

Holsworthy Health Care Limited

# Deer Park Care Home

## Inspection report

Rydon Road  
Holsworthy  
Devon  
EX22 6HZ

Tel: 01409254444

Website: [www.deerparknursinghome.co.uk](http://www.deerparknursinghome.co.uk)

Date of inspection visit:  
22 June 2021

Date of publication:  
03 February 2023

## Ratings

Overall rating for this service

Inadequate ●

Is the service safe?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Deer Park Care Home is a residential care home providing care and support to people aged 65 and over. The service can support up to 56 people in a purpose-built building which has two floors. On the upper floor, there is a unit to provide care for people living with dementia. Access to upper floors is by a lift. At the time of the inspection there were 31 people living at the home.

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

People's medicines were not managed safely. Arrangements were not in place to store medicines in accordance with manufacturers' directions. There were not safe arrangements to monitor the expiry dates of medicines.

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 Inadequate (published 9 February 2021).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection not enough improvement had been made and the provider was still in breach of regulations.

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 12 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 Inadequate.

CQC have introduced targeted inspections to follow up on Warning 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.

### Follow up

We have met with the provider following this inspection to discuss how they will make changes to ensure they improve their rating to at least good. We will 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 Inadequate 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

# Deer Park 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 Warning Notice in relation to Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Inspection team

The inspection team consisted of a member of the CQC medicines team.

#### Service and service type

Deer Park 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 did not have a manager registered with the Care Quality Commission. This means that the provider is 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.

#### During the inspection

We spoke with one member of staff. We looked at the storage arrangements for medicines, the medicines policy and medicines audits. We looked at the medicine administration records and associated care documents for 14 people.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service.



# Is the service safe?

## Our findings

At the last inspection this key question was rated as Inadequate. 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 warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

### Using medicines safely

- The service had a current medicines policy. However, this did not always contain enough information for staff to follow to keep medicines safely. The policy not the temperature recording sheets for the medicines fridges specified the temperature range that needed to be maintained. We saw that the fridge had been recorded outside the temperature range specified by the manufacturers and no remedial action had been recorded.
- Within the medicines trolleys on both floors we found medicines that were still in use beyond the manufacturer advised expiry date. This had the potential to cause harm to the services users being given these medicines as they may no longer work in the manner expected.
- We saw pain relief patch monitoring had improved and that for most service users with these patches that the application and removal was now documented. We also saw that there were daily checks to confirm that the patch remained in situation.
- We saw records for the administration of oral and topical medicines were completed accurately and consistently.
- Staff were assessed to ensure they were competent in the safe administration of medicines.
- We saw medicines audits had been completed but that they had not identified the issues seen on this inspection.

This section is primarily information for the provider

## Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment  There was a failure to effectively mitigate risks to people which placed them at risk of harm.

**The enforcement action we took:**

The warning notice remained in place.