

Roseberry Care Centres (England) Ltd South Park Care Home

Inspection report

Gale Lane York YO24 3HX

Tel: 01904784198

Date of inspection visit: 28 October 2020

Good

Date of publication: 14 December 2020

Ratings

Overall rating for this service

Is the service safe?	Good	
Is the service well-led?	Good	

Summary of findings

Overall summary

About the service

South Park Care Home is a residential care home providing personal and nursing care to 42 people aged 65 and over at the time of the inspection. The service can support up to 80 people. It is separated into two units, one provides nursing care and the other specialises in providing care to people living with dementia.

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

We received mixed feedback from relatives about communication from the service. The registered manager and the provider had addressed this and implemented systems to ensure relatives felt communicated with.

People were happy living at the service and told us that staff were kind and caring. Risk to people was assessed and managed appropriately. People were safeguarded from the risk of abuse. Medicines were safely managed by staff. Regular audits were completed to monitor, maintain and improve medicines management.

Staff followed safe infection, prevention and control practices. The required Personal Protective Equipment (PPE) was available. Training had been delivered to ensure staff used PPE correctly to prevent the spread of infection and keep people safe.

Within the context of the Covid-19 infection risk, people were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported best practice.

The registered manager had invested time in empowering staff and creating an open and transparent service. Quality assurance systems in place monitored the service effectively and supported to drive improvements. Lessons learnt were used as learning opportunities to continuously develop the service.

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

Rating at last inspection

The last rating for this service under the previous provider was good (published 20 November 2019). The service was then inspected in July 2020 and not rated (published 01 September 2020).

Why we inspected

We received concerns in relation to the management of engagement at the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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

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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.

The overall rating for the service has not changed based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm. The provider has implemented additional systems to support the service to improve. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for South Park Care Home on our website at 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 reinspection 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good •



South Park Care Home

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.

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 was carried out by two inspectors.

Service and service type

South Park 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 announced. We gave a short notice period of the inspection due to the Covid-19 pandemic.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the local authority. We spoke with two people who used the service and 35 relatives about their experience of the care provided. We spoke with 29 members of staff including unit team managers, nurses, care workers and ancillary staff.

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

We spoke with the registered manager, area manager and a nurse. We reviewed a range of records including people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

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

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 on the 30 July 2020 we completed a targeted inspection. We did not change the rating of this key question, as we had only looked at the key question in part. On the 20 November 2019 we rated this key question as good. At this inspection the rating has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were managed safely. Records showed people received their medicines as prescribed.
- Staff worked effectively with other agencies to establish robust procedures for ordering and disposing of medicines.
- Staff responsible for supporting people with medications were appropriately trained. They received regular competency checks.
- The provider completed regular audits to ensure safe medicines management.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living at the service. One person told us "I like it here; the staff are good and look after me well."
- The provider worked in partnership with other agencies to ensure people's safety. Safeguarding systems and processes were effective.
- Staff received safeguarding training. They were aware of how to protect people from harm and abuse and confident to raise any concerns with the most appropriate person.

Assessing risk, safety monitoring and management

- Risks to people were assessed, recorded, managed and reviewed regularly.
- Daily safety huddles were completed by the senior staff. Discussions identified current risks at the service and how these would be mitigated.
- The registered manager worked with the maintenance team within the provider group to ensure action plans from health and safety audit were completed.
- Environmental safety checks were regularly carried out. Equipment was serviced and well maintained.

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 can be effectively prevented or managed.

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

Staffing and recruitment

• There were enough staff to support people and meet their needs. At the inspection we observed staff respond to people in a timely manner.

• Earlier in the year the provider had used a high number of agency staff due to staff sickness. However, there had been no further use of agency staff at the service since June 2020.

• Staff were recruited safely. Appropriate checks were completed prior to the commencement of employment.

Learning lessons when things go wrong

• Accidents and incidents were monitored and analysed. Themes and trends identified were used as learning opportunities to drive improvements at the service.

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 on the 30 July 2020 we completed a targeted inspection. We did not change the rating of this key question, as we had only looked at the key question in part. On the 20 November 2019 we rated this key question as good. At this inspection the rating has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, personcentred care.

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

- We received mixed feedback from relatives about communication from the service. Telephone systems did not support relatives to contact the service easily. Some relatives were frustrated about not having meaningful discussions when needed.
- Following the inspection, the provider installed additional phone lines and implemented additional systems to ensure relatives received regular meaningful contact and updates. The registered manager was in the process of contacting all relatives to provide them with up to date information regarding the management structure and new communication systems implemented.

We recommend that the provider monitors new communication systems implemented and reviews the effectiveness of these to ensure communication with relatives is embedded and maintained.

• Staff felt communication within the service was good and kept them up to date and fully involved in the running of the service.

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

- The registered manager worked collectively with all staff to demonstrate a positive culture and promote person-centred care and support for people.
- Staff were proud to work at the service. They felt supported by the management team and regular supervisions and meetings promoted staff development and improvements within the service. Comments from staff included "I felt really supported by the registered manager" and "As a manager, [name of manager] is amazing. They are supportive in every way shape and form."
- The provider and registered manager acted on feedback to improve the service for people.

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; Continuous learning and improving care

- The provider and registered manager were focused on continuous learning from incidents and shared lesson learnt with all staff. This ensured improvements were identified, actioned and sustained.
- In response to staff previously raising concerns outside the organisation, the provider had taken action to

enhance the opportunities for staff to feel confident in raising concerns. Staff we spoke to felt confident about doing this.

• The registered manager was reviewing their own engagement systems with relatives to receive regular feedback and to provide opportunities for future improvements.

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

- The registered manager was clear about their roles and responsibilities.
- Systems to manage quality within the service were completed on a regular basis. This enabled the service to collate information to show how the service was performing.
- The providers governance systems drove improvements in the quality of the service. Detailed action plans were completed to ensure the quality of the service was maintained.
- The registered manager had submitted notifications as required by duty of candour legislation.