

Partnerships in Care 1 Limited

Althea Park House

Inspection report

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Ratings

1.0.0.1.90	
Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

About the service

Althea Park House is a care home with nursing providing therapeutic care and support to seven people with an eating disorder at the time of the inspection. The service can support up to ten people. People are accommodated in one adapted building and one purpose-built building called The Anchor.

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

Systems were in place to protect people against identified risks if they left the care home. Staff were confident they had the knowledge and skills to keep people safe during these incidents.

Risks to people were assessed by a clinical team which could include professionals from a person's funding authority. Care plans and risk assessments provided clear guidelines for staff to follow to keep people safe.

Where safety incidents occurred, these were analysed for any lessons to be learned. People's risks were reviewed with health professionals and action to be taken to keep people safe.

We were assured the service was following safe infection prevention and control procedures to keep people safe.

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about some recent incidents where people had left the care home and placed themselves at risk of harm. The overall rating for the service has not changed following this targeted inspection and remains Good.

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.

We found no evidence during this inspection that people were at risk of harm from these concerns.

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.

Please see the safe section of this full report. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Althea Park House 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 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 Good. 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



Althea Park House

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.

This was a targeted inspection to check on a specific concern we had about the risks associated with people leaving the care home and placing themselves at risk of harm.

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

This inspection was carried out by one inspector.

Service and service type

Althea Park House 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. 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

We spoke with one person who used the service about their experience of the care provided. We spoke with the registered manager, the team leader, the deputy manager, an occupational therapist, the regional director, a registered nurse, and four members of therapeutic care staff.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We received feedback from one person using the service. We also contacted and received feedback from a relative of person using the service. We contacted five professionals involved with people using the service to receive their views about the service. We did not receive any feedback from them.

Inspected but not rated

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 Good. 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.

Assessing risk, safety monitoring and management

- People had risk management plans which included their input and identified areas and levels of risk as well as planned interventions.
- Where a person was assessed to be at increased risk of leaving the care home and self-injury, this was reviewed by a team of health professionals working with the service, management and professionals from the person's funding authority.
- Staff were trained and confident on how to intervene when people self-injured. Specific training using scenarios relating to self-injury were provided to staff. They described the procedures to follow and were equipped both practically with the means to deal with self-injury and with suitable knowledge and skills.
- Handover meetings between shifts provided a means whereby important information about people's care and support could be shared. Changes to people's risks and how these were currently being managed were discussed and recorded.
- Staff knew when the input of other agencies such as the police was required. The registered manager had plans to establish closer working arrangements with the police.
- Feedback we received from people using the service and their representatives was although the service was sufficiently staffed to manage identified risks, other people using the service were not always receiving the staff input they expected. The provider acknowledged that staffing had recently been a challenge. They explained the service was able to provide sufficient staff numbers with the use of agency staff and staff from other services operated by the provider Ongoing staff recruitment was in progress.
- To ensure consistency the same agency staff were used on a regular basis. Staff from other services were familiar with working with people with similar needs and risks. Staff we spoke with felt supported by the management of the service.

Learning lessons when things go wrong

- Where incidents occurred, the service assessed their response and introduce increased levels of observations and engagement with the person.
- Any decision to change observation levels was made with the input of mental health professionals within the clinical team.
- Following a recent incident, the regional director was part of the decision making for changes in observations to ensure decisions were clinically sound and safe.
- The provider was planning a review of the admission criteria for the service. They acknowledged too much risk mitigation did not fit with the therapeutic model of positive risk taking.

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