

Cornwallis Care Services Ltd

Addison Park

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Addison provides accommodation and personal care for up to 37 people. The service does not provide nursing care. Nursing services are provided by the community nursing team. At the time of the inspection there were 35 people living at the service.

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

People told us they were happy with the care they received and people said they felt safe living there. Comments from people included, "I would give them all 5 stars, they are really kind. There are a lot of options for activities but I like my books" and "I love it here they are all so kind. I have no family so I have decided to stay here as there is always someone to speak to."

People looked happy and comfortable with staff supporting them. Staff were caring and spent time chatting with people as they moved around the service. Relatives told us, "They do a brilliant job here with (Person's name). She is being incredibly well looked after. The lovely lady who does the activities has done her nails again its really lovely" and "They are all very kind, I have no problems at all, other than it is such a long way for me to travel to see him. The staff keep me well informed. I am happy with the care they are receiving, I cannot complain about anything at all"

The building was clean, odour free and there were appropriate procedures to ensure any infection control risks were minimised.

Cleaning and infection control procedures had been updated in line with COVID-19 guidance to help protect people, visitors and staff from the risk of infection. Suitable visiting arrangements were in place for families to visit as per current government guidance.

People received their medicines safely and on time. Medicines were safely stored and managed.

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 supported by staff who had the knowledge and skills to meet peoples needs. Staff were recruited safely in sufficient numbers to ensure people's needs were met. There was time for people to have social interaction and there was a designated activities staff member to assist people. Staff knew how to keep people safe from harm.

Staff received appropriate training and support to enable them to carry out their role safely. However, recorded one to one supervision had not taken place, in accordance with the service policy, due to the challenges of the Covid-19 pandemic. We have made a recommendation about this in the effective section

of this report.

The environment was safe, with upgrades and redecoration taking place in an ongoing programme throughout the service. People had access to equipment where needed. There was an effective and well organised management system in place for the monitoring of all equipment and services in use at Addison Park.

People were supported to access healthcare services, staff recognised changes in people's health, and sought professional advice appropriately.

Records of people's care were individualised and reflected each person's needs and preferences. Risks were identified, and staff had guidance to help them support people to reduce the risk of avoidable harm. People's communication needs were identified, and where they wanted, people had end of life wishes explored and recorded.

People were involved in making their own meal choices and staff encouraged them to eat a well-balanced diet and make healthy eating choices. Special diets were catered for.

People were supported by a service that was well managed. Records were accessible and up to date. The management and staff knew people well and worked together to help ensure people received a good service.

Staff told us the manager, deputy and the provider of the service were available and assisted them whenever required. They went on to say how they were approachable and listened when any concerns or ideas were raised. One staff member said; "It has been a little difficult with so many changes in managers over recent times. Since this manager and the deputy have been here, they have been very supportive. We can get help whenever we need to."

People and their families were provided with information about how to make a complaint and details of the complaint's procedure were provided to people and their families.

Rating at last inspection

The last rating for this service was good (published 15 July 2019).

Why we inspected

This inspection was prompted in part due to concerns received about some aspects of the running of the service such as the change in meal provision at the service. As a result, we undertook a focused inspection to review the key questions of safe, effective and well led only.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained 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 Addison Park on our website at www.cqc.org.uk.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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?

The service was safe.
Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective
Details are in our effective findings below

Good ●

Is the service well-led?

The service was well led
Details are in our well led findings below

Good ●

Addison Park

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.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. 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.

Inspection team

One inspector carried out this inspection.

Service and service type

Addison Park 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.

The service did not have a registered manager registered with the Care Quality Commission. The current manager was in the process of registering for this role. The registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We reviewed information we had received about the service since the last inspection. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service about their experience of the care provided.

We spoke with four members of staff as well as the manager and deputy manager. We also spoke with a visiting healthcare professional and one relative.

We reviewed a range of records. This included two people's care records and the medicine records. We looked at two staff files in relation to recruitment. We reviewed staff training and support. A variety of records relating to the management of the service, including audit 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 the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks were identified, assessed, monitored, reviewed and documented. Staff had guidance to help them support people to reduce the risk of avoidable harm. For example, when people were at risk of falls.
- People were protected from risks associated with their health, safety and welfare. People's needs, and abilities were individually assessed prior to moving into the service. Risk assessments supported staff with how to support and protect people whilst minimising any restrictions placed upon them. Emergency plans were in place outlining the support people would need to evacuate the building in an emergency.
- Where people experienced periods of distress or anxiety staff knew how to respond effectively. Care plans documented information for staff on people's health needs, so they could respond quickly to prevent situations from escalating.
- The environment was well maintained with ongoing updates currently being carried out. Equipment and utilities were regularly checked to ensure they were safe to use.

