

Rockley Dene Homes Limited

Carlton Court Care Home

Inspection report

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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

Carlton Court Care Home is a residential care home providing personal and nursing care to up to 85 people. The service provides support to older people, people living with dementia and younger adults. At the time of our inspection there were 68 people using the service.

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

People told us they felt safe. Staff received training in safeguarding people from abuse. Staff demonstrated that they understood the signs of abuse and how to report any concerns in line with the provider's policy.

People's medicines were managed and administered in a safe way by staff who had been trained to carry out the task. There were sufficient staff deployed to meet people's needs in a timely manner.

Risk assessments were in place and reviewed regularly to minimise the potential risk of harm to people during the delivery of their care. People's care records were reviewed and any changes to people's care and support needs had been recorded.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The environment was safe, clean and hygienic. Suitable checks were made on the premises and equipment to ensure they were safe.

There was a clear management structure and staff told us they felt supported and valued. The management team had developed good working relationships with professionals which had positive outcomes for people.

The registered manager and senior management team had implemented several audits and checks to monitor the overall quality of care people received. Issues identified during audits were linked into an evolving action plan which was reviewed and updated regularly.

The provider worked closely with the local authority to continuously implement and sustain improvements.

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 good (published 01 August 2018).

At our last inspection we made a recommendation around medicines management. At this inspection we found the provider had acted on the recommendation and they had made improvements.

Why we inspected

We received information of concern in relation to staffing levels, poor care and management failing to take concerns seriously. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained the same. We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

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.

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

Follow up

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?

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.

Carlton Court 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 Health and Social Care Act 2008.

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 1 inspector, 1 specialist advisor and 1 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 care service.

Service and service type

Carlton Court Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Carlton Court Care Home is a care home with 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

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

During the inspection, we spoke to 4 people, 5 relatives, 5 care staff, a well-being lead, 1 housekeeping staff, the registered manager, the clinical lead, the hotel services manager, a quality and compliance director, the operations director/ nominated individual and the development manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed 6 people's care records which included care plans, risk assessments and medicines records. We reviewed 5 staff recruitment records and other documents related to the running of the service which included staff rotas, audits, surveys, meetings and quality assurance records.

We requested additional evidence to be sent to us after our inspection. This was received and the information was used as part of our inspection.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risk's associated with people's health and social care needs had been assessed and recorded within their care plans to keep people safe and free from harm.
- Assessed risks included; falls, skin integrity, specific health conditions such as epilepsy and diabetes, behaviours that challenge and moving and handling. Clear guidance was available to staff on how to support people with their identified risk safely.
- We noted improvements in recording related to repositioning charts and food and fluids intake. This meant it was always possible to see if people had received the support they needed to minimise risks.
- Staff told us risks to people and changes in their needs were discussed daily at handovers to ensure all staff were aware of any changes and updates.
- Personal emergency evacuation plans in place outlined people's specific support needs in an emergency and how they were required to be supported.
- Audits and checks of the environment were completed as part of the provider's on-going quality assurance processes. Records showed appropriate checks and tests of equipment and systems such as fire alarms, emergency lighting, gas and electrical safety, legionella, lifts and hoisting equipment were undertaken.

Using medicines safely

At the last inspection we recommended the provider refer to NICE guidance on administering medicines and review their own policy to establish safer systems for planning, risk assessing and documenting administration of medicines. At this inspection we found the provider had made improvements.

- People received their medicines safely and as prescribed.
- Medicines were stored securely. Medicine administration records were complete and there were no omissions. Medicine stocks that we checked corresponded with records of stock levels.
- Where people received medicines as and when required (PRN), protocols and guidance was in place on how and when to administer these medicines. PRN medicines can be administered to help with pain relief or anxiety.
- Where people had been prescribed high risk medicines, we saw relevant risk assessments that had been completed to ensure all related risks were managed safely.
- Where people received their medicines covertly, the service had followed its policy and procedures and ensured multi-disciplinary discussions had taken place. These discussions were clearly documented, and record of consent was available to evidence that these decisions had been made in the person's best interest.

- A relative told us, "I have no concerns with medicines. I get a phone call if she refuses to take them."

