

# Helping Hand Care Home Limited

# Goodwood Orchard Care Home

## 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

Goodwood Orchard Care Home is a residential care home providing personal and nursing care for up to 21 people. The service supports older people, including those living with dementia. At the time of the inspection visit, 20 people were living in the service.

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

Arrangements for assessing risk and safety monitoring were not always robust, as a number of issues with the environment were identified during the inspection visit. The registered manager took action immediately following the inspection to rectify all of these issues.

People who used the service told us they felt safe and happy. They told us staff treated them well and they knew who the manager was. Staff had a good understanding of safeguarding, and how and who to report concerns to. Staff had a good level of knowledge of people's needs, and how they cared and supported people.

Infection control measures had been increased since COVID-19 and the registered manager had worked hard to ensure people remained safe. However, some hygiene issues were identified during the inspection, which were rectified swiftly by the registered manager.

People and relatives' spoke positively of the care and communication they had received during COVID-19.

The registered manager had quality monitoring systems in place which reviewed incidents and looked at patterns. This was helpful to identify trends, or key times when people may need additional support.

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 good (published 12 December 2019). At this inspection we found evidence that the provider needs to make improvements. Please see the safe and well-led sections of this report.

### Why we inspected

We received concerns in relation to restrictive practices when supporting people who become distressed. 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 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.

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.

The registered manager took immediate action following the inspection to mitigate the concerns found by the inspectors at this inspection.

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

#### Follow up

We will continue to monitor information we receive about the service until we return. 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 not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

### Is the service well-led?

The service was not always well-led.

Details are in our well-Led findings below.

**Requires Improvement** ●

# Goodwood Orchard Care Home

## **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

The inspection was carried out by two inspectors. A third inspector made telephone calls to relatives and staff.

Goodwood Orchard 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. The manager was also the owner of the service, and they are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was announced shortly before it took place. This was to obtain information around COVID-19 within the service before entering the premises.

### What we did before the inspection

We reviewed information we had received about the service since its last inspection. We sought feedback from a local authority. We used all this information to plan our 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 used all of this information to plan our inspection.

### During the inspection

We spoke with four people who used the service. We spoke with three members of care staff, and the registered manager. After the inspection we spoke by telephone with five relatives of people using the service and four care staff about their experience of the care being provided.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff recruitment and supervision records. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

### After the inspection

We continued to seek clarification from the registered manager to validate the evidence found. We looked at training records, the business continuity plan and policies the registered manager sent to us following our site visit.

# 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 now deteriorated to requires improvement. This meant some aspects of the service were not always safe. There was an increased risk that people could be harmed.

### Assessing risk, safety monitoring and management

- The registered manager had systems in place for staff to assess and monitor people's safety, however, inspectors found a number of issues that required attention to prevent potential harm. Inspectors observed wheelchairs being stored in a corridor on the ground floor. A wheelchair was left by staff in front of a fire door and one fire door was not closing correctly, potentially putting people at risk. We brought these issues to the attention of the registered manager, who took immediate action to resolve them.
- A cupboard containing hazardous substances was seen unlocked by inspectors. This was in reach of people living at the service, which could have led to exposure to such substances.
- Inspectors identified the garden as having a number of potential hazards. The handrail leading to the garden was deteriorating, there was loose paving on the raised patio and the garden furniture was not in a good condition. The registered manager acted to address the safety concerns immediately during and after the inspection, ensuring that people could use and access the garden safely.
- Risk assessments documented the risks that were present in people's lives, and these supported staff to work safely with people, however they were not always reviewed in line with the provider's policy. Inspectors identified risk assessments for two people, had not been reviewed for two months. The registered manager took immediate action to resolve this.
- Staff were observed supporting people with equipment, into the dining room for lunch. Staff worked together, calmly and with patience.

### Preventing and controlling infection

- Inspectors found some hygiene issues in the premises. Flooring for three of the toilets in the service required attention and cleaning was required in parts of the lounge. The registered manager took immediate action to resolve these issues after the inspection.
- The service had a clear infection control policy, this was up to date and had been updated in response to COVID-19. The service had an additional COVID-19 Plan in place to manage the risks and their response to the pandemic effectively.
- Staff had a clear understanding of infection prevention and control with regards to COVID-19, as the registered manager had focused on ensuring all staff were trained, and regularly briefed. This included the use of Personal Protective Equipment (PPE), the putting on and taking off of PPE, and its disposal. One member of staff was reminded by the manager on how to wear their face mask correctly during the inspection.
- Relatives confirmed what staff had told us about the procedures they had followed, which included hand hygiene and the wearing and safe disposal of PPE. A relative told us the registered manager had called them early into the pandemic, to explain the extra steps now being taken to keep people safe.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training in dementia care, which the registered manager informed us, covered managing distressed behaviours in the least restrictive way. The registered manager was signposted to the Restraint Reduction Network (RRN) for information on training for its staff, in line with the new RRN standards.
- Staff had confidence the registered manager would deal with any concerns raised and they were aware of the external organisations they could report potential abuse to, which included social services, the police and the Care Quality Commission (CQC).