Using medicines safely

- The service now used an electronic medicines management system. This had improved the recording of medicine administration. People received their medicines safely and on time. Staff were trained in medicines management.
- When people were prescribed 'as required' medicines there were protocols in place detailing the circumstances in which these medicines should be used.
- There were suitable arrangements for ordering, receiving, storing and disposal of medicines. Temperatures of the medicines fridge and medicine room were recorded daily. However, there were gaps in these records. We discussed this with the senior carer who immediately took steps to add this to the electronic records system so that a new daily prompt would help ensure this check was carried out daily.
- Medicines were audited regularly with action taken to make ongoing improvements.
- Medicines that required stricter controls were stored and recorded in accordance with legal requirements.

Staffing and recruitment

- There were sufficient numbers of staff employed and on duty to meet people's assessed needs. People and staff told us there were enough staff on duty to meet people's needs.
- Addison Park had recently recruited several new staff following some staff leaving at short notice. Successful recruitment had reduced their dependency on the use of agency staff.
- Staff confirmed staffing levels enabled them to keep people safe and meet their care needs. Staff could spend quality time with people. For example, one member of staff was seen putting one lady's hair in rollers for her. This lady had already had her nails painted by staff. One member of staff told us, "I love helping

people to feel a bit special, we all like to be pampered sometimes."

- Recruitment practices were thorough and included pre-employment checks from the Disclosure and Barring Service, undertaken before new staff started work.

Systems and processes to safeguard people from the risk of abuse

- The service was well managed which helped protect people from abuse.
- Most staff had undertaken updated safeguarding training and knew about the different types of abuse and how to report it. Some training had been delayed due to the Covid-19 pandemic but there were plans in place to address this.
- The provider had safeguarding systems in place and staff understood what actions they needed to take to help ensure people were protected from harm or abuse. People and relatives confirmed people were safe.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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. However, we recommend that the provider ensure all used PPE is discarded appropriately.
- 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.
- The provider was facilitating visits for people living in the home in accordance with the current guidance. People were supported to have visitors outside in the garden or in their rooms. Relatives and people confirmed this.

Learning lessons when things go wrong

- Accidents and incidents were recorded and analysed so any trends or patterns could be highlighted.
- Appropriate action was taken following any accidents and incidents to minimise the risk of adverse events reoccurring.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- There was a system in place to monitor training and help ensure it was regularly refreshed and updated, so staff were kept up to date with best practice. However, some training had been delayed due to the Covid-19 pandemic. We were assured dates were in place for appropriate training to take place in the near future.
- Not all staff had been provided with planned, recorded meetings to discuss their individual work and development needs, in line with the service's supervision policy. This was due to the challenges of the pandemic. However, staff told us they were well supported by the manager and the deputy.
- Staff, new to the care sector, were supported to complete induction training in accordance with current good practice. However, some new staff had yet to complete this process due to a recent outbreak of Covid-19.

We recommend the service prioritise a plan for all staff to be provided with formal recorded supervision, appraisal and any required induction and training updates.

- People received effective care and treatment from competent and knowledgeable staff who had the relevant skills to meet their needs. One member of staff told us, "I have done all my training. I think everyone is quite happy we all get on well, no animosity at all."
- New staff shadowed experienced staff until they felt confident and their competence was assessed before they started to provide support independently.

Supporting people to live healthier lives, access healthcare services and support

- Staff were vigilant and monitored people's healthcare needs. Staff referred any concerns to appropriate agencies.
- Healthcare professionals confirmed the staff at Addison Park were quick to seek advice and guidance in a timely manner. Records showed staff followed guidance provided.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Management and staff worked with external healthcare professionals to deliver care in line with best practice. One visiting healthcare professional told us, "Care plans are much more informative now, staff are more communicative. There is always something going on for people to socially engage with others. The staff are very responsive to any changes in people and are on it straight away. They are very accommodating when I visit. No concerns really at all."
- People's individual needs had been assessed before they moved in. New admissions had to receive a negative Covid-19 test before admission and then were isolated for a period within the service to ensure

they were virus free.

- Assessments of people's individual needs were detailed and their care and support regularly reviewed.

Staff working with other agencies to provide consistent, effective, timely care

- People were supported to maintain good health and were referred to appropriate health professionals as required.
- Staff supported people to see external healthcare professionals regularly, such as GPs. Visits by some healthcare professionals continued during the pandemic and the service was able to contact other professionals via phone calls or video calls in an emergency.
- People's care plans were updated to provide staff with clear instructions about how to follow advice given by external professionals.
- People's care records highlighted where risks had been identified. For example, where people needed to have their food and drink intake monitored and their weight regularly checked.

Supporting people to eat and drink enough to maintain a balanced diet

- The service had changed from making all their own meals on site, to having ready made meals delivered by a national company that specialises in offering a wide variety of dietary requirements. The CQC had received some concerns from people and families about this change. We observed lunch being served and the food looked appetising. People were provided with meals which they enjoyed. People told us, "I like the food" and "I have no problem with the food."
- Staff were aware of any specific dietary requirements for people, for example, if people needed a soft diet. People were involved in choosing their meals each day.
- Care plans included information about people's dietary needs and their likes and dislikes. People who needed their nutrition to be monitored had records in place which were used to help identify any concerns.
- Drinks were served regularly throughout the day to prevent dehydration. People who stayed in their rooms, through personal choice, had drinks provided and these were refreshed throughout the day.

