

Thorpe Wood Care Homes Limited

Thorpe Wood 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

Thorpe Wood Care Home is a care home providing personal and nursing care to 45 people aged 65 and over at the time of the inspection.

Thorpe Wood Care Home can accommodate up to 50 people across four separate households, each of which has separate adapted facilities. One of the households specialises in providing nursing care to people who require this level of support. Relatives told us that the staff took actions to keep their family members safe.

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

The registered manager and staff had taken actions to ensure that people were protected from the risk of abuse. Relatives of people living at Thorpe Wood told us that the staff had taken action to keep their relative safe.

The procedures for the administration and recording of medication had not always been followed. It was not always possible to compare the records with the amount of medication in stock to ensure they had been administered as prescribed. These areas for improvements had also been identified by the providers Quality and Governance Manager and the appropriate action was being taken. Staff completed training and annual competency checks in the administration of medication.

Risk assessments were in place so that staff knew what action to take to reduce risks to people. Recruitment checks had been completed to ensure the right people were employed. Infection prevention and control measures were in place to reduce the risks of infections being spread through the home. Extra cleaning and precautions had been taken in response to the Covid-19 pandemic. Staff were wearing appropriate personal protective equipment (PPE) and having regular Covid-19 tests.

Staff and relatives of people living at Thorpe Wood all told us that the registered manager was approachable and supportive. There were governance systems in place to identify areas for improvement. Learning from incidents and accidents were shared with staff and action taken to prevent a reoccurrence when possible. Action had been taken to provide ways that people could still have regular contact with their families during the Covid-19 pandemic whilst there were restrictions on relatives visiting 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

The last rating for this service was Good (December 2019).

Why we inspected

We received concerns in relation to protecting people from abuse. As a result, we 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 found no evidence during this inspection that people were at risk of harm from this concern. However, the relevant agencies must be notified in a timely manner of any allegations of abuse so that they can decide what the next steps should be. Please see the safe sections of this full report.

Soon after the inspection the registered manager reported an allegation of abuse in a timely manner to the relevant agencies.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Thorpe Wood 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.

Inspection team

One inspector and one inspection manager carried out the inspection.

Service and service type

Thorpe Wood 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

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. 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 three relatives about their experience of the care provided. We spoke with six members of

staff including the nominated individual, registered manager, quality and governance manager, senior care workers and care workers. (The nominated individual is responsible for supervising the management of the service on behalf of the provider.)

We reviewed a range of records. This included two people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed. We also observed care being delivered.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm. Systems and processes to safeguard people from the risk of abuse

Using medicines safely

- Policies and procedure were in place to ensure the safe administration of medication, however these were not always being followed. The records showed that staff had not always followed the correct procedure when applying medication administered via patches.
- It was not possible to check if all medication had been administered as prescribed. We were able to check if the records reflected the amount in stock for two medications recently started. One was correct, however for the other one there was one more tablet in stock than there should have been according to the records.
- The quality and governance manager stated that they had identified the same issues during a recent audit and would be taking the appropriate action.
- Staff completed training and competency assessments to ensure they were competent to administer medication.

- Procedures for dealing with allegations of abuse had been followed to ensure people were protected.
- Staff knew how to recognise abuse and reduce the risk of people suffering abuse. Staff had received training and had a good understanding of the providers safeguarding systems and procedures
- Relatives of people living in the home told us that the staff helped people to feel safe. One relative explained that their family member had always worried about safety at night, so staff had taken action to ensure the person felt safe and secure and still able to access their bedroom when needed.

Assessing risk, safety monitoring and management

- Processes were in place to protect people from avoidable harm. Risk assessments were completed to identify risks to people's health and safety, such as their risk of falls.
- Records of incidents and accidents showed that when needed, referrals to other healthcare professionals were sent to support people to stay safe.
- Staff confirmed that they followed the guidance in risk assessments, so that where possible, risks to people were reduced.

Staffing and recruitment

- There were enough staff with relevant skills and there was also capacity to cover unplanned staff absences. Staff told us that there was enough staff on shift to meet people's needs in a timely manner.
- Safe recruitment practices were being followed to ensure the right people were employed. Staff confirmed

that they had completed pre recruitment checks and a thorough induction.

Preventing and controlling infection

- 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's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider had a system in place to monitor incidents and accidents. There was an analysis of the information to identify any patterns or trends. The registered manager took action when incidents occurred to minimise the risk of them happening again.
- Learning from events was shared with staff during supervisions and team meetings.

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 Good. At this inspection this key question has now remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager was passionate about providing a service that was based on people's individual needs. This was confirmed by what people's relatives told us about the home. One relative told us, "If I have any concerns I can talk to [the registered manager] but they are all brilliant. They are really lovely people."
- Staff told us that they felt supported and that the registered manager was approachable. The registered manager told us that they spent time in all areas of the home and often worked in different roles within the home if there were unplanned staff absence. This meant that they were aware of the day-to day culture within the home.

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

- The registered manager was clear about their responsibilities for reporting to the CQC and the regulatory requirements. We discussed with the registered manager the importance of ensuring the safeguarding team are notified as soon as possible of any incidents so that they can decide what the next steps should be considered. Risks were clearly identified and escalated where necessary.
- The provider's updated Safeguarding policy made it clear about who should be notified when something goes wrong. The registered manager stated, "The safeguarding policy is being rolled out as a new system is in place for all policies and procedures."
- Systems were in place to assess and monitor the quality and safety of the service provided to people, with provider oversight. Audits were completed on care and medicines records. Information from audits and records had been used to identify areas for improvement. For example, the registered manager told us that further training was going to be provided to staff to ensure they knew what action to take when people were showing signs of distressed behaviour. A new Quality and Compliance Manager was in post since the previous inspection and they were supporting the registered manager with their action plans for improvements.

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

- Relatives of people living at Thorpe Wood told us that even through the pandemic they had felt that the staff had kept them up to date about family members welfare. They had been able to video call their loved

ones and talk to them regularly.

- One relative told us that because of the Covid-19 pandemic on the day their family member had moved in to Thorpe Wood, they had to leave them at the front door. This was because the home was following guidance and not able to open to visitors. They stated that the care staff had welcomed their family member and as soon as they went into their bedroom, they had video called their relative so they could see their room and their relative being settled in. They told us that although this was a very emotional time the staff had helped to make it easier for all involved.

- The service worked in partnership with social workers and other health care professionals and relatives to ensure people were getting the care they needed. The registered manager told us that the home had an excellent relationship with their General Practitioner (GP) who had given them support through the pandemic.

- Information from analysis of incidents and accidents, feedback from people and their relatives and health and social care professionals and complaints were used to continually improve the service being offered. Minutes of health and safety meetings showed that action had been taken to ensure that staffing levels had been increased to meet people's needs.