

Unity Homes Limited

Oakbank Care Home

Inspection report

Oakbank
off Rochdale Road
Manchester
Greater Manchester
M9 5YA

Tel: 01612058848

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Oakbank Care Home is a care home providing personal and nursing care to 42 people aged 65 and over at the time of the inspection. The service can support up to 55 people.

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

People were supported safely. Risks were identified, recorded, mitigated and reviewed. Staff were aware of the risks people presented. Accidents and incidents were recorded and reviewed. Further analysis of accidents and incidents had enabled the provider to implement further systems to support people at high risk of falls. Staff were recruited safely, and agency workers received a full induction to the service and were informed of people's needs and risks. Staffing levels were sufficient. The health and safety of the home was continually monitored.

Staff had been provided further on ongoing training to manage risks which had seen a reduction in falls at the home. Staff said the period of change since the last inspection had been positive and felt well supported by the management of the home. There had been an improvement to governance systems at the home which had enabled the provider to highlight, improve and implement action plans. A deputy manager had been employed to support the registered manager and staff felt this had been a positive addition to the team. The senior management team were actively involved with the day to day management of the home.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update) The last rating for this service was requires improvement (published 12 August 2020) and there were multiple 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 regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Oakbank Care Home 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Oakbank 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 team consisted of two inspectors.

Service and service type

Oakbank Care Home 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 a short period notice of the inspection. This was to enable us to check the COVID-19 status of the service and ask for documents to be ready for our arrival.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 and three relatives about their experience of the care provided. We spoke with nine members of staff including the nominated individual, the registered manager, the deputy manager, the quality and compliance manager, a nurse, a senior care worker, four care workers and a visiting professional.

The nominated individual is responsible for supervising the management of the service on behalf of the provider. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We also reviewed information in relation to infection control and reviewed the homes processes to manage in the pandemic.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had put people's safety at risk as risk assessments were not robustly completed and reviewed. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks to people were assessed, recorded, monitored and regularly reviewed.
- Staff had been provided with training and assessment in risk management and monitoring in relation to safe moving and handling of people, management of falls, use of bed rails, risk of choking and risks to skin integrity.
- Identified risks fed into care plans and staff were able to describe risks people presented and what action should be taken to reduce levels of risk. Staff told us, "[Name] has a sensor in their room so we know they are moving about." and "We now have additional strategies in place to monitor people who have fallen including additional observational checks and recording in fall's diaries.
- Where people were regularly falling, referrals were made to the falls team or GP for review.
- Personal emergency evacuation plans had been updated to reflect the current needs of people and how to support safe evacuation in an emergency.
- The safety of the premises was continually monitored internally and externally by competent contractors. All safety checks had been completed in a timely manner and plans were in place to further improve the home's health and safety.

Learning lessons when things go wrong

At our last inspection the provider had not done everything reasonably practical to learn from incidents and demonstrate people were receiving safe care and treatment. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Accidents and incidents were recorded and analysed for patterns and themes.
- The provider had implemented further strategies to manage the recording and reviews of accidents and incidents, specifically in relation to falls and the prevention of falls. We reviewed an analysis of falls which showed a reduction in people falling at the home since the last inspection.
- Staff had been given additional training in recording accidents and incidents and learning from such incidents was shared in staff meetings and supervisions.

- One staff member told us, "We now assess the use of equipment for people at risk of falling. We use a crash mat and ensure additional observations are in place."

Systems and processes to safeguard people from the risk of abuse

- People and their relatives felt safe at the home. One person said, "Oh yes, there is no slacking here, they (staff) are all good to us."
- Staff could describe symptoms which may indicate abuse was occurring and what action they would take to report the concern. Staff were confident the registered manager would act on any concerns they had.
- A relative told us, "I am very pleased with how [Name] is looked after. [Name] has never looked better in my opinion."
- Any concerning information had been shared with the appropriate health and social care professionals.

Staffing and recruitment

- Staff were recruited safely, and all pre-employment checks were in place before employment began.
- Regular agency workers worked in the home and they received a full induction to people's needs as well as being made aware of the health and safety arrangements of the home.
- On the nursing floor, staff told us staffing levels were sufficient. We received mixed responses about staffing on the residential floor, however, the provider assured us staffing levels were continually reviewed and a monthly review of dependency levels supported this.
- Two people told us staff were always present in communal areas and this was our observations during the inspection.