Adapting service, design, decoration to meet people's

- The physical environment was continuously being reviewed, updated and improved. The maintenance person explained to us the programme of work planned for the next few months to further update the corridors, rooms and lounge area. People's rooms were decorated with personal belongings to ensure people felt comfortable with familiar items around them.
- There was a suitable range of equipment and adaptations to support the needs of people using the service.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions

on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Mental capacity assessments had been completed for people where indicated and, where required, appropriate applications had been made and received to deprive people of the liberty within the law. However, the service records for such applications were not entirely accurate and did not match with the information held by the DoLS team. We put the local authority DoLS team in touch with the service to ensure all records were accurately maintained in the future.
- Some people had required to have restrictions imposed on them to keep them safe. One DoLS authorisation was in place and was under regular review.

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. At this inspection this key question has remained 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

- There was no registered manager at the time of this inspection. However, the current manager informed us that they were in the process of applying to become registered with the commission and to meet the condition of registration.
- There were clear lines of responsibility across the staff team. Staff understood their roles and responsibilities and received support and training to deliver the level of care and support to meet people's individual needs.
- The manager, deputy and provider had oversight of what was happening in the service. They were visible to staff and people and took an active role in the running of the service.
- The management team understood their role in terms of regulatory requirements. For example, notifications were sent to CQC when required to report incidents that had occurred and required attention.
- Staff felt respected, valued and supported and said they were fairly treated. There was a positive attitude in the staff team with the aim of trying to provide the best care possible for the people living at the service. Morale was good.
- There was good communication between all the staff. Important information about changes in people's care needs was communicated to staff.
- The management and staff worked well together. They engaged with external agencies to develop effective systems to ensure care was delivered safely.

Continuous learning and improving care

- The service had a strong emphasis on teamwork. The manager and staff said this had been particularly important during the pandemic and the lockdowns. The manager told us, "The staff have been amazing, they really worked hard and put in a lot of hours."
- A regular programme of audits were in place and these were used to develop the service further.
- The service used feedback and analysis of accidents, incidents and safeguarding to promote learning and improve care. They also worked in close association with the local surgery and district nurse team.
- The manager told us they had begun a series of workshops with the staff on particular topics such as record keeping and catheter care. These had been well received by staff. They told us, "I have found they respond really well to these workshops as it focuses us all on one particular issue and we can discuss it fully and all learn together."

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

outcomes for people

- We received mostly positive feedback in relation to how the service was run. One family felt that they had not had the level of communication they had wished. We shared this with the manager and were assured this would be addressed.
- People and staff were complimentary of the service, the manager and the deputy. Comments from people included, "I would give them all 5 stars, they are really kind. There are a lot of options for activities but I like my books" and "I love it here they are all so kind. The food is lovely. I have no family so I have decided to stay here as there is always someone to speak to."
- There was a warm, friendly and family atmosphere in the service.
- The provider's systems ensured people received person-centred care which met their needs and reflected their preferences.
- Staff told us they were happy working at the service and morale was good.

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

- The manager demonstrated an open and transparent approach to their role. There were processes in place to help ensure that if people came to harm, relevant people would be informed, in line with the duty of candour requirements.
- Staff confirmed they worked in an environment where learning from incidents and feedback took place to make improvements where possible.
- CQC were notified of all significant events.

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

- Systems were in place to enable people, staff and relatives to give feedback. However, the challenges of the Covid-19 pandemic had limited the service's ability to gather people's views and experiences as they normally would. There had been no surveys or relatives meetings recently. We were assured this would be addressed in the near future.
- Communication between people and staff was good. People confirmed if they needed assistance, it was provided in a timely manner. One staff member said; "It has been a little difficult with so many changes in managers over recent times. Since this manager and the deputy have been here things are better across the board and they have been very supportive. We can get help whenever we need to."
- Staff and people told us the service was well managed and they felt valued. Staff told us the manager and provider were very approachable and always available for advice and support.
- Feedback from relatives was mixed. Two relatives told us "They do a brilliant job here with (Person's name). They are being incredibly well looked after. The lovely lady who does the activities has done their nails again its really lovely" and "They are all very kind, I have no problems at all, other than it is such a long way for me to travel to see him. The staff keep me well informed. I am happy with the care they are receiving, I cannot complain about anything at all." Another told us, "I don't feel I get the information I need at the moment. We live far away and it is difficult to communicate on video or phone with (Person's name). I am reasonably happy but would like more contact with the place about how they are doing." This feedback was shared with the manager and we were assured this would be followed up.

Working in partnership with others

- The manager told us how they had worked alongside the local GP surgery and the local authority during the pandemic, the lockdowns and a recent outbreak of the virus. The manager worked collaboratively with professionals and commissioners to ensure people's needs were met and people had the relevant support and equipment.

- Where changes in people's needs were identified, prompt and appropriate referrals for external professional support were made. These included GPs to provide joined-up care and support. One healthcare professional told us, "Any changes noticed, and they are on it straight away."