

Forest Edge Care Home Limited

Forest Edge

Inspection report

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Tel: 02380813334

Date of inspection visit:
27 January 2023

Date of publication:
02 March 2023

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Forest Edge is a residential care home providing accommodation and personal care to up to 32 people. The service provides support to older people who may be living with dementia, sensory loss, physical disabilities or mental health conditions. At the time of our inspection there were 24 people using the service.

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

This was a targeted inspection to follow up a warning notice served at the previous inspection about how well led the service was. We use targeted inspections to follow up on Warning Notices or to check 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.

Based on our inspection of safe and well led, we found improvements had been made and the warning notice had been met to ensure improvements were made in specific areas to evidence compliance with the regulations.

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 inadequate (published 06 December 2022). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At the last inspection we served warning notices in respect of good governance. At this inspection we found improvements had been made and the provider had met the warning notices in full.

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 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 inadequate.

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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.

Enforcement

The provider remains in breach of regulations found at the last inspection. These relate to staffing and training, medicines, premises, person centred care, mitigating risks to people and making decisions for people who lack capacity or have fluctuating capacity.

Special Measures

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions of their registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Forest Edge

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 Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations.

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 one inspector.

Service and service type

Forest Edge is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement dependent on their registration with us. Forest Edge is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the

quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We reviewed information we had received about the service since the last inspection. We sought feedback from partner agencies and professionals. We used all this information to plan our inspection.

During the inspection

We spoke with registered manager and the deputy manager. We reviewed a variety of records relating to the management of the service, including policies and procedures, audits and risk assessments. Following the inspection, we continued to seek clarification from the provider to validate evidence found.

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Preventing and controlling infection

At our last inspection the provider had failed to ensure people were protected from the risk of infection. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Although the majority of improvements had been made, the provider continues to require improvement, however, is no longer in breach of regulation 12.

- At our previous inspection we were not satisfied the provider had effective arrangements in place to ensure the home and its equipment was properly cleaned and maintained.
- Refurbishment had commenced since the last inspection to address the concerns we had noted with regards to the cleanliness of the fixtures and fittings within the communal bathrooms. Further work was needed, but we were assured that this was planned to take place throughout the coming year.
- At the last inspection we noted stains on the stairway carpet and tables used for assisting people to eat their meals were damaged and worn. At this inspection all the tables had been replaced and a new carpet was in place.
- Whilst there were cleaning schedules in place, these did not include the cleaning of high touch points. The registered manager assured us these would be put in place straight away.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimize the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

- The provider was enabling visiting at Forest Edge; However, the provider was still cautious about the risks of transmitting COVID-19 and visitors could still only visit people in their rooms. We spoke to the registered manager about the current government guidance about opening up the home fully to visitors. They informed us they had planned a coffee morning with relatives to discuss visiting and being able to see loved ones in communal areas as well as people's rooms.

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 our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole 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; Continuous learning and improving care

At our last inspection systems were either not in place or robust enough to ensure the quality and safety of the service was assessed and monitored effectively. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014, good governance.

Enough improvements had been made, the provider was no longer in breach of Regulation 17 (Good governance).

- Following the last inspection, the registered manager had strengthened the management team. They had appointed a deputy manager and recruited 2 new heads of care.
- At the last inspection, we had found that the premises were not adapted for provision of a specialist dementia service, the décor was not suitable and lighting poor in areas. Improvements had been made. The provider had completed an environmental assessment tool designed by the Kings Fund, aimed at supporting service to make the environment more suitable for people living with dementia. The provider had made improvements as a result of the assessment, for example, new signage had been provided at the right height for people living for dementia, lighting had being improved and new chairs had been ordered so they contrasted with the walls.
- At the last inspection we had found that the governance systems were not robust and had failed to identify concerns we found at inspection. The provider had now introduced a number of new audits which checked the quality and safety of all aspects of the service. The registered manager was completing these weekly at present but was going to review the frequency to ensure they were robust and helped provide the

right information to constantly improve the service.

- At our last inspection, we had been concerned that the registered manager did not have sufficient oversight of the day to day care and the quality of care. Improvements had been made. The registered manager had introduced weekly walk rounds of the home to ensure it was safe and to review and assess staff interactions with people living at the home. The directors also visited monthly and met with people to ensure they were happy at the home. They discussed the outcome of their visits with the registered manager to ensure any actions required were taken forward.
- At the last inspection we had concerns about the quality of the training and the lack of staff knowledge in relation to the Mental Capacity Act 2005. The provider had taken action to improve the training provided. Training had now been completed in areas such as dementia, MCA and first aid. The registered manager and deputy manager were also booked to attend infection control lead training and advanced dementia training.
- When we last inspected, we had found that areas of the premises were not well maintained resulting in infection control risks and some areas were not as clean as they should be. We have noted in the safe section of this report that the registered manager had taken, and continued to take, action to improve the cleanliness of the home and of the fixtures and fittings within it.