

Ringdane Limited

# South Quay Care Home

## Inspection report

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### Ratings

#### Overall rating for this service

Requires improvement



Is the service safe?

Is the service effective?

Requires improvement



Is the service caring?

Is the service responsive?

Is the service well-led?

Requires improvement



### Overall summary

We carried out a previous comprehensive inspection of this service on 28 and 29 October 2014, at which two breaches of legal requirements were found. This was because staff did not always receive supervision or appraisals and appropriate assessments and applications to the local safeguarding adults team, for people who may be subject to Deprivation of Liberty Safeguards, had not been undertaken. We also found that the registered manager had not notified us of significant accidents or events occurring at the home, as he was legally required to do so...

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements

in relation to the breaches. We undertook a focused inspection on 28 July 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'South Quay Care Home' on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

South Quay Care Home is registered to provide accommodation for up to 58 people and is divided into two distinct units; one unit supporting older persons,

# Summary of findings

some of whom were living with dementia, which can accommodate up to 45 people, and a smaller unit offering care and respite facilities to a maximum of 13 younger people with a neurological condition. At the time of the inspection there were 28 people living in the unit supporting older people and 11 people in the unit supporting neurological conditions.

The home had a registered manager who had been registered since September 2014. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our focused inspection on 28 July 2015, we found that the provider had followed their plan which they had told us would be completed by the April 2015 and legal requirements had been met.

We saw evidence that assessments had been made of those people who may be subject to Deprivation of Liberty Safeguards (DoLS) and, where necessary, applications had been made to the local authority safeguarding adults team. These safeguards aim to make sure people are looked after in a way that does not inappropriately restrict their freedom. The registered manager told us assessments were currently in progress, but that no formal DoLS applications had been granted at the current time.

Staff told us they had access to regular supervision and appraisals and we saw a matrix had been produced to ensure that regular supervision sessions were undertaken and recorded.

We had received a number of notifications from the provider in relation to accidents or incidents at the home. We saw that the issues recorded on the home's systems matched the notifications logged in the Commission's recording system.

# Summary of findings

## 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 question was not covered at this focussed inspection.

### Is the service effective?

We found that action had been taken to improve the effectiveness of the service.

Applications had been made to the local safeguarding adults team in relations to people who may be subject to Deprivation of Liberty Safeguards and specialist assessments were being undertaken.

Staff told us they had access to supervision and appraisals. They said they had good access to advice and support regarding any issues or problems they wished to raise or discuss.

This meant that the provider was now meeting legal requirements. We could not improve the rating for effective from Requires Improvement because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

**Requires improvement**



### Is the service caring?

The question was not covered at this focussed inspection.

### Is the service responsive?

The question was not covered at this focussed inspection.

### Is the service well-led?

We found that action had been taken to ensure the service was well-led.

The provider had notified the Commission of incidents, accidents and significant events occurring at the home.

This meant that the provider was now meeting legal requirements. We could not improve the rating for safe from Requires Improvement because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

**Requires improvement**



# South Quay Care Home

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of South Quay Care Home on 28 July 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 28 and 29 October 2014 inspection had been made. The team inspected the service against two of the five questions we ask about services: is the service effective and well-led. This is because the service was not meeting some legal requirements.

The inspection team consisted of one inspector.

We spoke with four people who used the service to obtain their views on the care and support they received. We also spoke with two relatives who were visiting the home on the day of our inspection. We talked with the registered manager, three care workers and two nurses.

We observed care and support being delivered in communal areas including lounges and dining rooms, looked in the kitchen areas, treatment rooms, sensory room, bath/shower rooms, toilet areas and checked some people's individual accommodation. We reviewed a range of documents and records including; three care records for people who used the service, staff training records, accidents and incident records, minutes of meetings and a range of other quality audits and management records.

# Is the service safe?

## Our findings

This question was not covered in this focussed inspection.

# Is the service effective?

## Our findings

At our last inspection we found the provider was in breach of two regulations concerning people being properly assessed and monitored to ensure their liberty was not inappropriately deprived and around staff receiving appropriate support and supervision. At this inspection we found that improvements had been made.

