

Monarch KM Ltd

Downsvale Nursing Home

Inspection report

6-8 Pixham Lane
Dorking
Surrey
RH4 1PT

Tel: 01306887652

Website: www.downsvale.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Downsvale is a care home which provides nursing care and accommodation to people. The service is divided into two separate houses, each with its own dining and communal space. Most people living at Downsvale are living with dementia or have a nursing need. At the time of our inspection 29 people were living at the service.

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

People said they felt safe living at Downsvale and they told us they did not have to wait for attention from staff. Staff were knowledgeable about the risks to people and knew how to help keep them safe and free from harm.

Where people had an incident or accident these were responded to, lessons learnt and action taken to prevent further accidents. Staff knew how to recognise and report any safeguarding concerns.

Changes had been made to the service during the pandemic to help reduce any risk of infection. We had no concerns about the infection prevention and control practices of staff.

The registered manager had an open-door policy and staff told us they felt supported and valued by them. They said they could approach the registered manager to raise concerns and they felt listened to. Robust recruitment processes were in place.

Relatives told us they were very happy with the care their family members received. They told us the registered manager was very supportive and put people first.

A range of audits was completed to ensure people received a good level of care.

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 (report published 31 May 2018).

Why we inspected

This targeted inspection was prompted due to concerns we received about various aspects of the service. This included infection control, staffing and unsafe care for people. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from these concerns. 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.

At this inspection we reviewed selected Key Lines of Enquiry in the key questions of Safe and Well-Led only and this report covers our findings in relation to those.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Downsvale Nursing Home 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 when we will carry out a fully comprehensive inspection looking at all key questions. 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

Is the service well-led?

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

Downsvale Nursing Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection prompted by specific concerns we had received about the quality of care people received. These concerns indicated people were at risk of harm. During the inspection we looked at some elements of the key questions of Safe and Well-Led. This included risks, staffing levels and competency, infection control, accidents and incidents, the culture within the service and the governance arrangements.

Whilst at the inspection, we also completed an infection prevention and control assessment. This was part of a thematic review which is seeking to identify examples of good practice in infection prevention and control.

Inspection team

This inspection was carried out by two inspectors.

Service and service type

Downsvale 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 agency is run and for the quality and safety of the care provided.

Notice of inspection

This was an announced inspection. We announced the inspection the day before we visited to discuss the safety of people, staff and inspectors with reference to the COVID-19 pandemic.

What we did before the 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. This was because this was a targeted inspection prompted

due to specific concerns received.

We reviewed information we had received about the service since the last inspection.

During the inspection

We spoke with six people who used the service and two relatives about their experience of the care provided. We spoke with eight members of staff including the provider, the registered manager, the deputy manager, nurses and care staff.

We reviewed a range of records. This included four people's care records and medicines records. We looked at four staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We asked the registered manager to remedy the shortfalls we identified in the premises and storage of medicines trolleys.

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 have specific concerns about.

The purpose of this inspection was to check on concerns we had received about staffing levels, safe premises, safe care and infection control.

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

Staffing and recruitment

Staffing

- People were cared for by a sufficient number of staff. One person told us, "They (staff) are always popping by and coming in for a chat." A second person said, "They are always there if I need anything." A third person said, "They (staff) are very good. Staff are around."
- The registered manager said they always met their minimum staffing levels and that they used agency staff to fill any shortfalls in staff rotas. This allowed them to plan ahead to ensure consistency of agency staff.
- Staff felt levels of staff were appropriate. A staff member told us, "Staffing is fine."
- Where people required assistance, we observed staff attended in a timely manner. At lunch time, staff were available to support people with their meals and during the inspection we saw staff regularly checking people had drinks.
- The service had recruited new staff since our last inspection. We reviewed the recruitment records for four staff and found an application form and health declarations had been completed, references obtained and a Disclosure and Barring Service (DBS) check carried out. A DBS check helps ensure prospective staff are suitable to work in this type of service.

Assessing risk, safety monitoring and management

- People felt safe and were known well by staff who were able to describe people's individual needs and risks. One person told us, "I've always felt safe."
- Individual risks to people had been identified and guidance was in place for staff to reduce these. People who spent the majority of time being cared for in bed, slept on pressure mattresses. This helped reduce the risk of harm to their skin. Staff were able to tell us how to ensure the mattresses were on the correct setting.
- Some people required assistance with transferring and as such information on which type of hoist needed to be used and the size of sling suitable for the person was recorded in their care plans. We observed sufficient hoists in the service to ensure people could be transferred in a timely way.
- Where people had specific conditions, such as diabetes or epilepsy, detailed care plans were in place.
- We had been told people were at risk of leaving the service unnoticed due to insufficient security. We

found this to be the case. We also identified one ground floor window which did not have window restrictors and as such could enable people to leave unobserved. In addition, the storage of one of the medicine trolleys was not following best practice. We raised this with the registered manager and immediately following our inspection they sent us evidence to show they had addressed these shortfalls.

Systems and processes to safeguard people from the risk of abuse

- Where people had experienced incidents that constituted abuse, staff recognised these and took appropriate action in response. One person told us, "There is no aggression here."
- Safeguarding concerns had been raised with the appropriate authority and the service worked with the safeguarding team to investigate or provide additional information when required.
- Staff had a good understanding of what constituted a safeguarding concern and told us they would report these to the office. A staff member said, "I would always report it. I have a responsibility for my clients."

Preventing and controlling infection

- People lived in a clean environment and we observed housekeeping staff carrying out cleaning tasks during our inspection. One person told us, "Staff come in and clean my room."
- As part of this inspection we carried out an infection prevention and control assessment which did not identify any concerns about the service.
- We were assured the provider was preventing visitors from catching and spreading infections. They were meeting shielding and social distancing rules and admitting people safely to the service.
- Protective Personal Equipment was being used effectively and safely by staff and the registered manager was accessing testing for people and staff.
- The registered manager was promoting safety through the layout and hygiene practices of the premises and their infection control policy was up to date.

Learning lessons when things go wrong

- Where people had incidents or accidents, these were recorded, discussed, action was taken and lessons learnt to help prevent further occurrences. A staff member told us, "If someone had an accident, I would ring the emergency bell and the nurse would take over. I would fill in an accident form."
- The registered manager reviewed accidents and incidents and discussed these on a weekly basis with the deputy manager and nursing staff.

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 have specific concerns about.

The purpose of this inspection was to check on concerns we had received about the culture within the service and the competency of staff.

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

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

- People told us they were happy at Downsvale and that staff provided them with a good service. One person told us, "All the staff are lovely – very friendly. Nothing could be better." A second person said, "I have always felt comfortable here and happy."
- It was evident staff worked well together and staff told us they were happy in their roles. One staff member said, "Communication is good and I feel supported." A second told us, "I always feel listened to and supported."

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

- Staff competency was checked to help ensure they provided safe care and followed good practices. Nurses underwent regular refresher training on specific areas, such as verification of death, medicines management and catheterisation. One staff member told us, "I had to do about eight modules when I started and this included face to face moving and handling."