

Lancashire County Council

Cravenside Home for Older People

Inspection report

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Date of inspection visit:
22 September 2020

Date of publication:
20 October 2020

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

Cravenside Home for Older People is a care home providing accommodation and personal care. It can accommodate 46 older people. The accommodation is provided over two floors. The home is divided into four areas known as, Rose Lane, Lily Lane, Poppy Lane and Daisy Lane. Some people using the service are living with dementia. At the time of the inspection 34 people were living at the home.

People's experience of using this service and what we found People told us they felt comfortable and safe living in the home. The registered manager and staff understood their responsibilities to raise concerns and report incidents or allegations of abuse. Systems were in place to ensure lessons were learnt from any incidents and the management team understood their responsibility to be open and honest when something went wrong.

There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The provider operated an appropriate recruitment procedure. Following the inspection, the procedures were further strengthened to ensure all relevant information was obtained prior to staff working in the home. People received their medicines safely and on time. Risk assessments were carried out to enable people to retain their independence and receive care with minimum risk to themselves or others. The home was clean in all areas seen and staff followed safe infection control practices.

The management team and staff had addressed the shortfalls found at the last inspection. The provider had systems to check the quality of the service and to monitor staff practice. People's views were sought about the service and acted on. People were involved in decisions about their care and support. The registered manager and staff worked with external professionals to ensure people received prompt and coordinated care.

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

Rating at last inspection

The rating at the last inspection was requires improvement (published 4 June 2019). Two breaches of the regulations were identified in respect to the cleanliness of the home and the quality assurance procedures. 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

This inspection was carried out to follow up on the previous breaches of the regulations. We therefore undertook a focused inspection to review the key questions of safe and well-led only.

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 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 Cravenside Home for Older People 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 reinspection 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 home was well-led.

Details are in our well-led findings below.

Cravenside Home for Older People

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 one inspector.

Service and service type

Cravenside Home for Older People is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (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

This inspection was announced. We gave 24 hours' notice of the inspection due to restrictions in place during the COVID pandemic.

During the inspection

We spoke with four people who lived in the home, three care staff, the activities care assistant, a service officer, a housekeeper and the registered manager.

We carried out a tour of the premises with the registered manager and reviewed a range of records. This included three people's care records and two people's 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 were reviewed.

After the inspection

We spoke with three relatives over the telephone and continued to seek clarification from the provider to confirm evidence found. We looked at records sent to us before and after the inspection.

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.

Preventing and controlling infection

At the last inspection, the provider failed to ensure the cleanliness of the premises. This was a breach of regulation 15 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 15.

- Since the last inspection, the communal areas of the home had been refurbished and redecorated. People spoken with told us, the service was kept clean and they were satisfied with their bedrooms and living areas.
- From inspecting the infection prevention and control arrangements in the home, we were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager and staff assessed and managed risks to people's health, safety and wellbeing. People's care records included guidance for staff about how to provide their care in a safe way. We noted one person's risk assessment was reviewed following the inspection to fully reflect their current level of risk.
- The provider completed regular checks to ensure the safety of the premises. Equipment used was regularly serviced. The registered manager sent us evidence of the checks following the inspection.
- The registered manager had developed systems to learn lessons and improve the service when things went wrong. We saw there were appropriate forms to record any accidents and incidents. The registered manager had carried out investigations as necessary following any incidents to make sure any action taken was effective.
- The registered manager carried out a monthly analysis of accidents and incidents to identify any patterns or trends. All accidents and any lessons learned were discussed at management and staff meetings.

Staffing and recruitment

- People told us there was usually sufficient staff on duty. One person said, "The staff fully understand my

needs and are always there to help me" and another person commented, "The staff are always busy, but if I ask for help, they come reasonably quickly".

- The registered manager completed a dependency assessment each week to monitor the staffing levels and had access to some flexible staff hours. We observed there were enough staff on duty during the inspection.
- We looked at two new staff members' files during the inspection and whilst they had provided a list of their previous work positions, they had not included the dates of employment. This information is important to check for gaps in employment. The registered manager obtained this information and assured us the recruitment procedures would be strengthened.

Using medicines safely

- Medicines were stored and managed safely. Staff were suitably trained to administer medicines and checks on their practice had been carried out.
- The staff maintained appropriate records for the receipt, administration and disposal of medicines. Whilst, protocols had been developed for the administration of medicines prescribed 'as necessary', not all the protocols were available in people's current files. The registered manager addressed this issue following the inspection.

Systems and processes to safeguard people from the risk of abuse

- The provider ensured people were protected from the risk of abuse. Staff had access to appropriate policies and procedures and training and understood how to raise any concerns about poor practice.
- The registered manager and staff were clear about when to report incidents and safeguarding concerns. Staff were confident the registered manager would act quickly to keep people safe if they reported any issues. Relatives had no concerns about their family members safety. One relative told us, "I can't speak highly enough of the standards of care" and another relative commented, "They have all been extremely helpful and caring."

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 requires improvement. 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 high-quality, person-centred care.

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, the provider failed to ensure the quality assurance systems and processes were effective. 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 registered manager and staff had a clear understanding of their roles and contributions to service delivery. Staff morale was good, and they felt valued and supported. One staff member told us, "I really enjoy working in the home, it has a lovely atmosphere, and everyone gets on well together."
- The management team carried out a number of audits and checks covering all aspects of the service. We saw action plans were drawn up to address any shortfalls.
- People, relatives and staff spoke positively about the way the service was managed and the registered manager's leadership style. One relative told us, "The manager is accommodating, and the home is run efficiently" and a member of staff commented, "The manager is very friendly and helpful. She takes time to get to know the staff and residents."
- The registered manager was supported by the senior operations manager, who visited the home at least once a week and carried out a detailed audit of the home every three months. We saw the registered manager was working to an action plan devised following the senior manager's audit.
- The registered manager utilised meetings with staff, both on an individual and group basis, to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns within the meetings, and the registered manager was open to feedback.

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

- The registered manager and staff were focussed and committed to delivering a person-centred service which achieved positive outcomes for people. They were knowledgeable about people's needs and preferences. Staff were attentive and we observed positive interactions between staff and people living in the home.

- The registered manager and staff respected people's rights and encouraged people to make choices and decisions about their care and support. Risks to people's health and well-being were assessed and kept under review; care records reflected people's choices and preferences.
- The registered manager and provider understood the duty of candour and their responsibility to be open and honest when something went wrong. Staff said the registered manager was approachable; they were confident the registered manager would take appropriate action to respond to any concerns.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People told us they were happy living in the home. One person said, "It's a very good home. I feel happy and contented" and another person commented, "I'm very pleased with everything. I feel lucky there was a place for me."
- Staff involved and engaged people in the life of the home and considered their equality characteristics. People were encouraged to express their opinions through different forums to ensure their views were heard. One person told us, "I don't feel like a nobody here. I am somebody and I count."
- The provider invited people and staff to complete a satisfaction survey. We looked at the results of the surveys and noted people and staff were satisfied with the service. People were also given the opportunity to attend residents' meetings. The minutes were displayed around the home and written in the "You said, we did" format.
- The registered manager and staff worked in partnership with other agencies including commissioning teams and health and social care professionals. This enabled effective, coordinated care and support for people.