

Barons Park Nursing Home Limited

Barons Park Care

Inspection report

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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

Barons Park Care provides nursing and accommodation for up to 46 younger and older people with complex, challenging and advanced forms of dementia and significant mental health care needs. At the time of our inspection there were 44 people living at the service.

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

Every person and relative told us the service provided safe, compassionate and dignified care. One person said, "I am well looked after, and the staff are really nice. A relative said, "[Name] is so happy at Barons Park Care; it's worth its weight in gold and the staff are so good."

The service was warm and welcoming, people had formed positive relationships with staff who in turn provided personalised and dignified care.

People and relatives told us there were enough staff to meet their needs. Robust contingency plans were in place for any unplanned absences. Records showed staff were recruited safely.

Risks to people's health had been identified. These were monitored and managed and reviewed on an ongoing basis to track any change in their needs.

The service was well-led with an open and transparent ethos. The service was also well supported by the provider.

People, relatives and staff were complimentary of how the service was managed and were confident that if they had any concern they would be listened to and action taken.

People's medicines were managed safely, and Infection Prevention and Control Measures were robust.

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 this practice.

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 21 March 2018).

Why we inspected

We carried out an unannounced focus inspection. The inspection was prompted following a review of the information we held about this service.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good. This is based on the findings at this inspection.

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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Barons Park Care on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

The service was well-led.

Details are in our well-led findings below.

Barons Park Care

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector, a nurse and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Barons Park Care is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Barons Park Care is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us

annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and six relatives about their experience of the care provided. We spoke with six staff including three care workers, a nurse and the registered and regional managers.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- All of the people and relatives we spoke with told us they felt safe. One person told us, "I felt well looked after and staff are all nice to me." A relative said, "[Name] is so safe. The staff are so good, and they genuinely care. We would not want to move them from Barons Park because of the trust we have and how they are looked after."
- Staff received safeguarding and whistleblowing training and knew how to keep people safe from potential harm and recognise the signs that may indicate a person was being abused. They told us they would report any concerns to managers and were aware of external agencies they could contact such as CQC and the local authority if their concerns were not listened to or acted upon.
- Accidents and incidents were reported, recorded and investigated to reduce the risk of recurrence.

Assessing risk, safety monitoring and management

- Risks associated with people's care and support needs had been assessed. Care plans and risk assessments were thorough to ensure risks were monitored safely, such as pressure care, falls and nutritional risks.
- Where increased risks were identified the advice and guidance was sought from appropriate healthcare professionals, for example GP's, district nurses and speech and language therapists (SALT). Records confirmed when changes to people's needs were made these were updated to ensure staff could continue to provide safe care.
- People and relatives were involved in their care and support plans and reviews. One relative told us, "I'm always involved in care plan reviews."

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met. Mental capacity assessments were undertaken where it was believed people lacked capacity to make informed decisions regarding their safety.

- The service's equipment was appropriately maintained to ensure people were safe. This included hoists, wheelchairs and walking frames.
- The environment was safely managed. People's rooms and communal areas were free from hazards ensuring people could move around the service safely.

Staffing and recruitment

- Enough suitably qualified and experienced staff were deployed to meet people's needs in a timely way. The provider had 'bank' staff available to support any unplanned staff absence. On the day of the inspection two staff were unable to work due to illness. Replacement staff were deployed from the 'bank' promptly to ensure continuity of care.
- The registered manager told us, "The bank system works well for unforeseen staffing issues. Other senior staff and I will provide care though if required."
- Throughout the inspection staff responded to people's request for assistance promptly. For example, one person activated their call bell for assistance in their bedroom whilst we sat talking to them. A care worker responded quickly and supported the person with repositioning as they had become uncomfortable.
- Staff were recruited safely. Staff records included all required information, to evidence their suitability to work with people, which included a Disclosure and Barring Service check (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were safely managed and appropriately stored. People and their relatives told us they received their medicines as prescribed.
- Medicines administration records (MAR) were in place. We reviewed 18 MARs and found the actual stock of medicines matched what was recorded on the MAR. This assured us people received their medicines as prescribed.
- Staff were trained in the safe administration of medicines and received regular competency checks.
- The registered manager completed medicines audits and any actions identified were promptly addressed and investigated where necessary.

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.

Visiting in care homes

- People were supported to have regular contact through visits with family members and friends. Family members continued to visit during an outbreak where their relative was receiving end of life care and where family members had essential caregiver status.
- Visitors were required to follow government guidance for visiting care homes, which included undertaking

a Lateral Flow Device (LFD) test, having their temperature taken and wearing Personal Protective Equipment (PPE). This meant the risk of an outbreak of COVID-19 in the service was reduced as far as practicably possible.

Learning lessons when things go wrong

- The services learned when things went wrong. Relatives told us they were informed and updated following any incident or accident people were involved in and were satisfied with how the provider addressed these.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- All the people and relatives we spoke with gave overwhelming positive feedback regarding the care and treatment they received from Barons Park Care. One person told us, "Carers go above the call of duty. They are brilliant." A relative told us, "The atmosphere in the service is welcoming, inviting, upbeat, positive and it's like one big family."
- The registered manager was a visible presence in the service and led by example. Throughout the inspection we observed them engaging with people, relatives and staff to ensure the service ran smoothly, and offered support and advice where required.
- Feedback we received supported this. A staff member said, "They [managers] support us [staff group] and we can go to them with anything." A relative commented, "The manager is very good, approachable, listens and responds, and clearly knows everyone."
- The registered manager clearly demonstrated the providers vision and values in providing people with person centred care and support. The aim of the service was to support people to achieve positive outcomes and live the lifestyle they wished.
- The registered manager understood their responsibility under the duty of candour. In response to an incident they demonstrated they had followed the procedure, provided information and a timely apology.

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

- People and relatives told us they felt involved in the service. The serviced actively encouraged people to express their views so they understood their experience of care and where any improvement could be made. One relative told us, "I discussed my [Name] bedroom layout and how we thought it might be helpful to change it around. They did it but also said it can be changed back again or we could try something different."
- Staff had opportunities to feedback through regular supervisions or team meetings. Staff told us they could raise issues with management and believed they would be listened to.

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

- The service had robust governance systems in place. Several audits including those for care plans, medicines and accidents and incidents were undertaken and used to identify any areas for improvement or

concern.

- The service had an ongoing action plan in place. This was used to record the outcome of audits which both the provider and registered manager had access to. This meant the provider had full oversight of the service and monitor areas identified for improvement.
- The registered manager shared information with CQC and other agencies of notifiable events at the service. The rating from the last inspection was on display on the provider website and within the home.

Continuous learning and improving care

- The registered manager was open, transparent and committed to continually improving the service. The provider was supportive of the registered managers plan to improve the décor of the environment including corridors and communal areas to enhance the appearance of the service.

Working in partnership with others

- The registered manager worked in partnership with other agencies. This included health bodies, commissioners and other stakeholders. This enabled the service to provide joined up care in a holistic way.