

Prasur Investments Limited

Sandrock Nursing Home

Inspection report

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Date of inspection visit:

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02 November 2023

03 November 2023

Date of publication:

17 January 2024

Ratings

Overall rating for this service

Inadequate ●

Is the service safe?

Inadequate ●

Is the service well-led?

Inadequate ●

Summary of findings

Overall summary

About the service

Sandrock Nursing Home provides accommodation for up to 28 people who require nursing or personal care. At the time of our inspection 7 people lived in the home. Since last inspected commissioners had helped support people to move out of the service.

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

During the previous four inspections we identified serious concerns with the safety and quality of the service being provided for people.

During this inspection, there continues to be breach of the regulations and evidence of non-compliance. With the provider's poor regulatory history and repeated concerns from the past 4 inspections, we could not be assured that the quality of the service would improve in the areas identified at this inspection.

During this inspection the provider neglected the premises people lived in placing them at risk of harm. We found a series of concerns relating to the health and safety of both the inside and outside of the premises and regarding to poor management of infection control.

People told us they were comfortable and received good food and care from the staff. Some people told us there wasn't much to do but they liked to sit and watch the television.

The principles of the Mental Capacity Act (2005) were being consistently followed when providing care and treatment for people. 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.

People were protected from abuse because staff understood the correct procedure to follow if they had any concerns. Staff were knowledgeable about people's health.

Rating at last inspection and update

The last rating for this service was inadequate (report published 5 September 2023) and there were breaches of regulation.

At this inspection, we found that the provider had failed to make sufficient improvements. This meant the service continued to be in breach of regulation 17 for the fifth consecutive inspection and was found to be in continued breach of regulation 15 for the second time since the last inspection.

Why we inspected

This inspection was carried out to follow up on actions we told the provider to take at the last inspection.

You can read the report from our last inspections, by selecting the 'all reports' link for Sandrock Nursing Home on our website at www.cqc.org.uk.

Enforcement

We have identified breaches in relation to lack of effective governance of the service.

Follow up

Will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work with the local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

Special Measures

The overall rating for this service is 'Inadequate' and the service therefore continues to be in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not safe.
Details are in our safe findings below.

Inadequate ●

Is the service well-led?

The service was not well-led.
Details are in our well-led findings below

Inadequate ●

Sandrock Nursing 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 Health and Social Care Act 2008.

Inspection team

This inspection was undertaken by 3 inspectors.

Service and service type

Sandrock Nursing Home 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. Sandrock Nursing Home 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was no registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since our last inspection and we sought feedback from the local authority. We used this information to plan the inspection.

During the inspection

We spoke with 3 people who used the service about their experience of the care provided. We also spoke with 4 members of staff including the nursing staff, care staff, kitchen and maintenance staff. We made observations in communal areas of staff interactions with people living at the service.

We reviewed a range of records. This included 3 people's care and support records and medicine administration records. We looked at staff records. We also reviewed a variety of records relating to the management of the home, including policies and procedures, staffing rotas, accident and incident records, safeguarding records and audits and governance records.

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 inadequate. The rating for this key question has remained inadequate. This meant people were not safe and were at risk of avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse;

- The provider had failed to appropriately assess, monitor and manage risks to people's health and safety by neglecting the environment placing people at risk of harm.
- The provider did not operate robust procedures and processes that made sure people were protected from environmental risks.
- We found continued concerns with the safety and condition of both the inside and outside of the premises as found at the previous inspection.
- Some of the bedroom fire doors did not close against their rebate. Fire exits were not clearly identified in the garden courtyard and in the main lounge.
- Toiletries and cleaning products were seen left in open lockers in a hallway close to bedrooms and in communal bathrooms. This posed a potential risk to people who may ingest such products which would cause harm.

At our previous inspection health and safety risks had not been met. This was a breach of Regulation 15 ((premises and equipment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, The provider had not met most parts of the conditions set out in their warning notice. Improvements had not been made and the provider was in breach of this regulation.

Preventing and controlling infection

- People were not always protected from the risk of the spread of infection.
- Some rooms including unoccupied rooms were not clean or in good condition. Many areas within the service including the communal bathrooms, windows and sills, some bedrooms and armchairs were unclean and in poor condition.
- There was a strong malodorous smell in one toilet that needed thorough cleaning and was pointed out to staff during the inspection.
- Several areas of the service were unclean and had a build-up of grime, dirt, and cobwebs. The ground floor bathroom was cold and in need of cleaning and repair of a broken bath panel that had sharp edges protruding out.

Visiting in care homes; Staffing and recruitment; Using medicines safely

- The provider's approach to visiting was in line with current government guidance.
- People received their medication as prescribed.

- Staff responsible for medicine administration had received relevant training and had their competency levels regularly checked.
- There were enough staff to meet people's needs. Staff told us that the provider worked regularly at night to provide cover due to vacancies not fulfilled.
- Staff told us they had worked at the service for many years and offered consistent care and stability to people.

Learning lessons when things go wrong

- Staff demonstrated lessons had been learned with improvements made to risk assessments for each person including updated (personal evacuation plans) peeps.

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 inadequate. The rating for this key question has remained inadequate.

This meant there were significant shortfalls in service leadership. The provider did not assure the delivery of a well maintained service.

At the last inspection, the provider was found to be in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the governance arrangements in place were not robust, management oversight of the service was poor, and records were poorly maintained.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider continues with non-compliance of regulations while operating the service and has a history of non-compliance with the last 4 inspections all rated inadequate.
- The service continues to not have a registered manager in place. The registration of the last registered manager was voluntarily removed on 20 August 2023 with no statutory notification from the provider to inform CQC of future managerial arrangements.
- The provider lacked robust oversight of the service. The provider was not proactive in making positive changes. They failed to take responsibility for assessing, monitoring and improving the quality of the service and for mitigating risks to people and visitors in the building.
- Although the provider had a range of audits, 'walk around reports', 'provider reports' and a 'three-monthly development plan', We found they were not always completed consistently and they did not identify the risks and failings highlighted during the inspection around health and safety and infection control.
- Governance systems were poorly managed and lacked any actions to make the service safer in particular, the poor condition of exterior and interior of the premises as highlighted at the previous inspection.
- The maintenance staff had their hours reduced to three days a week which reduced their capacity to safely maintain the service.

At this inspection we found that due to the concerns highlighted in this report, the provider was still in breach of regulation 17. The provider failed to operate effective systems to assess, monitor and improve the quality and safety of the service. This is a continued breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics;

- People told us they were comfortable and praised the staff team.

- People's records showed advice and guidance was documented, and staff followed the information provided to help improve their care.

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 others

- We saw that the nursing and staff team were keen to continually learn to improve people's experience of care. They understood their responsibility to be open in the event of anything going wrong.
- Records showed that safeguarding concerns had been reported to the local authority and CQC in line with guidance.
- The nursing team made referrals to health and social care professionals as required to meet people's needs.

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 17 HSCA RA Regulations 2014 Good governance
Diagnostic and screening procedures	Quality assurance systems in place failed to establish, highlight or fully address concerns identified in relation to the provision of safe maintenance, completeness of records and the fire safety and cleanliness of the environment. The registered provider failed to demonstrate they had taken reasonable steps to monitor the quality and safety of the service to mitigate risks to people.
Treatment of disease, disorder or injury	

The enforcement action we took:

A warning notice has been served and the provider is required to become compliant with Regulation 17, section 17, (1) (2) (a) (b) (c), of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014