

Akari Care Limited

# Princes Court

## Inspection report

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

About the service:

Princes Court is a residential care home providing accommodation and personal care to 75 older people, some of whom require nursing care. At the time of this inspection 73 people were using the service. 53 people lived there permanently, and 20 people were using the rehabilitation service.

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

People were protected from the risk of abuse. There were detailed risk assessments in place which identified and reduced risks to people. Accidents and incidents were investigated and acted upon. Any lessons learned were shared with staff.

The premises were safe. Good infection control procedures were in place.

Medicines were managed safely.

There were enough staff on duty to safely meet people's needs. Staff recruitment was safe.

Staff were motivated by the manager to provide good quality, person-centred care. The provider's strong quality assurance process was embedded throughout the service. Provider representatives carried out routine checks to monitor the safety and quality of the service. The provider supported the manager to make improvements and develop the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection

The last rating for this service was requires improvement (published 14 February 2020) where we identified one breach of the regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Princes Court on our website at [www.cqc.org.uk](http://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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Princes Court

## 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.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Princes Court 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 did not have a manager registered with the Care Quality Commission. A new manager was in post and had applied to become the registered manager. The provider, Akari Care Limited, is legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was announced. Having consideration of the coronavirus pandemic, we gave the manager very short notice of our arrival.

#### What we did before the inspection

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

We used the information the provider sent us in the annual provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

#### During the inspection

We spoke with staff on duty including the manager and nursing staff. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to their recruitment. A variety of records relating to the management of the service, including policies and procedures were examined.

#### After the inspection

We looked at further information which the provider sent to us electronically. We contacted 10 relatives to ask for their feedback on the service. Five responses were received. We emailed 10 other members of staff. Four replies were received.

# 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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection, the provider had failed to ensure medicines were managed safely. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 12.

- The management of medicines was safe. Staff had regard for the medication policy and followed procedures correctly to ensure the safe ordering, storage, administration, recording and disposal of medicines.
- Nurses carried out regular checks of medicine stocks and records which the manager and provider had oversight of.
- The issues identified at the last inspection were addressed. Record keeping and working practices had improved.

### Assessing risk, safety monitoring and management; Learning lessons when things go wrong

At our last inspection we recommended the provider ensured all records were updated and audited to identify any gaps in records. The provider had made improvements.

- There were good assessments of people's needs to identify and mitigate any risks they faced. Staff followed the safety measures in place to reduce risks.
- The premises were safe. Routine checks, tests and servicing of equipment was carried out.
- The manager investigated accidents and incidents and acted to avoid repeated events.
- Learning from incidents was shared with the staff to raise their awareness and promote safe working practices.

### Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- Staff understood safeguarding processes and the manager followed the systems in place to investigate and report any concerns to external agencies. A staff member said, "I feel confident about reporting any incident which could occur in the home, knowing it would be dealt with."

- Relatives told us they thought their family members were safe living in Princes Court. Comments included, "We feel staff seem competent and they promote safe living" and, "I have no concerns, the home appear to have done well in minimising the risks during the current covid-19 pandemic."

#### Staffing and recruitment

- There were enough staff on duty to safely meet people's needs. Staff were allocated to specific areas of the home based on skill mix, people's care needs and people's preferences.
- The provider had good contingency plans in place in the event of reduced staff numbers.
- The recruitment process was safe. Robust checks were carried out to ensure new staff were suitable for the role.

#### Preventing and controlling infection

- The home was clean and comfortable to reduce the risk of spreading infections.
- The provider ensured the staff were equipped with personal protective equipment.
- Staff were trained in infection control and prevention and had increased their knowledge in relation to the coronavirus pandemic. A staff member said, "Covid has been difficult but all staff have worked really hard to keep our home covid free and look after our residents."



# 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 requires improvement. At this inspection this key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we recommended the provider ensured all records were updated and audited to identify any gaps in records. The provider had made improvements.

- A strong quality assurance process was in place. Audits and checks on the quality and safety of the service were routinely carried out by senior staff, the manager and provider representatives.
- Record keeping had been improved. Records were detailed, accurate and up to date.
- The manager and staff team understood their role and responsibilities. The provider had complied with all 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; Continuous learning and improving care

- The provider and manager understood their obligations in relation to the duty of candour. There had been no incidents which required them to act on that duty.
- The provider was open and transparent with regards to the findings of the last inspection. They worked with the Commission to resolve issues immediately.
- The concerns identified at the last inspection were shared with people, relatives and staff. Improvements were made. A relative told us, "I read the previous CQC report and had some concerns but (manager) discussed them frankly and put me at ease, providing plenty of information on the process."

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

- The manager had continued to promote a positive person-centred culture. A staff member said, "I think the care from all staff is amazing, the staff are very caring and go the extra mile to help residents."
- Relatives, staff and external professionals spoke highly of the service, the manager and staff. They told us the service was well-led.
- People, relatives and staff were empowered to be involved in how the service was operated. The provider was keen for staff and people to take part in new projects about dementia care and end of life care which had achieved good outcomes.

Engaging and involving people using the service, the public and staff, fully considering their equality

#### characteristics

- The provider and manager had engaged with people, relatives and staff throughout the coronavirus pandemic. Relatives felt assured their family members were safe and being well cared for amid restrictions on visiting. A wide variety of communication methods had been used to keep people and their relatives in touch with each other.
- Staff were kept well informed of changes and best practice guidance in relation to the pandemic. Staff had ample opportunity to share their concerns and make suggestions to improve the service.
- The provider was passionate about community work. They engaged with the public such as school children and nursing students to provide opportunities for people to have contact with others outside of the home. It also gave children opportunities to interact with the older generation and students vital experience in the health and social care sector.

#### Working in partnership with others

- The service worked well in partnership with external professionals and agencies. Staff were able to refer people directly to other services and work in collaboration with them to improve people's health, safety and well-being.
- The provider was involved with several new initiatives in conjunction with the Clinical Commissioning Group (CCG). The successful participation in projects had helped people achieve positive outcomes. For example, the staff were working closely with the speech and language therapists to identify risks early in order to prevent problems such as infections and poor oral intake.