

Crown Care IV Limited

# Buckingham Care Home

## 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 effective?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Buckingham Care Home is a residential 'care home' providing personal and nursing care to 44 people aged 65 and over at the time of the inspection. The service can support up to 72 people over four different wings. One of the wings specialises in providing care to people living with dementia.

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

Improvements had been made following the previous inspection. Risk assessments and care plans detailed what care and support was needed to reduce risk to people. There were enough staff to take care of people. Medicines were managed safely. We also assessed and were assured with infection control procedures within the home. We were assured that appropriate systems were in place to help keep people safe.

People were happy with the food available to Buckingham Care Home and they were encouraged to drink enough. There were appropriate risk assessments and care plans in place for nutrition and hydration and people's nutritional intake was recorded and monitored.

The provider and manager and senior staff regularly completed a range of checks and audits to assess the quality and safety of the service. The manager used the results of these audits to make improvements to the service. People spoke highly of the home's management team, commenting they were approachable and supportive. The manager understood the regulatory requirements. People told us they thought the service was well-led.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published August 2019) and there was a breach 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 targeted inspection to check whether the Requirement Notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Requirement Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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 Buckingham Care Home on our website at [www.cqc.org.uk](http://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?**

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 we had specific concerns about.

**Inspected but not rated**

### **Is the service effective?**

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 we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

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 we had specific concerns about.

**Inspected but not rated**

# Buckingham Care Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Requirement Notice in relation to 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 team consisted of two inspectors.

#### Service and service type

Buckingham 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 who was in the process of registering 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 the service 24 hours' notice of the inspection. This was because we have changed the way we inspect due to Covid-19 and needed to check with the registered manager what information we could review electronically and what we would need to look at on site.

Inspection activities started on the 12 October 2020 and ended on the 21 October 2020. We visited the care home on the 13 October 2020.

#### 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, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 this information to plan our inspection.

During the inspection-

We spoke with five people who used the service. We spoke with the regional manager, manager and deputy manager. We reviewed a range of records. This included four people's care records and multiple medication records and other health related monitoring forms. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We spoke with 5 staff members which included senior care staff, care staff and the cook. We received feedback from two relatives.

The manager sent various documents electronically to review. We continued to seek clarification from the manager 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 requires 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 requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- Risks to people's safety and welfare were assessed.
- People's care files included appropriate assessment of risk, which had been conducted in relation to their support needs. Risk assessments covered areas such as the home environment, mobility, personal care, medicines, equipment and manual handling.
- Care plans provided instructions to staff to reduce the likelihood of harm to people when being supported.

Using medicines safely

- Medicines were managed safely.
- There was a system in place to support staff to know when creams, gels and eye ointments were opened.
- Staff received face to face and practical training in the safe management of medicines. The staff had their competency checked annually. Records showed staff were up to date with medicines training.

Staffing and recruitment

- There were enough staff to ensure people received safe care.
- Both relatives and staff told us they did not feel that there were always enough staff on duty. We spoke to the manager about staff levels. We checked rotas and they reflected staffing levels explained to us. We could see where staffing numbers had been increased when occupancy increased. We were assured with staffing levels.

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 could be effectively prevented or

managed.

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



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Supporting people to eat and drink enough to maintain a balanced diet

At our last inspection the provider had failed to maintain accurate, complete and contemporaneous records for people. 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.

- People's nutritional and hydration needs were recorded. The chef demonstrated a good knowledge of people's needs and was able to explain how these needs were met. All the people we spoke with were happy with the food available. One person said, "Nice meals - they ask us what we want for our next meal".
- Weight management was effective, and weight records were reviewed on a monthly basis.
- Charts demonstrate that people had received fortified drinks and fortified snacks where required.
- The chef spoke with the unit managers daily to identify any changes in people's requirements. The chef explained to us how he had recently obtained people's views about the menu and times of meals. He had used this information to add more variety to the menu and change meal times to meet people's requirements.
- We observed people being offered a choice at meal times, and there was a good selection of food options available for people. However, if they decided they would like something different this was catered for.

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

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to monitor the quality of the service. 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 embedded the quality assurance systems to monitor the service. These had been effective in identifying areas for improvement. When issues had been identified, these were added to an action plan and action had been taken to make improvements.
- There was a manager in post who provided leadership and support. We found the management team were committed to making a difference to the lives of people living at the service.
- People who used the service received good quality person-centred care. Details of key life events were documented in people's support plans. This ensured staff knew about what was important to people
- The manager understood which incidents and events must be reported to CQC. We were satisfied they had notified CQC of all relevant incidents prior to this inspection.