Using medicines safely

- Medicines were safely managed. Staff were trained to safely administer medicines and regularly had their competency checked
- Processes were in place for the safe receipt, storage, administration, recording and disposal of medicines.
- We reviewed five people's medicines and found medication administration records were fully completed and medicines had been administered as prescribed. Stock levels were correctly recorded.
- Where people were prescribed fluid thickener to aid swallowing, the consistency required was recorded in daily records; however, this was not highlighted on the individual fluid charts which staff signed to confirm they had added the thickener to the correct consistency. This was amended by the end of the inspection and staff could describe what level of consistency was required.

Preventing and controlling infection

- 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.
- We were assured that the provider's infection prevention and control policy was up to date.

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 inadequate. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted quality, person-centred care.

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

At our last inspection the provider failed to ensure robust audits were in place to identify shortfalls in care plans and risk assessments and remedy them in a timely manner. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider had implemented and improved their quality and governance systems to assess key areas of the service and capture where improvements needed to be made.
- The registered manager was now supported by a deputy manager in addition to the nominated individual and a quality and compliance manager. A clinical lead was still being recruited for the home. Staff told us with the support of the management, they had seen positive improvements across the home.
- Staff told us improvements in handovers and communication meant they were more aware of risk across the home and this had been crucial to the improving outcomes for people, for example, one staff member said, "We are fully informed of any changes to people. If we have been off, we get updated about new service users and get to read the care plans and assessments and are able to introduce ourselves."
- All staff we spoke with said they felt well supported by the management team.

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

At our last inspection the provider failed to highlight where care plans and risk assessments did not accurately describe people's current needs. This was a breach of regulation 9 (Person-centred Care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 9.

- Every person living in the home and those people new to the home had received a full assessment of their needs which generated care plans and risk assessments. Staff, people living at the home and relatives where possible had been involved in the implementation and reviewing of the assessments to ensure they were person-centred and reflective of current needs.
- The home was undergoing a programme of redecoration in which people living at the home had been involved with choosing colour schemes. The colours chosen were considered to have a more calming effect

for people living with dementia. Lighting in communal areas had been improved to support people to be able to see better and which may contribute to reducing falls.

- The provider had built a visiting pod to ensure people could see their families through the pandemic. A relative told us, "We have had four visits to the pod now, they (staff) book you on a time and date. It's been a smooth process." The WIFI across the home had also improved to enable people to keep in touch with their families and friends.
- A staff survey recently completed showed a positive response to staff training and the improvements to the home since the last inspection. Communication from the management team was also highlighted as very good.
- Staff told us they had been able to request additional training such as dysphagia (swallowing difficulties) training and this was provided.
- We observed people being treated with dignity and respect which included being referred to as their chosen name or sir or madam.

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

At our last inspection, the provider had not undertaken any learning following four serious incidents at the home and had not mitigated risk to others. The provider had not assured themselves agency workers were aware of people's care needs.

This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider had undertaken a period of reflection since the last inspection and reviewed systems and processes to improve outcomes for people living at the home.
- The provider had sent the Care Quality Commission an action plan and updates, fortnightly which had shown the improvements made to the quality and safety of the service and shared further plans to improve.
- A new electronic monitoring system was being implemented into the service to provide additional oversight of quality monitoring. The system set reminders for follow up and reports to the provider which prompted them ensure the registered manager was following up any accidents or incidents, reviews of care and as well as other aspects of home management.
- Staff and management at the home were being given opportunities to complete qualifications in health and social care and enhance their knowledge.
- A nurse told us they spent time with agency staff to ensure they were fully aware of their responsibilities to safely administer medicines and were fully aware of people's needs.
- One relative had shared a concern with us, and we saw a response had been actioned and plans put in place to rectify their concerns.
- One person told us, they were, "Very happy" living at the home and the staff were "Excellent and caring." Staff told us they promoted a positive culture which included allowing time for people to do as much as they can for themselves while observing their safety.

Working in partnership with others

- The provider had worked with the local authority to improve the home.
- Relatives said they had been informed about any changes to their relations wellbeing throughout the pandemic.

- A visiting professional we spoke with told us, "The home is good at reporting any concerns to us."