

Jeesal Residential Care Services Limited

Casarita

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

Casarita is a care home without nursing. It supports up to seven people with a learning disability or autism. At the time of the inspection there were seven people living at the service. The service comprises of two annexes which are self-contained flats; a further two flats with ensuite bathroom facilities and three bedrooms in the main building, a communal shower room, kitchen and lounge area. Outside there is a separate laundry room, a staff sleep in room and managers office. In addition, a grassed area is at the front and rear of the property with a small courtyard area located at the side entrance to the home.

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

People's care and support was not always provided in a clean environment. This was addressed by the supporting manager following the inspection who reviewed processes in place.

There was not evidence of effective systems in place to support provider governance and oversight to drive change and sustain improvement.

People and relatives spoke positively about the service and provided feedback which included., "I am happy with the service and where [relative] is. My mind is settled knowing [relative] is happy and safe." Another relative told us, "We are pleased with the staff and care and are thrilled with the service."

Relatives told us they found the staff team to be polite and professional. Staff undertook a robust induction process and were confident in their role. The staff skills and knowledge was checked by the registered manager to ensure they were safe in their practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of safe and well led, the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. The service provided a small homely environment for people to live. Staff were skilled and knowledgeable of people's needs and provided care that was person centred.

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 03 August 2018).

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 COVID-19 and other infection outbreaks effectively.

We received concerns about the provider's governance systems and oversight of the service. As a result, we undertook a focussed 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.

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.

You can see what action we have asked the provider to take at the end of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Casarita on our website at 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 discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified breaches in relation to the providers quality and assurance systems at 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 safe.

Details are in our findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our findings below.

Requires Improvement ●

Casarita

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

This inspection was carried out by two inspectors.

Service and service type

Casarita 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. At the time of this inspection the registered manager was absent from the service and management support was being provided by a sister home.

Notice of inspection

This inspection was unannounced.

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. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with five members of staff including the supporting manager, supporting deputy manager and care workers.

We reviewed a range of records. This included two people's care records and three medication records. We looked at two staff files in relation to recruitment and staff supervision. 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.

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 deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management

- Each person had detailed risk assessments in place, however we could not be assured these had been reviewed regularly and were up to date with current information. For example, one person's positive behaviour care plan was last reviewed in May 2020. This meant the staff may not have accurate information to provide appropriate care and support. We spoke with staff who were knowledgeable of the people they supported and of actions to take to de-escalate situations where required.

Following the inspection, the supporting manager told us that all care plans and risk assessments had been reviewed and were up to date and reflective of people's current care and support needs. The supporting manager also told us the key-working system was being reviewed following staff changes and would be reinstated to support ongoing monthly reviews with people. This would ensure people's goals and aspirations could be discussed and progressed. This system required time to embed into the service and demonstrate that it supported positive outcomes for people.

- Risk assessments had been completed for all people and staff in relation to COVID-19 with additional measures being put in place to reduce risk where identified. In addition, the provider ensured there was adequate supply and access to facemasks, aprons and gloves. Staff and people living at the service participated in regular COVID-19 testing.
- One person told us, "I had a COVID test, I did it myself. I thought it would hurt but it was good."
- Relatives told us they were kept informed of any changes in health or concerns. One relative told us, "The contact from the home is wonderful, they inform us if there is anything wrong. There is always somebody available to speak to when I call."
- Health and safety checks were completed weekly and monthly; however, these had been completed inconsistently with some recorded on paper and some electronically. This meant that there was a risk of information being missed, and important maintenance delayed.

Following the inspection, the supporting manager told us they had reviewed processes and updated the recording system to ensure information was consistently recorded and saved electronically in one central place. These changes required time to embed and demonstrate they were sustained, whilst driving positive change.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe living at the home. One relative told us, "I am happy with where [relative] is. My mind is settled knowing they are happy and safe. The staff support [relative] well, they

know what they want and need and how to approach [relative] positively."

- Systems were in place to protect people from the risk of harm and abuse. Staff had received training and were knowledgeable and confident in their role. Staff knew how to raise and report safeguarding concerns internally and externally to safeguarding authorities and the Care Quality Commission.

Staffing and recruitment

- Staff appeared to be busy throughout the inspection with limited time to sit and engage with people in activities.
- Staff told us there was use of consistent agency staff to support adequate staffing levels in the home. In addition, staff from a sister home provided support when unexpected absence occurred.
- The supporting manager told us recruitment was actively taking place however this had been challenging during the COVID-19 pandemic.
- Relatives told us they felt staffing levels were stable and were familiar with staff who were polite and professional. One relative told us, "It has been hard during the COVID-19 pandemic, but they have done well." Another relative told us, "The (registered) manager stayed at the home for several nights during the pandemic and lockdown to provide support to people and staff. You wouldn't find that everywhere."
- A recruitment process was in place which ensured relevant pre employment checks had been completed. This included checks of the Disclosure and Barring Service (a check of criminal records to help employers make safe employment decisions).