The registered manager showed us documentation indicating that applications for assessments under the Deprivation of Liberty Safeguards (DoLS) had been made to the local authority safeguarding adults team. He told us that assessments of each individual were in progress, with a specialist assessor visiting the home over the next few weeks. We confirmed with the local safeguarding adults team that applications for DoLS assessments had been received and they confirmed this was correct. This meant appropriate processes were in place to ensure people living at the home did not have their freedom restricted inappropriately.

Staff told us that they now had access to regular supervision sessions. Nursing staff working on the neurological unit told us they had regular supervision sessions with the registered manager, but were also able to access additional support from specialists elsewhere in the provider's organisation or from outside professionals. Nurses working on the older person's unit also told us they had regular meetings with the registered manager when they could discuss both professional or personal issues, if they wished.

Other staff told us they had regular supervision sessions with nursing staff, although two care workers told us sessions had not been quite as frequent recently, due to nursing staff being busy with other duties. However, all staff told us they could access support if they required it. The registered manager showed us a copy of the home's supervision matrix, which recorded all the supervisions and appraisal sessions taking place at the home.

Staff told us they had access to a range of training. The registered manager showed us the new online training system that was being introduced by the provider. He said that the system was still in the early stages and staff were still getting to grips with the new system and processes.

People and relatives we spoke with told us they felt staff had the right skills to support people living at the home. One person told us, "I think the people (staff) they have here are very good. They know what they are doing." A relative said, "The staff are lovely; tip top. They know what they are doing. Absolutely marvellous."

We saw that people's consent was sought by staff on a day to day basis. People were asked if they wished to sit in the lounge area, join in with activities or whether they wished to move to the dining area for their meals. We witnessed staff knocking on people doors before entering to offer support or personal care. People's care records contained consent forms, signed by people to say they gave their consent for photographs to be taken or that they were happy for a lap belt to be used if they were using a wheelchair. Where people did not have the capacity to give consent then an assessment had been undertaken to ensure that action was in the person's best interests.

People told us food at the home was good and that they enjoyed it. One person told us, "The food is excellent. They do a soup and whatever flavour it is, it is excellent. I always ask for second helpings." We saw people had a choice of meals or could request an alternative if there was nothing they would enjoy on the menu. People who required special diets, such as pureed food, were catered for. The presentation of food, including specialist diets, was good and meals looked appetising.

The home was generally in good order, although some staff said that areas could do with refreshing or updating, due to general wear and tear. Nursing staff on the neurological unit said new furniture had been ordered and redecoration of the unit overall was being planned. The home had a large garden and people were able to access this area through wide double doors. The garden area was generally flat and largely wheelchair accessible.

# Is the service caring?

## Our findings

This question was not covered in this focussed inspection.

# Is the service responsive?

## Our findings

This question was not covered in this focussed inspection.



# Is the service well-led?

## Our findings

At our last inspection we found the provider was in breach of the regulation concerning notifying the Commission about significant incidents, accidents and other events at the home. Notifications are changes, events or incidents that the provider is legally obliged to send us within the required timescale. The submission of notifications is important to meet the requirements of the law and enable us to monitor any trends or concerns. We had written to the provider and received reassurances that the situation would not arise again. At this inspection we found that improvements had been made.

The provider had informed the Commission about incidents and accidents, any deaths occurring at the home and potential safeguarding issues. We saw that the notifications received by the Commission matched the incidents and events recorded by the home. The Commission's system indicated that there had been no notifications for DoLS being granted to the home. The

registered manager told us that no formal DoLS had been granted at the current time. However, he was aware the Commission should be notified when any DoLS were formally agreed by the local authority.

Staff members told us they were well supported by the registered manager and felt the overall management of the home was good. Comments from staff included, "I get on okay with the manager"; "The manager is approachable. I would go to him if I had any problems" and "I have no problems with the manager. I find him very approachable."

People living at the home confirmed there were regular meetings to discuss issues and said they could raise any concerns that they wished. One person told us, "We have residents' get togethers." I can get my point across if I need to." Staff confirmed there were regular staff meetings and they could raise any issues or concerns. They felt these were listened to and acted upon, if possible.

We saw the registered manager carried out a number of checks and audits on the home. He told us that the regional manager also undertook checks on the running of the home and the care provided.