

Orchard Care Homes.com (3) Limited

Laureate Court

Inspection report

Wellgate
Rotherham
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Ratings

Overall rating for this service

Inadequate



Is the service safe?

Inadequate



Is the service effective?

Inadequate



Is the service caring?

Requires Improvement



Is the service responsive?

Inadequate



Is the service well-led?

Inadequate



Overall summary

We carried out an unannounced comprehensive inspection of this service on 18, 19 and 25 November 2014 in which several breaches of legal requirements were found. We also served four warning notices in relation to breaches. These were infection control and cleanliness, supporting people to eat and drink sufficient amounts, respecting people's privacy and dignity and assessing and monitoring the quality of service provision.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches. We undertook a focused inspection on the 3 March 2015 to check that they had followed their plan and to confirm that they now met

legal requirements of the warning notices. We did not look at other breaches at this inspection as the provider was still in the process of implementing their action plan and embed these improvements into practice.

This report only covers our findings in relation to the four warning notices. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Laureate Court Care Home' on our website at www.cqc.org.uk.

Laureate Court provides accommodation and nursing care for up to 82 people who have nursing needs and people living with dementia. There were 62 people living at the home when we visited. Laureate Court is divided

Summary of findings

into three units. Keats unit provides accommodation for up to 32 people who require residential care. Byron and Shelly units provide accommodation and nursing care for up to 25 people each.

At the time of our inspection the home had a manager in post who commenced employment with the company on 18 February 2015. This person has not yet been registered with the Care Quality Commission. This service is required to have a registered manager. 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 a legal responsibility for meeting the requirements of the Health and Social Care Act and associated Regulations about how the service is run.

We had asked the provider to be compliant with three warning notices by the 21 January 2015 and one by the 30 January 2015. At our focused inspection on the 3 March 2015, we found that the provider had met the requirements of the warning notices.

We found the provider had taken action to address the issues relating to infection control and cleanliness at our last inspection. We found the environment was clean and tidy.

We saw people who used the service were given choices and these were respected by staff. One person had requested a salad sandwich and we saw this was provided. Staff were available in the dining area during

the meal and offered support in a caring and understanding way. Staff were aware of people's dietary requirements and acted on their needs. Throughout the day we saw drinks and snacks were available and staff assisted people with their preference.

We spent time observing staff interacting with people who used the service. We found staff were kind and compassionate. We spoke with people and they told us staff were very nice. One person said, "The staff are very kind, when I have been crying they always come and cheer me up." We spoke with a relative who said, "I can talk to staff here and they listen. I feel confident my relative is looked after."

We spoke with people who used the service and their relatives and were told they felt able to raise concerns. One person said, "I am sure the staff would sort out any concerns, they are very good." Another person felt the new manager and project manager were very approachable and felt they could raise concerns if needed.

We saw audits which had been completed by the project manager. These were in areas for example; accidents and incidents, falls, weight loss, care plans, medication and complaints. Where issues had been identified an action plan was in place to resolve them. For example the audit for infection control required had identified a cleaning schedule for cleaning the laundry was required, we saw this was in place.

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?

We found that action had been taken to improve the safety of the service.

We found the service had made improvements in regard to cleanliness and infection control. We completed a tour of the home and found the environment clean and tidy.

We will review our rating for safe at our next comprehensive inspection.

Inadequate



Is the service effective?

We found that action had been taken to improve the effectiveness of the service.

We saw people were given a choice and this was respected. One person had requested a salad sandwich, this was provided.

Snack and drinks were available throughout the day.

We will review our rating for effective at our next comprehensive inspection

Inadequate



Is the service caring?

We found that action had been taken to improve this area.

We saw people were treated with dignity and respect. Staff knew the people they were supporting and how best to deal with different situations.

We will review our rating for caring at our next comprehensive inspection.

Requires Improvement



Is the service responsive?

We found that action had been taken to improve the response of the service.

People felt able to raise concerns and had confidence that they would be listened to.

We will review our rating for responsive at our next comprehensive inspection.

Inadequate



Is the service well-led?

We found that action had been taken to improve the management of the service.

We found a new manager in post who people felt at ease to talk to.

Audits had been completed by the project manager to monitor the quality of services provided and actions taken to address issues identified.

People were asked about their views and these were acted on.

We will review our rating for well led at our next comprehensive inspection.

Inadequate



Laureate Court

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 to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 18, 19 and 25 November 2014 had been made. The improvements we looked at were in relation to the warning notices issued. We inspected the service against the five questions we ask about services. This is because the service was not meeting some legal requirements.