Staffing and recruitment

- There were enough staff to meet people's needs. One person told us, "Staff always help you, in the morning, get you ready for the day and they get you ready for bed." Staff told us there were enough staff deployed across shifts to ensure people's needs were met. The registered manager had introduced an extra carer to support staff in the morning at the service.
- The registered manager used a dependency tool to determine staffing levels required for people's needs in the service. This was still to be updated following a recent admission.
- The registered manager had ensured staff were safely recruited by undertaking pre-employment and identity checks. These included a Disclosure and Barring Service check which helped to support safer recruitment decisions.
- Staff felt seeing the registered manager covering shifts was positive and they helped one another out to cover shifts when needed. The registered manager praised the staff team highly due to their dedication and commitment to the people in the service, during COVID-19.

Using medicines safely

- Medicines were administered safely by staff who had received training. The registered manager carried out yearly competency checks. Medication administration records (MAR) in use were completed accurately by staff. Audits and checks were in place to ensure any mistakes would be found and acted upon.
- Medicines were stored safely, however space was limited in the service and a discussion was held with the registered manager with regards to the suitability of where the medication trolley was located. A staff member was seen having to move out of people's way, frequently during a medication round.
- Protocols were in place to manage medicines that were required on an 'as and when' basis. Staff understood the procedures and approaches required to ensure medicines were taken appropriately.

Learning lessons when things go wrong

- The registered manager regularly reviewed information when things did not work well or when there were shortfalls in the service and shared the learning with staff. Audits and team meetings were used effectively to document and communicate learning.
- Staff were aware of the need to report and record any incidents to the registered manager.
- Relatives told us, staff and the registered manager always contacted them following any incidents. One relative said, "Staff tend to worry about [people's] safety, any bump or cut – they're straight on to it."



# 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 good. At this inspection this key question has deteriorated to requires improvement. 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; and 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

- Systems and processes had not identified the concerns inspectors found with regards to the environment during this inspection. The registered manager took swift action to rectify the concerns after the inspection.
- The registered manager had worked consistently at the service since becoming the registered manager, however it was identified that responsibilities needed to be delegated amongst the staff team.
- The registered manager had reported concerns to families and the local authority in a timely manner, to enable appropriate and additional support to be provided if and where needed. Regular notifications were received by the Care Quality Commission.
- The registered manager maintained records of accidents and incidents. Information and learning were shared with staff to reduce the likelihood of recurrence for people.

### Continuous learning and improving care

- Prior to the inspection the registered manager had recognised that the current electronic care planning system was not as effective as they had hoped. It was not providing the oversight and responsive reporting as required. The registered manager, along with a senior carer, had started to implement an alternative system to ensure better oversight. This would need to be continued and embedded into practice.
- Due to the changing mobility of people in the service, the registered manager had recently carried out an analysis of falls, to ensure the care being provided was still appropriate. This enabled the registered manager to ensure people's individual care plans were still appropriate and people received the care they needed.
- Continuous staff learning had been encouraged and promoted by the registered manager. Staff confirmed they received frequent opportunities to learn and develop their practice and knowledge.
- The registered manager was open and transparent throughout the inspection and accepting of findings that identified a need for improvement.

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

- The service had a positive and open atmosphere. A person told us, "We have a laugh here, I would not want to live alone."
- Relatives were also complimentary about care their loved once receive at Goodwood Orchard. One relative told us, "I've got no concerns about the care my [relative] is getting, they look after [them] well and

will call me regularly with updates." Another relative said, "Staff and [the registered manager] have been great at looking after my [relative]."

- The staff we spoke with told us they were confident in their roles and had the support they needed from the registered manager. One staff member felt the staff team were flexible in their approach to ensure good outcomes for people. Staff also told us that when they first joined the service, they found senior carers had been very supportive and guided them on how to care for people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were encouraged to discuss any matters important to them. One person told us staff were always asking questions and checking people had what they needed and wanted in the service.
- Regular staff meetings had taken place when appropriate to do so. Regular handover meetings took place, where staff and the registered manager updated each other on important areas, which meant people's needs were responded too.
- Staff were supported by the registered manager. One staff member told us, "I've been going through a lot personally myself and [the registered manager] has given me the time I needed, being there for emotional support."

Working in partnership with others

- The registered manager had been working in partnership with outside agencies to improve people's care.
- People's funding authorities, as well as other health and social care professionals were regularly communicating with the service about people's overall care.
- We saw the registered manager had recognised when people's needs changed. They made the appropriate referrals and arranged meetings with health and social care professionals promptly to address this. Seeking advice, during the delays in accessing healthcare, due to COVID-19. The registered manager was keen to be doing everything reasonable for people.