective.

People using the service did not receive care and support in line with their preferences and their care plan.

The provider had not carried out works to upgrade the bathrooms and shower rooms and most people using the service had not had access to a bath or shower since our last inspection in July 2016.

We have not revised the rating for this key question. We will review our rating for Safe at the next comprehensive inspection.

Norwood Green Care Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 24 April 2017 and was unannounced. One inspector carried out the inspection.

Before the inspection we reviewed the last inspection report and the action plan the provider sent to us dated 08 August 2016. We also looked at statutory notifications the provider sent us about significant events or incidents that affected people using the service.

During this inspection we looked at all bathrooms and shower rooms and spoke with the registered manager about infection controls measures in the service. We also looked at records of checks and audits the provider carried out and the record of staff training.

Is the service safe?

Our findings

In March 2017 we received information from the local authority's Environmental Health team and the Clinical Commissioning Group's (CCG) infection control lead, following an outbreak of norovirus that affected people using the service and staff. Both agencies made recommendations to improve infection control measures in the home and during this inspection we discussed the provider's response with the registered manager.

The registered manager told us the provider had produced a new policy and procedures for Environmental Cleanliness and Decontamination in November 2016 and had now introduced these across the organisation. We saw a copy of the policy and procedures was available in the home for the domestic staff to follow. The procedures included a number of measures that met the recommendations included in the local authority and CCG reports. These included the introduction of a 'bare below the elbows' policy for all nurses and care staff and we saw staff followed this during our inspection. The provider had also carried out an individual supervision session with all nursing, care, kitchen and domestic staff to make sure they were aware of the service's infection control procedures. The provider's training matrix also showed that 96% of staff were up to date with their infection control training.

Other measures the provider had introduced included a weekly environmental audit of the service to check cleanliness and health and safety issues, an enhanced cleaning procedure for any person using the service who had been identified as having a MRSA or Clostridium difficile (C.Diff) bacterial infection, daily checks of hand sanitiser and soap dispensers and a monthly infection control audit. We saw records that showed staff had completed these checks and audits in April 2017. We also saw records of daily cleaning schedules that included clear guidance for staff on the tasks they needed to complete.

During this inspection we saw that all parts of the service were clean and tidy and nurses, care and domestic staff followed the provider's procedures, including the use of personal protective equipment such as aprons and gloves.

The above evidence reassured us that the provider had taken appropriate action to implement recommendations made by the CCG and the local authority to improve infection control in the service.

Is the service effective?

Our findings

We last inspected the service in July 2016 and found a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider did not maintain satisfactorily all parts of the premises as most bath and shower rooms were not fit for purpose.

The provider sent us an action plan dated 11 August 2016 and told us they would carry out a "full replacement of all shower rooms and replacements for 3 bathrooms."

Accommodation for people using the service is provided on the ground, first and second floors. On each floor there are two shower rooms and two assisted bathrooms. At this inspection we found that, some work had started to upgrade one of the shower rooms on the second floor. However, this work had not been completed and the room could not be used. We saw that another shower room on the second floor was locked and when we entered we saw the flooring was torn, the radiator cover was rusty and the open drain in the floor smelt badly. Staff confirmed this room was not used. Both of the bathrooms on the second floor were used to store commodes, rubbish bags and items of furniture. In one bathroom we saw the provider had displayed their policy for 'bathing service users' and noted this was dated August 2010. We saw no evidence that either of the bathrooms on the second floor had been used recently. We asked one member of staff if they used the bathrooms and they told us that people preferred to have a shower but as these were not available they had a strip wash instead each day.

People using the service did not receive care and support in line with their preferences and their care plan. We looked at the care plans for two people using the service on the second floor. These included a 'My Choices' booklet for staff to record people's daily routines, preferences and choices about how they received care and support. One person's record showed they preferred "a shower – about once a week" and the second person's said they preferred a "shower – twice a week." The daily care notes for both people showed that staff washed and dressed them each morning but there was no mention of either person having a shower. The member of staff we spoke with could not tell us when either person had last had a shower.

On the first floor work had also started to upgrade one shower room but this had not been completed and the room could not be used. The second shower room was locked and when we unlocked the door and entered we found hand rails had been removed, the drain smelt badly and the flooring was torn so the room could not be used. Both of the bathrooms on the first floor were used to store linen bins and commodes and there was no evidence either room had been used recently. In one of the bathrooms the flooring was torn and presented a trip hazard.

Two people's care plans on the first floor recorded their preference for a shower, twice a week. The daily care notes staff completed showed they supported both people with their personal care and both had a wash each day but there was no mention of a shower. Again a member of staff told us they could not recall when either person had last had a shower.

On the ground floor work had also started to upgrade one shower room but this had not been finished and

the room could not be used. The second shower room had a rusty radiator cover and the aid call pull cord was tied up out of people's reach but the floor was wet and a water temperature record sheet staff completed showed the shower had been used 13 times in April. However, the room was bare and institutional and would not provide a pleasant or enjoyable experience for people receiving support with their personal care. Both of the bathrooms on the ground floor were used to store some equipment but could be used. However, we did not see any evidence that staff supported people to have a bath.

This evidence showed the provider was continuing to breach Regulation 15 and was also in breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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 9 HSCA RA Regulations 2014 Person-centred care The care and treatment of service users did not meet their needs nor reflect their preferences. Regulation 9 (1) (b) and (c)