We undertook a focused inspection at Laureate Court on the 3 March 2015. This inspection was to check that improvements in relation to four warning notices served on the provider following our comprehensive inspection had been met.

The inspection was carried out by an adult social care inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of service.

Before our inspection we reviewed the information we held about the provider. We spoke with the local council contracts team and one health care professional.

At the visit we spoke with five people who used the service, three relatives, the manager, project manager, two unit managers, a nurse and five staff. We also used a Short Observational Framework for Inspection (SOFI) to observe care and support provided to people in the dining area at lunch time. SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

At the visit we looked at three people's care records, and other documentation relating to the areas looked at.

Is the service safe?

Our findings

At our comprehensive inspection of Laureate Court on 18, 19 and 25 November 2015 we found that there were not enough staff with the right skills and knowledge to meet people's needs.

This was a breach of the Regulation 22 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We also found risks associated with people's care were identified but care records did not always give clear direction on how to prevent risks from occurring. This was a breach of the Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We found inconsistencies in the medication records. This included gaps in Medication Administration Records where medicines had not been signed for and no explanation had been provided about why they had not been given. This was a breach of the Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We also found that people were not cared for in a clean and hygienic environment. This was a breach of the Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. We took enforcement action on this breach and issued a warning notice. We asked the provider to be compliant with the warning notice by 21 January 2015.

At our focused inspection of 3 March 2015 we checked to make sure action had been taken to comply with the warning notice. We did not look at other breaches at this inspection as the provider was still in the process of implementing their action plan and embed these improvements into practice. We will inspect the service again to check if they have made improvements in relation to the other breaches in this domain.

We found the service had made improvements in regard to cleanliness and infection control. We completed a tour of the home and found the environment clean and tidy. Byron unit had recently received 25 new lounge chairs which replaced chairs which were worn and difficult to clean. We found furniture throughout the home was clean and well presented. We spoke with the project manager who informed us that 17 new bedroom suits had been ordered and a plan was in place to replace all bedroom suits.

We looked at the kitchenette on each unit and found that the one on Keats unit was in need of attention. We saw the floor was dirty and crumbs of food were gathering where there was a gap between the flooring and the cupboards. We spoke with the manager about this who took action to address this immediately. We also found a microwave in Keats unit kitchenette which was rusty inside and had damage to the inside. The staff told us this was out of order but there was no sign indicating this. We informed the project manager who took action to remove the microwave immediately.

At our last inspection we found some toilets and bathrooms which required attention as they were out of order. We found that contractors had begun refurbishment of two toilets on Byron unit, one bathroom on Keats unit and one bathroom on Shelly unit on 2 March 2015.

At our last visit we found unpleasant odours throughout the home. On our inspection of 3 March 2015 we found improvements had been made in this area. We spoke with the project manager about an unpleasant odour we had noticed on Shelly unit. The project manager informed us that the corridor flooring needed replacing and that funding had been approved for work to commence in April 2015.

The home had a house keeper who completed audits around housekeeping. We spoke with the house keeper who told us she had been asked to take on more responsibilities and to lead the domestic team.

Is the service effective?

Our findings

At our comprehensive inspection of Laureate Court on 18, 19 and 25 November 2015 we found that they were not always acting in accordance with the Mental Health Act 2005.

This was a breach of the Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We also found staff were not being supported effectively. This was a breach of the Regulation 23 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We also found that people were not supported to have sufficient to eat, drink and maintain a balanced diet. This was a breach of the Regulation 14 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. We took enforcement action on this breach and issued a warning notice. We asked the provider to be compliant with the warning notice by 21 January 2015.

At our focused inspection of 3 March 2015 we checked to make sure action had been taken to comply with the warning notice. We did not look at other breaches at this inspection as the provider was still in the process of implementing their action plan and embed these improvements into practice. We will inspect the service again to check if they have made improvements in relation to the other breaches in this domain.

We observed lunch on Byron unit and Keats unit. Lunch was a light meal with the main meal served in the evening. People appeared to enjoy their food, although one person said, "The food is a bit bland." However other people told us they had enjoyed their meal.

We saw people were given a choice and this was respected by staff. One person had requested a salad sandwich and we saw this was provided. Staff were available in the dining area during the meal and offered support in a caring and understanding way. Staff were aware of people's dietary requirements and acted on their needs. Throughout the day we saw drinks and snacks were available and staff assisted people with their preference.

