

Osborne Care Homes Limited

Osborne House

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

Osborne House is a residential care home providing personal care and accommodation 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.

Osborne House accommodates up to 32 older people. At the time of the inspection 26 people were living at the home.

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

During this inspection we did not speak directly with people at the service due to the increased risks associated with the COVID-19 pandemic. People appeared relaxed and had a good rapport with staff and were undertaking activities.

People's medicines were administered and managed safely. There were effective audits in place. The service was clean and infection control procedures were in place for visiting, cleaning and to support effective handwashing however procedures relating to the safe storage of laundry required improving.

The provider had improved the auditing of the safe handling of medicines, hot water temperatures and overall governance systems. We recommend the provider seeks guidance from a reputable source to ensure their policies relating to the management of medicines remain current and up to date and laundry is being handled within current care home guidance.

Rating at last inspection and update

The last rating for this service was Requires improvement (published August 2019), there were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of either regulation however we have made some recommendations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on the 1 and 2 August 2019. Two breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve in regard to Regulation 12 (Safe Care and Treatment) and Regulation 17 (Good Governance).

This inspection was carried out to follow up on action we told the provider to take at the last inspection. We undertook this targeted inspection to check they now met the legal requirements. This report only covers our findings in relation to the breaches within Key Questions of Safe and Well-led.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Osborne House on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we 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?

Inspected not rated

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question.

Inspected but not rated

Is the service well-led?

Inspected not rated.

At our last inspection we rated this key question Requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question

Inspected but not rated

Osborne House

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the breach in relation to Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 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 one inspector

Service and service type

Osborne House 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.

Notice of inspection

We gave notice to this inspection to ensure we could manage the risks related to Covid-19.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a Provider Information Return prior to this inspection. This is information we required 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.

During the inspection

We spoke with four members of staff including the registered manager and provider. We undertook a walk around of the service to help us observe infection control procedures within the service and we reviewed medicines administration records, policies and procedures and audits. Following the inspection, we spoke with six relatives to gain views about the service.

After the inspection

We received clarification from the service to validate evidence and we requested further information and quality assurance records which we have used to support our judgements in the report.

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 Required improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the previous concerns we had about laundry that wasn't being processed safely and staff wearing nail polish that could impair effective hand washing. We will assess all of the key question at the next comprehensive inspection of the service.

Preventing and controlling infection.

At the last inspection we found soiled laundry was not being processed safely and was left at times within communal areas of the service. Staff were also wearing nail polish that could impair effective hand washing.

- During the inspection we observed some improvements were still required to the handling of laundry. For example, we found laundry that required additional processing was in close proximity to clean bedsheets and towels. This practice meant soiled laundry could pose a risk of cross contaminating clean laundry and therefore the spreading a potential infection. The providers infection control policy had no guidance for staff to follow to ensure laundry was being stored and handled in line with national infection control guidelines.
- The laundry room had a back log of dirty linen and clothing that required washing at an enhanced process. All washing machines were in use. The registered manager confirmed they were in the process of improving the laundry facilities within the home. Following the inspection, the provider sent us an action plan confirming changes had been made to the storage of clean and dirty laundry. They were also going to be extending the laundry shift so that clothes were not left hanging around the laundry room waiting to be washed.

We recommend national guidance is sought relating to handling linen safely within care homes.

- During the inspection we observed staff were no longer wearing nail varnish. There was a system in place to monitor staff were adhering to this policy.
- 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 promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

Using medicines safely

At our last inspection records were not always up to date to confirm people received their medicines as required. The provider's medicines policy had no guidance in place for the administration of covert medicines, medicines that required administering when required and how to manage homely medicines.

- At this inspection we found most improvements had been made to the provider's medicines policy. For example, guidance was in place for managing covert medicines and when required medicines. However, we found the homely medicines policy contained out of date information and no guidance for what to do if someone lack capacity.

We recommend the provider seeks guidance from a reputable source to ensure their policies relating to the management of medicines remain current and up to date.

- Medicines Administration Record (MAR) were completed as required and up to date.
- Daily and monthly checks were in place to monitor the recording of the MAR's charts and identify any shortfalls.
- Staff received training and were assessed to ensure they were competent in medicines administration. One member of staff told us, "I've completed medicines training and I've had my competency checks".

Assessing risk, safety monitoring and management

- At the last inspection we found the hot water temperatures were above the recommended safe ranges.
- At this inspection improvements had been made and temperatures were at the safe levels however one entry identified the hot water had exceeded the Health and Safety executive (HSE) Guidance. We raised this with the provider who confirmed this was a recording error. They confirmed action taken to prevent this from happening again.

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 Required improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the previous inspection.

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

At our last inspection we identified auditing and governance systems were not always fully effective in relation to the management of medicines, hot water checks and identifying shortfalls with infection control risks and dirty laundry. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection improvements had been made and the provider was no longer in breach of this regulation.

- Following our last inspection improvements had been made to the providers medicines policy however parts of the providers homely remedies policy was out of date and inaccurate. This shortfall hadn't been identified prior to our inspection.
- The provider had an infection control audit in place. This monitored how clean the home was and areas for improvement. However, it had failed to identify dirty laundry that presented a risk of contaminating clean laundry along with how much laundry required washing each day and if the arrangements in place were adequate. We fed this back to the registered manager. Following the inspection, the provider confirmed actions taken to prevent cross contamination of dirty and clean laundry. They also confirmed they were extending the laundry hours so that there was an increased capacity to wash more clothes per day.

We recommend the provider reviews their infection control audit in line with the safe handling of laundry within care homes.

- Effective medicines audits were in place. Systems were checked daily and monthly for any recording shortfalls.
- A monthly audit of water temperatures was in place. Actions were taken by the provider to ensure water temperatures were safe and within the recommended safety range. Where a record had identified one tap above the recommended temperature. The provider confirmed this was a recording issue. They took action to prevent this from happening again.
- The provider had audits in place that checked the home's environment, people's bedrooms, care plans,

handover records, the control of substances hazardous to health regulations (COSHH), health and safety, maintenance and grounds and training.