Using medicines safely

- Staff had received training in the safe administration of medication and had been assessed by the manager to ensure they demonstrated the knowledge and skills required.
- People had detailed plans and information in place to support staff in managing their medicines safely. These included guidance on what the medicine was used for; preferences to administration, for example ,from a spoon with yoghurt and any side effects which may occur.
- Staff worked alongside prescribers to ensure the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) or STAMP (supporting treatment and appropriate medication in paediatrics) were followed. One relative told us, "The home has reviewed medicines and reduced an antipsychotic medication for [relative]."

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 making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.
- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. People were encouraged and supported by staff to clean their own rooms however this was not consistent throughout the home. Staff were responsible for the cleaning of equipment and communal areas. Following the inspection, the provider told us they had reviewed the cleaning schedules and completed a fresh Infection, prevention and control audit and implemented an action plan to ensure consistent levels of cleanliness throughout the home.

Learning lessons when things go wrong

- Incidents and accidents were reported and recorded appropriately within the home.
- Incident and accident reports were analysed by the registered manager and the outcomes of these and lessons learnt were shared with the staff to help drive improvement. For example, following a recent medication error the manager had made changes to the training process for staff. This enabled opportunity for staff to have an enhanced understanding of the importance of checking medication dispensed by the pharmacy for any discrepancies in dosage or frequency and actions to take.

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 management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- At the previous inspection we found that some of the quality monitoring in place was ineffective. At this inspection we found this had not changed and there was not evidence of improvement or effective provider governance and oversight. The providers quality assurance systems were ineffective and had not addressed the failings of the service identified by the inspectors at this inspection.
- An electronic system was in place for recording all information however this was not being used consistently by staff. This meant that some staff were completing paper records to be scanned in and others were using the electronic system. This increased the risk of up to date information not being available to all staff when required.
- Quality monitoring checks were in place which identified areas within the home and environment which required improvement, however, some of the environmental areas identified had not been actioned. For example, new flooring in the home and decoration of rooms. The provider told us this work could not be completed by their own contractors during the COVID-19 pandemic. There was not evidence that the provider had looked to outsource these works to external contractors to be completed in a more timely manner.

We found no evidence that people had been harmed however, systems were not robust enough to demonstrate effective provider oversight of the service. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

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.

- Staff told us they had not received supervisions during the COVID-19 pandemic but felt able to approach the registered manager to discuss concerns or ideas they had. The supporting manager told us moving forward a new supervision schedule had been implemented to ensure staff had regular supervisions.
- Staff and relatives told us they felt supported by the registered manager and found them to be approachable. One staff member told us, "The (registered) manager is a fabulous person who goes above and beyond for people and staff." A relative told us, "The (registered) manager is hot on things and very approachable. We have never had to raise a concern but feel that if we need to, we would be listened to." And, "Staff are polite and professional, we feel confident they have the skills and knowledge they need."
- The registered manager was aware of their responsibility of notifying CQC of reportable events when

required.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People we spoke with felt staff provided care and support to meet people's individual needs. One person told us, "I like living here, I get to go out." A relative told us, "The staff encourage [relative] to participate in activities in the service. If [relative] does not like the activity they look to find something else [relative] enjoys." And, "The staff are very thoughtful, they look after people as individuals."
- Staff spoke with passion and enthusiasm about the people they supported. All staff spoken with were knowledgeable of people, their needs, likes and preferences and how to provide encouragement and support to achieve positive outcomes.
- Relatives we spoke with told us the home had maintained contact with them throughout the pandemic through emails and telephone calls. One relative told us. "The staff and manager call me frequently and provide me updates on [relatives] health as well as updating me with any changes or events taking place at the home."

Continuous learning and improving care

- People and relatives provided positive feedback about the support they received. One person told us, "I am happy here, the staff are helpful people. The staff help me with cooking and things." A relative told us, "I am quite happy and have no concerns. I think Casarita is wonderful. If I am concerned about anything, I can phone and speak with the (registered) manager and staff at anytime. I feel that anything I say will be taken on board."
- The supporting manager welcomed feedback and felt this was important to support making changes and drive improvements.

Working in partnership with others

- Records viewed demonstrated professional reviews which had taken place via the telephone during the COVID-19 pandemic and the outcomes of these.
- During our visit the supporting manager was observed contacting health and social care professionals to request a review of needs to ensure appropriate support was in place for one person living at the home.

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 17 HSCA RA Regulations 2014 Good governance The provider failed to have systems in place to assess, monitor and improve the quality and safety of services provided. Regulation 17 (1) (2) (a) (b) (c) (f)