Systems and processes to safeguard people from the risk of abuse

- There were effective systems in place to protect people from abuse and avoidable harm.
- Policies and procedures were in place for whistleblowing and safeguarding adults from abuse.
- Relatives of people who used the service told us they felt the service was safe. Feedback from relatives included, "I feel my wife is very safe and secure", "Yes, I feel my friend is safe here" and "Yes, it's very safe. Otherwise I wouldn't leave her here."
- Safeguarding concerns had been escalated appropriately and action taken to keep people safe when required.
- Staff undertook training in how to recognise and report abuse. Staff told us they would have no hesitation in reporting any concerns to the registered manager or appropriate authorities and were confident that action would be taken to protect people.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- People were protected from the employment of unsuitable staff. This meant pre-employment checks were done, which included references from previous employers and Disclosure and Barring Service (DBS) checks completed. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff available to ensure the safety of people.
- Staff we spoke with confirmed that staffing levels was good, and that the management focus was to ensure staff were always available to monitor people and their safety.
- The service implemented a 'stop the clock' principle around lunch time whereby staff from all departments helped with lunch service, which reduced any pressure from the care staff.

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 supporting people living at the service to minimise 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 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.

Visiting in care homes

- Processes were in place to facilitate safe visiting at the service. Relatives we spoke with confirmed they were able to visit their loved ones whenever they wanted.

Learning lessons when things go wrong

- There were systems in place to ensure lessons were learned when things went wrong.
- Accidents and incidents were recorded, investigated and analysed to ensure lessons were learnt to prevent any further reoccurrences.
- Records showed detail of actions taken, further investigation where required and any follow up actions to ensure people's safety.

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 our last inspection we rated this key question good. At this inspection the rating has remained 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; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager understood their role and responsibilities and how to monitor and evaluate quality of the service. Staff we spoke with demonstrated a good understanding of their roles.
- The provider submitted notifications of significant events occurring within the service, as required.
- The registered manager and their team completed daily walk arounds and spot checks to observe staff practice and speak with people using the service. Any ongoing risks were mitigated because the registered manager was proactive in their approach and practice.
- Several audits and checks were in place which enabled the provider and registered manager to monitor the quality care people received. These audits and checks covered health and safety, medicines management, infection control, care plans and the environment. Where issues were identified, these were incorporated into the appropriate action plan and addressed within a set timeframe.
- Staff told us the registered manager had an open-door policy and was available to support them at any time. The staff we spoke with told us morale was good amongst the staff and the stable leadership from the registered manager was a contributing factor to this.
- Staff told us they found the registered manager and senior management team supportive and helpful. They said, "Managers are flexible, caring and supportive", "We get very good support from the management team. There are a lot of benefits for staff, for example, staff awards, vouchers and staff meals" and "Senior managers are visible and approachable. It is a very nice and rewarding place to work. I would definitely recommend the home as a very good employer."
- People and relatives spoke positively about the service and the care and support their loved ones received. Everyone told us that they could contact the service if there were any concerns and would receive a response. Feedback received included, "I would feel happy approaching anyone here", "The manager has been very helpful" and "I talk to the nurse on the front desk, I find them very nice" and "The manager is always available. They make us feel welcome."
- Staff knew people well and demonstrated a good understanding of how individual people were to be supported. A relative told us, "We consider ourselves fortunate that she's here. She's well looked after."
- The service supported people from different religious faiths and cultures, and this was reflected in their care plans. Staff demonstrated an understanding and awareness of people's diverse needs and ensuring equality regardless of their gender, sexual orientation, race and religion.

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 provider and registered manager understood the duty of candour and their legal responsibilities to inform people and agencies when concerns are raised or when something has gone wrong.
- Relatives told us that people were well cared for and they were involved in decisions to do with people's care. We saw evidence of regular communication with people and their relatives.
- The registered manager was open and honest with the inspection team and took immediate action when minor issues were highlighted during the inspection.

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

- There were formal systems in place to ensure the service sought the views of people through regular reviews, meetings and frequent surveys. The latest satisfaction survey resulted in overall positive feedback and where improvements were identified a clear action plan was developed.
- The service communicated with people and their families on a regular basis through phone calls, video calls and newsletters which provided information on relevant events and activities.
- Staff had been supported to take on lead roles, called 'champions', in specific areas such as care and clinical, health and safety and end of life. Staff used this specialised knowledge to share learning and good practice with the rest of the staff team.
- Clear records were kept of multi-disciplinary team meetings with health and social care professionals. Actions were clearly detailed and documented when actioned, for example, making referrals to other agencies.
- A health care professional commented, "The staff we have worked with and trained have been exemplary and fully engaged in launching this service during the most challenging of times. This has meant taking part in remote digital training, along with face-to-face training whilst following the strictest of guidelines to always ensure the absolute safety of the residents."