

Fordent Properties Limited

Orchard Manor Care Home

Inspection report

Greenacres Court
Acres Lane
Upton
Chester
CH2 1LY
Tel: 01244 376568
Website:

Date of inspection visit: 3rd September 2015
Date of publication: 16/11/2015

Ratings

Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 16th & 17th June 2015. After that inspection we received concerns in relation to low staffing levels particularly during the evenings, reports that staff were under pressure and were not supported by the management team. Other concerns had been brought to our attention with regard to health and safety within the home. As a result we carried out an unannounced focused inspection on 3rd September 2015. This visit was undertaken during the evening. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Orchard Manor Care Home' on our website at www.cqc.org.uk.

The last inspection was undertaken in June 2015 and the service was rated as requires improvement. A breach of regulation with regard to management of medication was made. An action plan was received from the registered provider and they stated they would be compliant by

30th September 2015. As the timescale had not elapsed we did not review medication administration at this visit. We also made two recommendations around protecting people's property and maintaining their privacy and dignity and looking at staffing levels and the deployment of the staff team. As a consequence we have not reviewed the rating on this inspection and therefore it remains as requires improvement.

Orchard Manor is a care home for older people, set in large grounds off Acres Lane. It is on a bus route from Chester City Centre. There are 90 bedrooms in total divided into five units: Two of the units provide general nursing and personal care and three of the units provide nursing and personal care for older people with memory impairment. All the rooms are single and most have en-suite facilities. There are also several lounges and four dining rooms.

The service has a registered manager. A registered manager is a person who has registered with the Care

Summary of findings

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. The registered manager was currently on maternity leave and an acting manager was in place.

People told us they felt safe and comfortable in the home. They said that staff treated them well and that when needed staff were available to assist them. During the evening we saw that staff were available to meet people's needs.

The processes to ensure temperatures of hot water were appropriate were reviewed. Records showed that appropriate checks were undertaken and that thermostatic controls were in place on hot water taps to ensure that the water did not get too hot and that people were not put at risk of potentially being scalded.

Summary of findings

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.

People confirmed they were safe and well cared for. Staffing levels showed that people were supported when they needed it. People said staff were kind, caring and patient.

Record showed that appropriate checks were completed with regard to health and safety of water temperatures and storage around the building.

Requires improvement



Orchard Manor 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 was planned to check 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.

We undertook a focused inspection of Orchard Manor Care Home on 3rd September and this was unannounced. This inspection was completed to look at the issues raised by the local authority safeguarding team and other information we had received regarding the management of the service and health and safety.

The inspection team consisted of two adult social care inspectors.

We had received information from the local authority safeguarding team. This information included concerns that staffing levels during the evening were not robust and that people who lived at the home could be at risk. We were also informed that staff were “stressed” and were not supported by the management team. Other concerns had been brought to our attention with regard to health and safety within the home.

We spoke with eight people who used the service, two relatives, six staff, the acting manager and the regional human resource manager. We undertook informal observations throughout the evening and we reviewed a range of health and safety documentation and risk assessments, staffing rotas, minutes of meetings and other associated documentation.

Is the service safe?

Our findings

People who used the service said they felt safe within the home and that staff treated them well. They said that there were enough staff to meet their needs and that call bells were answered promptly when they rang. Comments included, “I feel safe here”, “There are plenty of staff”, “Staff check I am ok” and “Staff respond to me.” Other comments included “It feels very safe here, I am settled”, “Staff are very caring”, “staff respond to the call alarm promptly”, “If I want help, staff come” and “Staff help me.”

The last inspection was undertaken on 16th and 17th June 2015 and the service was rated as requires improvement. A breach of regulation with regard to management of medication was made. An action plan was received from the registered provider and they stated they would be compliant by end September 2015. As the timescale had not elapsed we did not review medication administration at this visit.

We received mixed comments from relatives regarding the staffing levels. Some relatives said that the service could do with more staff, whilst others said there were enough staff about. Some comments included “Sometimes they could do with more staff”, “Staff don’t always have time to talk”, “Staff say they are overstretched” and “Staff have too much to do and not enough of them”. However, they all agreed that the staff were kind and caring towards their relatives. Comments included “Staff answer the buzzer promptly”, “The staff are brilliant” and “They (staff) are caring.” However, our observations during the evening showed that there were sufficient staff to support people when they needed it.

We looked at the support staff received from the management team. Most staff said that they were not usually short staffed. On occasion if a staff member phoned in sick close to the start of the shift, it might take the management an hour or two to get cover. However, they said that cover would be provided by one of the staff team or an agency staff member and that often staff would “stay on” after they shift had ended to cover. One staff member explained that there was usually a “floater” staff member who would be used during these times. We did not find any evidence of staff being “under pressure” or not supported by the management team, but staff told us that they were supported by the management team.

Staffing rotas for the evening were seen which confirmed the staff on duty that evening. The staff allocation list for each unit within the home showed which staff were working on each unit. Agency and new staff were working alongside more experienced staff members. During discussions the agency staff member told us that they had received an induction at the beginning of the shift which included information on the fire procedures, emergency phone numbers, access to the units and building and access to the computer system. They confirmed that the information was sufficient to enable them to undertake their role.

People told us they were warm enough and during our visit the home was warm. We saw some people were using the extra blankets. The central heating and hot water boiler was being refurbished during our visit. We saw that risk assessments had been completed and extra portable heaters and blankets had been provided. The acting manager explained that they had not needed to use the portable heater and the weather had been warm, but they had been provided as a precautionary measure.

At our visit we saw information regarding forthcoming building work on the Tudor and Elizabethan units. There was a notice on the front door warning people entering of the work. The acting manager explained that meetings had been held with people who used the service, relatives and the staff team. They went on to explain that letters had also been sent to relatives explaining the situation and that they had assessed the situation. A decision had been taken to increase the staffing level by an extra person during the day time during this time. A list of cover for this period was in place. Documents showed that meetings and contact with relatives had taken place. A risk assessment had been completed with regard to the building work. This meant that people had been informed of the building work prior to it being undertaken, risks had been assessed and action taken to minimise the risk to people who used the service.

During a tour of the building we saw that hot water taps had thermostatic controls to prevent the water from the tap getting to hot and potentially scalding someone. In each bathroom there was a notice which reminded staff to check the water temperature prior to the individual having a bath or shower. The registered provider had ensured the safe storage of water and records confirmed this was up to date. The handyman completed hot water and a wide range of other temperature checks around the building on a weekly

Is the service safe?

or monthly basis as required. Records confirmed this. However, we noted that regular checks of the hot water in people's bedrooms and en-suites were not recorded. The acting manager said they would address this issue.