

Primrose Court Health Care Limited

Primrose Court Care Home

Inspection report

241 Normanby Road Middlesbrough Cleveland TS6 6SX

Tel: 01642986424

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Primrose Court Care Home is a residential care home providing personal care to nine older people some who may be living with dementia at the time of the inspection. The service can support up to 20 people.

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

People and their relatives spoke positively about the caring, friendly nature of the service. There was a new manager in post, and we received positive feedback about the improvements made to the service. Regular checks ensured care plans were up to date and included information to provide safe, person centred support.

We were assured that people were supported safely with good infection control practices followed. The home was clean and tidy. Some areas were dated. The provider had commenced improvements to refresh the décor, including flooring and further works were planned.

People received their medicines safely as prescribed. Associated records were in place and completed by trained staff. The manager was looking into enhanced training in medicines to ensure staff remained up to date with best practice.

Systems and processes in place ensured people were safe from avoidable harm. A range of quality audits and checks were completed. Plans were in place to enhance these further to ensure required preventative actions were implemented to keep people safe.

Enough suitable staff were supported by the manger and all worked well as a team with other health professionals where additional support was required. The manager had strengthened links with the local authority and the clinical lead to help people live the best lives possible.

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 the service under the previous provider was Inadequate (published 16/10/2020) and there were multiple 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.

This service has been in Special Measures since the last inspection. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 12 August 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment, staffing, good governance and safeguarding people from abuse and improper treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Wellled which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from inadequate to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Primrose Court 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 •



Primrose Court 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.

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 completed by two inspectors.

Service and service type

Primrose Court 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.

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. We sought feedback from the local authority and professionals who work with the service. 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 of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with three members of staff and the manager and reviewed two care plans, daily care records, and records associated with the management of people's medicines and the home.

After the inspection

We continued to seek clarification from the provider 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 Inadequate. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider had failed to ensure an effective system was in place to protect people from the risk of abuse. This was a breach of regulation 13 (Safeguarding service users from abuse and improper treatment) 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 13.

- Staff had received training to keep people safe from abuse and understood how to report any concerns for further investigation.
- People and their relatives told us they felt staff helped to keep them safe. A relative said, "Mum is safe, she loves it there and gets on well with all the staff."

Staffing and recruitment

At our last inspection the provider had failed to ensure there were enough staff on duty to meet people's needs all of the time. This was a breach of regulation 18 (Staffing) 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 18.

- Enough staff were observed to be on duty to meet people's assessed needs and spend quality time with
- Staffing was reviewed as people's needs changed and contingency plans ensured there were enough suitably skilled staff on duty.
- People and their relatives provided very positive feedback about staff support. One person said, "I can talk to staff when I'm bad with my nerves, they listen to me. If anything is upsetting me, I know I can talk to staff. They are all nice."

Using medicines safely

At our last inspection the provider had failed to robustly assess the risks associated with people's medicines. 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.

- People received their medicines safely as prescribed. A health professional told us, "I have found the management of medicines to be safe with no major issues identified."
- Where medicines were administered for pain relief, records provided information to ensure people received these as and when required.
- Staff received training in medicines and observations on their practice to ensure they remained competent. The manager said, "I am reviewing medicines training to have it delivered externally." This will further help to improve staff knowledge.

Preventing and controlling infection

At our last inspection the provider had failed to ensure the risks associated with infection control were safely managed. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) and 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 regulations 12 or 17.

- Staff understood where people required support to reduce the risk of avoidable harm.
- Care plans contained basic explanations of the control measures for staff to follow to keep people safe.
- Incidents had reduced because lessons had been learnt from previous events.



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 Inadequate. 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 last inspection the provider did not have effective systems in place to monitor the quality and safety 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 manager understood their role in terms of regulatory requirements. For example, the provider notified CQC of events, such as safeguarding's and serious incidents as required by law.
- The service requires a manger who is registered with the CQC. The new manager had recently been appointed and had commenced the application process with the CQC.
- The service had a range of audits and checks in place which helped to maintain and improve standards.
- The manger discussed plans to strengthen checks and oversight, working with the provider and other managers to help identify similar trends both at this service and across similar services. This would enable shared learning and help to ensure preventative actions were taken to prevent similar incidents.

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

- The culture of the service helped ensure good outcomes for people. One person said, "I am getting used to the new manager; he is alright, he is a gentleman. I love it here; I have a lovely bedroom. I am very independent. They [staff] look after me".
- People and their relatives talked openly about the friendliness of the staff team. One staff member said, "Morale is okay, it has been hard over the last year. The care is good here, it's a home from home."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were encouraged to make their own decisions. Staff provided people with choices based on their individual needs and feedback.
- People were supported with their individual personal circumstances. A relative said, "The service is great [two people] can still live together and both receive the care and support they require." One person told us,

"I am well looked after. The food is good. I've no complaints. I get up when I want. I love it here."

• The manager told us about plans to promote feedback in a quality assurance framework. They told us, "This will include both paper and electronic questionnaires, and will obtain feedback from residents, relatives, staff, and commissioners."

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; Working in partnership with people

- The manager understood the requirement to share information in an open and transparent way with other organisations.
- Health professionals told us the service was proactive in working in partnership with them and that the service was responsive to feedback. This had helped to implement required improvements.
- People and their relatives told us they would be happy to speak with staff and the new manager to raise any concerns they may have.