We looked at three people's care records in relation to food and nutrition. We found two of these people had lost weight. One person had lost 3.8kg in February and a food chart was in place to monitor their intake. The other person had lost a considerable amount of weight over the past 6 months. This had only been recently identified and the project manager explained some factors which may have contributed to the weight loss. We looked at food and fluid charts relating to these people and found not much detail. For example one food chart listed the meal and states 'ate all' which gave no indication of how much this was.

We spoke with the manager who told us they had started looking at care records in relation to nutrition to ensure people's needs were met. We evidenced that this had commenced.

We saw menus were displayed in written format and people would have benefitted from picture menus. We saw some foods were available as pictures but this could be improved on. We spoke with the project manager and manager regarding how the menu was displayed. We were told this was an area that was currently in progress. We will review the progress of their continued improvements in relation to ensuring people are supported to have sufficient to eat, drink and maintain a balanced diet at our next comprehensive inspection of this service.

Is the service caring?

Our findings

At our comprehensive inspection of Laureate Court on 18, 19 and 25 November 2015 we found people's privacy and dignity was not respected. This was a breach of the Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

At our focused inspection of 3 March 2015 we checked to make sure action had been taken to comply with the warning notice. We will review the progress of this at our next comprehensive inspection of this service to check this continues to be embedded in to practice.

We spent time observing staff interacting with people who used the service. We found staff were kind and compassionate. We spoke with people and were told staff were very nice. One person said, "The staff are very kind, when I have been crying they always come and cheer me up." We spoke with a relative who said, "I can talk to staff here and they listen. I feel confident my relative is looked after."

We spent time sitting in a lounge on Byron unit. We observed staff offering choice of drinks and breakfast. One person who had just come down for breakfast was asked what they would like from a series of options. They requested cornflake's and wanted to eat them in the lounge. Their choice was respected by staff. Another person wanted the staff to help curl their hair and we saw staff responded to this. The member of staff involved the person throughout this, checking that it was how they liked it.

During lunch on Shelly unit we observed one person who was pulling the table cloth off and becoming distressed. A member of staff went and got a clean table cloth and returned with it saying, "Shall we put this one on instead of the other." The person gave the staff the table cloth and together put the clean one on the table. The staff member said, "Thanks for helping me sort that out." The staff member's actions calmed the person and defused the situation. This showed the staff knew the people they were supporting and knew how to react to situations.

Is the service responsive?

Our findings

At our comprehensive inspection of Laureate Court on 18, 19 and 25 November 2015 we found care was not being planned and delivered in line with people needs and preferences. This was a breach of the Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We also found that people did not feel able to raise concerns and had no confidence that they would be resolved. This was a breach of the Regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. We took enforcement action on this breach and issued a warning notice. We asked the provider to be compliant with the warning notice by 30 January 2015.

At our focused inspection of 3 March 2015 we checked to make sure action had been taken to comply with the

warning notice. We did not look at the other breach at this inspection as the provider was still in the process of implementing their action plan and embed these improvements into practice. We will inspect the service again to check if they have made improvements in relation to the other breach in this domain.

We spoke with people who used the service and their relatives and were told they felt able to raise concerns. One person said, "I am sure the staff would sort out any concerns, they are very good." Another person felt the new manager and project manager were very approachable and felt they could raise concerns if needed.

We spoke with the manager who had spent time on the units getting to know people who used the service, their relatives and the staff. She told us she was making sure people felt at ease to raise issues and would be upset if anyone left the home with a problem.

Is the service well-led?

Our findings

At our comprehensive inspection of Laureate Court on 18, 19 and 25 November 2015 we found the service was not being effectively assessed and monitored to ensure quality of service provision. This was a breach of the Regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We took enforcement action on this breach and issued a warning notice. We asked the provider to be compliant with the warning notice by 30 January 2015.

At our focused inspection of 3 March 2015 we found improvements had been made in this area. The previous manager had left the service but a new manager was in post. The new manager commenced in post on 18 February 2015. The manager was being supported by the project manager who was completing the induction process.

We saw audits which had been completed by the project manager. These were in areas for example; accidents and incidents, falls, weight loss, care plans, medication and complaints. Where issues had been identified an action plan was in place to resolve them. For example the audit for infection control required had identified a cleaning schedule for cleaning the laundry was required, we this was in place.

The service had conducted an annual survey in February 2015 and an action plan had been completed to address any comments raised. For example people would like a church service and entertainment. We spoke with the activity co-ordinator who was in the process of arranging these. This meant people's views were listened to.

We also saw minutes of a recent resident and relative meeting which also evidenced that people were being informed about the service. People were also able to contribute. We will review the progress of this at our next comprehensive inspection of this service to check this continues to be embedded in to practice.