

Meridian Healthcare Limited

White Rose House

Inspection report

165 Huddersfield Road
Thongsbridge
Holmfirth
West Yorkshire
HD9 3TQ

Tel: 01484690100

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11 August 2021

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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

White Rose House is a residential care home, registered with the Care Quality Commission (CQC) to accommodate a maximum of 64 people. At the time of this inspection, 32 people used the service, some of whom lived with a diagnosis of dementia.

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

There were sufficient numbers of staff to meet people's needs, but there was a reliance on the use of agency staff to ensure safe staffing levels were maintained. The provider had been proactive in seeking to address the staffing issues with a number of strategies put in place.

People were protected from the risk of acquiring infections. Personal protective equipment (PPE) was readily available to staff and all staff were following the latest guidance for the prevention and control of infection.

People had oral health care plans which were reviewed on a regular basis but we did not always see evidence of staff documenting that visual checks had been completed. Access to a dentist was mostly reactive rather than proactive. We have made a recommendation to the provider about this in the full report.

The lunchtime service was calm, relaxed and overall a pleasant experience. People's individual preferences were readily accommodated with plenty of menu choices available.

The registered manager had a good understanding of their role and responsibilities. The provider had good oversight of issues within the home and improvement plans were robust. Throughout the inspection visit, staff were open, honest, transparent and engaging.

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 11 November 2019).

Why we inspected

The CQC have introduced targeted inspections 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 undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in response to concerns received about staffing levels and leadership

and management. A decision was made for us to inspect and examine those risks. Whilst no concerns were raised with us about access to food and drink at mealtimes, we observed mealtime service to be a positive experience and therefore worthy of reporting on.

We also looked at infection prevention and control measures under the Safe key question. We look at this in all 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.

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 good. 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 good. 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

White Rose House

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on specific concerns we had about staffing levels, oral healthcare, and leadership & management.

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 two inspectors and an oral health inspector.

Service and service type

White Rose House 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

Prior to the inspection visit, we liaised with the local authority to help inform our inspection. We reviewed information held on the provider, for example, notifications sent to us by the provider. We reviewed information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We reviewed a variety of records related to the quality and safety of the service. This included safeguarding records, risk assessments, care plans, staffing rotas, policies, procedures, and quality audits.

We spoke with five people who used the service and 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 spoke with seven members of staff including the registered manager, the area director, a peripatetic manager and support workers.

After the inspection

We continued to analyse the information gathered during the inspection. We also asked for additional information related to safeguarding and governance.

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. 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.

Staffing and recruitment

- There were sufficient numbers of staff deployed to meet people's needs. However, due to challenges around recruitment and retention of staff, there was a dependency on the use of agency staff to ensure care was delivered safely.
- The provider had been proactive when address the staffing issues and a number of strategies had been put in place. This included a voluntary suspension on new admissions into the home, and a recruitment strategy which had attracted a number of new staff who were awaiting start dates at the time of this inspection. Comments from staff included, "I have raised issues in the past about staffing levels. It was originally two staff on the top floor, but this has now been increased, which is much better. The home just needs to keep hold of the staff now."
- We were satisfied the provider was doing everything possible to address workforce issues, including increasing the hourly rate for care workers, retaining agency staff on a permanent basis and moving experienced staff over from the provider's other services to ensure consistency in the home.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider has effective systems in place for admitting people safely to the service.
- We were assured the provider was using Personal Protective Equipment 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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 good. 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.

Supporting people to live healthier lives, access healthcare services and support

- Concerns had been raised with us about the quality of oral healthcare within the home. The majority of care records we reviewed demonstrated people had an oral health care plan in place that were reviewed on a monthly basis. However, we did not always see documentary evidence that staff had completed visual checks of people's mouths and teeth.
- Referrals and appointments with a dentist were reactionary rather than preventative. Better working relationships needed to be established with local dental services. We found no evidence during this inspection that people had been harmed as a result of these concerns.

We recommend the provider reviews national guidance in respect of oral health for adults in care homes.

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

- Staff worked hard to ensure people enjoyed their mealtime experience. The atmosphere was calm and relaxing, personal preferences were readily accommodated and a variety of menu choices were on offer.
- For those people who required additional support from staff, this was provided in a timely manner with independence being prompted wherever possible.

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 had specific concerns about.

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

- The registered manager was relatively new in post, but having been promoted from deputy manager, they had a good understanding of their role and responsibilities.
- Systems for audit, quality assurance and questioning of practice were operated effectively. The provider had good oversight of current challenges with robust improvement plans in place.
- The wider staff team had a good understanding of their individual and collective responsibilities, but we were told there was also a sense of frustration at not being able to achieve more. Comments from staff included, "We're working hard to care and meet their needs, but the lack of consistent permanent staff means we can only do so much. We'd really like to have the time to do all the extra 'nice to do' things."

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

- The registered manager acknowledged there had been some historical issues within the service primarily centred around ensuring a consistent positive culture amongst some staff and maintaining quality standards. However, we were satisfied the registered manager and wider leadership team were working proactively in addressing these issues. We found no evidence of wider systemic issues within the service.
- We observed staff to be caring and compassionate who knew people well. Staff were supportive, provided positive encouragement and treated people with dignity and respect.