

HC-One Limited

Dale Park

Inspection report

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Date of inspection visit:
15 June 2021

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01 July 2021

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

Dale Park is purpose built and can accommodate 46 people who are living with dementia. There were 27 people in residence at the time of the inspection.

People's experience of using this service

People we observed were supported and relatives we spoke with told us they felt the home was safe. One relative told us, "Mum is very settled; the care is second to none."

Arrangements were in place for checking the environment to ensure it was safe in relation to infection control and the threat of Covid-19. We found the policies and procedures in place followed current national guidance. We sign posted the manager to good practice guidance when admitting visitors to the home.

People were settled in the home and any risks in relation to their wellbeing, such as risk of falls, had been carefully assessed.

The home was staffed appropriately. There was a core of staff in the home who had good knowledge and rapport with the people they supported. The use of agency staff was minimal. Some staff reported dissatisfaction with staffing levels on occasions; we advised the manager to follow this up. The duty rotas confirmed stable staff numbers.

Since the last inspection there had been three changes of managers. There was no current registered manager. The provider had ensured continuity of management however and there was a senior 'Turnaround Manager' commencing in the home while a new manager was recruited.

Staff were varied in their feedback regarding leadership in the home although most reported a generally settled approach. One staff commented, "The managers have been good, but we would benefit from a longer-term manager to provide leadership." Most staff we spoke with felt supported by the management and enjoyed working at Dale Park.

Rating at last inspection:

The last rating for this service was Good (published 16 October 2018).

Why we inspected:

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. A decision was made for us to inspect and examine those risks. We had concerns about the staffing of the home, care for a person at the end of life and a safeguarding concern about the way staff responded to managing clinical risk for people.

The Care Quality Commission 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.

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.

For more details, please see the full report which is also on the CQC website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Inspected but not rated

Inspected but not rated

Is the service well-led?

Inspected but not rated

Inspected but not rated

Dale Park

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider was meeting requirements in specific areas of concern; infection control with reference to Covid-19 and the management of clinical risk.

Inspection team

The inspection was undertaken by two adult social care inspectors.

Service and service type

Dale Park is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and specific aspects of these were looked at during this inspection.

The service had a manager present [Area Director], but the person was not registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection was unannounced. The inspection took place on 15 June 2021 with a site visit and we continued assess further evidence following the visit.

What we did

Our planning considered information the provider sent us since the last inspection. This included information about incidents the provider must notify us about, such as abuse or other concerns as well as information about how the provider was managing Covid19. We reviewed information sent by the provider about specific incidents; we had asked for these prior to our visit.

We obtained information from the local authority commissioners and other 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.

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.

During the inspection, we spoke with and made observations of the care being provided for people. We spoke with two relatives to ask about their experience of care. We also spoke with the manager [who was also the Area Director for the provider, a nurse, eight members of care and support staff and maintenance staff.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

Over the course of the inspection we reviewed specific aspects of four people's care records and a selection of other records including policies and procedures for infection control, management of risk and training records for staff.

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.

The purpose of this inspection was to check specific concerns we had about staffing and care of people at the end of life and the management of people who may be at risk due to falls or their behaviour. We also looked at the management of infection control.

We will assess all the key question at the next comprehensive inspection of the service.

Staffing

- Enough numbers of suitably qualified and trained staff were deployed to meet people's needs.
- Observations of staff interactions and support for people were positive. Staff could provide safe care for people and displayed good interactive and communication skills.
- Feedback from staff was mixed regarding the ongoing staffing levels in the home. Most staff told us there is enough staff and others saying not always. We advised the manager to engage with staff and get more detailed feedback and learning.
- On the day of the inspection staffing numbers were satisfactory and duty rotas seen confirmed stable numbers.

Assessing risk, safety monitoring and management

- Risk assessments were completed to identify areas of risk and how people needed to be supported. People had ongoing 'resident of the day' reviews and these were detailed assessments of care and support.
- Overall, care files had clear examples of how people were supported around key risks such as falls and risk of pressure ulcers. One person had good overall support, but key assessments, although carried out, lacked detail and clarity. We directed the manager to review the care file and update it.

Preventing and controlling infection

- We were not fully assured that the provider was preventing visitors from catching and spreading infections. We sign posted the manager to current guidelines and best practice as well as the provider's own policies.
- 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.

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 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.

The purpose of this inspection was to check specific concerns we had about the monitoring and provision of staffing and the auditing and quality of care standards regarding specific risk.

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

- There was no current registered manager for the home. The previous registered manager had left in February 2021 and there had been continuity provided by a new manager who had recently moved to another of the providers services. The Area Director advised us that a senior manager for the provider [a 'Turnaround Manager'] who was very experienced, would be providing some continuity until a new home manager was in post.
- The feedback we received from staff and relatives evidenced a settled and consistent approach overall. One staff commented, "All the managers have been good and approachable, but the home would be better served with a long-term manager."
- Systems and processes in place to monitor the quality and safety of the service were effective in developing the service. A recent complaint had been investigated by the provider and displayed an open and accountable approach.
- The service had sent statutory notifications informing us of changes and events in the home as required.

Continuous learning and improving care

- Quality assurance measures identified areas for improvement; for example, the ongoing development of the training for staff in end of life care following a recent complaint. There were no examples of people on end of care. However, a lot of background work had been completed regarding staff training and meeting requirements of the Gold Standard Framework which highlights best practice in end of life care.
- The ongoing analysis and learning from accidents and incidents in the home was well developed and could identify trends and any actions needed to reduce risk.
- The senior manager was responsive to the feedback we delivered during the inspection and was positive in being able to develop the service ongoing.