

Mrs Mary Rebekah O'Connor

Darley Dale Care Home

Inspection report

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Date of inspection visit:
22 July 2021

Date of publication:
11 August 2021

Ratings

Overall rating for this service

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Darley Dale is a residential care home providing personal care to 2 people aged 65 and over at the time of the inspection. The service can support up to 13 people in one adapted building

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

We found improvements to how people's care plans and risk assessments were reviewed and recorded to ensure they reflected people's needs.

Improvements had been made to how the registered manager monitored the quality of the service.

The registered manager was aware of which incidents must be reported to CQC when these occurred.

Regular checks were made to ensure the environment of the care home was safe and maintained.

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

Rating at last inspection and update

The last rating for this service was Requires improvement (published 11 March 2020) and there were breaches 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

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

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 responsive?

Good ●

The service was responsive.

Details are in our responsive findings below

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Darley Dale 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

This inspection was carried out by one inspector.

Service and service type

Darley Dale Care Home 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 inspection

We reviewed information we had received about the service since the last inspection including the provider's action plan for breaches of regulation. We sought feedback from the local authority. We used all of this information to plan our inspection.

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.

During the inspection

People at the service were unable to speak with us. We reviewed a range of records. This included two people's care records. A variety of records relating to the management of the service, including audits were reviewed. We spoke with the registered manager and the deputy manager.

After the inspection

We reviewed the evidence obtained during the inspection visit.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

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's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- At our previous inspection in December 2019 we found one person did not have a care plan for their personal needs to support pressure ulcer healing. Accurate records of the care provided to one person had not always been kept.
- At this inspection we found there had been no changes to people's needs or risks since our previous inspection. Care plans and risk assessments reflected people's current needs and reviews had been recorded on a regular monthly basis.
- Daily records had been maintained of the care provided to one person to manage a pressure sore.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff were aware of people's individual communication needs and how to support people to express their wishes and be involved in their care. For one person, staff used simple short sentences to aid their understanding.
- The registered manager was aware of the AIS and information about this had been posted on the care home's notice board.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Due to low occupancy levels, Staff spent time with people on a one to one basis as opposed to organised group activities.

Improving care quality in response to complaints or concerns

- We spoke with the registered manager who told us they had not received any complaints about the service. We saw a system was in place to deal with complaints appropriately if needed.
- Previous complaints received from representatives of people using the service had received appropriate written responses with any areas for improvement noted.
- The registered manager gathered feedback from people and their representatives about their care and support on a daily basis or through meetings with visitors.

End of life care and support

- At the time of our inspection no-one was receiving end of life care.
- End of life care had previously been provided to people in partnership with health care professionals.

Positive comments had been received from the relative of a person who had spent their final days at Darley Dale Care Home.

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 previous inspections we found the quality assurance systems used to monitor the service had failed to identify one person did not have a care plan for their personal needs to support pressure ulcer healing. Accurate records of the care provided to one person had not always been kept. This was a breach of regulation 17 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 had followed their action plan and had monitored the quality of the service provided. This included checks on the safety of the environment and regular reviews of people's care needs.
- Building work was underway during our inspection visit to improve the roof of the care home after a leak was discovered.
- Recent inspections by fire safety and food hygiene organisations confirmed the service was operating safely and as expected in these areas. We spoke with the local authority and they had no concerns about Darley Dale Care Home.

At our previous inspections in December 2019, we found notifications relating to a serious injury to a person and an allegation of abuse had not been submitted to us as legally required. This was a breach of regulation 18 of the Care Quality Commission (Registration) Regulations 2009.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- The registered manager had followed their action plan and were confident they knew which incidents required notification to CQC and where to find information relating to notifications.
- We checked and found no incidents had occurred which required notification to CQC since our previous comprehensive inspection in December 2019.
- The registered manager was waiting for the outcome of a Deprivation of Liberty Safeguards application before they made a notification to us about the decision made.

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 was aware of the duty of candour responsibility to be open and honest with people and their family when something had gone wrong. The duty of candour is a regulatory duty that relates to openness and transparency and requires providers of health and social care services to notify patients (or other relevant persons) of 'certain notifiable safety incidents' and provide reasonable support to that person.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager and deputy manager were visible and accessible to people using the service, staff and visitors which gave them the opportunity to receive feedback about the quality of care being delivered.
- Surveys of the views of people using the service and their representatives had been carried out in the past. This had not been carried out recently due to the low occupancy numbers. The managers explained how they would rely on conversations to check the views of people and their relatives about the service provided.