

Springfield Rest Home Limited

Springfield House

Inspection report

3-5 Ranelagh Road
Malvern
Worcestershire
WR14 1BQ

Tel: 01684574248

Date of inspection visit:
18 November 2020

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11 December 2020

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

About the service

Springfield House is a residential care home providing personal care and accommodation for up to 21 people aged 65 and over, some of whom live with dementia. At the time of our inspection visit, there were 20 people living at the home.

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

People received their medicines as prescribed by trained staff who regularly had their competencies assessed. Improvements to the safe storage of medication had been made since our last inspection.

Infection prevention measures had been established. Staff had a good understanding of these procedures and confirmed they were provided with sufficient supplies of personal protective equipment [PPE]. Improvements had been made to the environment since our last inspection.

The registered manager had quality assurance systems in place to monitor the overall quality of the service provided to people. These systems had led to improvements in the quality of the service being provided to people.

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.

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 requires improvement (published 07 December 2019).

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about safe care and treatment. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

Targeted inspections 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.

We found no evidence during this inspection that people were at risk of harm from this concern.

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.

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 requires improvement. 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 requires improvement. 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

Springfield House

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about the safety of people living at the home.

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.

Inspection team

The inspection was completed by one inspector on 18 November 2020.

Service and service type

Springfield House is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection visit was unannounced.

What we did before the inspection

We looked at information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse. We sought feedback on the service from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered provider, registered manager, housekeeper and two care staff.

We looked at a range of records. This included multiple medication records. In addition, we looked at a variety of records relating to the management of the service.

After the inspection

The registered manager sent us, additional information as requested in relation to the quality checks, training records and the provider's Covid-19 and infection control policies.

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. 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.

This inspection was to check a specific concern we had about medicine management and safe care and treatment. We will assess all of the key questions at the next comprehensive inspection of the service.

Using medicines safely

- Medicines were received, stored, administered and disposed of safely.
- Staff involved in handling medicines had received recent training around medicines.

Systems and processes to safeguard people from the risk of abuse

- People were supported by trained staff who understood how to protect them from harm.
- Staff knew how to identify abuse and how to raise any concerns.

Assessing risk, safety monitoring and management

- People were encouraged to maintain their independence and receive care and support safely included detailed risk assessments being carried out.
- Measures were put in place to minimise identified risks to people. For example, one person required some assistance from staff when using mobility equipment, so they remained as safe as possible. Risk assessments were reviewed regularly by the management team.
- Staff were able to explain how they minimised risks to people's health and well-being. For example, helping a person with their personal care in a safe way while promoting the person's level of independence

Preventing and controlling infection

- At our last inspection we identified shortfalls in some infection control practices within the home. At this inspection we found improvements had been made to the environment, including new bathrooms and redecoration to some of the communal areas of the home. The registered manager had acted promptly to the threat of Covid-19 which included putting in extra cleaning schedules.
- 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.
- 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.

Learning lessons when things go wrong

- The registered manager had oversight of incidents and accidents in the home and any actions taken so lessons could be learnt. Where learning from events were identified this was shared with the staff team.

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. 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 a specific concern we had about medicine management and safe care and treatment. 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

- The registered manager and staff spoke passionately about people who lived at the home and the importance of providing the best care possible for people.
- Staff members we spoke to told us how following recent staff changes the working atmosphere at the home had improved. One staff member said, "It is now a pleasure to come to work."

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 registered manager understood their responsibilities to meet regulatory requirements and to notify the Care Quality Commission [CQC] and other authorities of certain events.

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

- Staff and management told us they were clear what was expected of their respective roles at the home.
- The management team worked closely with staff to maintain a shared understanding of, and address, any quality issues or new risks at the home.
- The registered manager told us, she worked alongside staff, covering shifts where necessary as she felt it kept her both informed of people's and staff's needs.
- Staff told us, they felt valued and could speak to either the registered manager or team leaders if they needed any support. One staff member told us, [the registered manager's name] is very understanding, she's like a counsellor to staff."

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

- The registered manager and the staff team had tried to keep people in contact with their families and friends throughout the pandemic using newsletters and technology.
- The registered manager and the staff team had received several compliments from relatives for their work during the Covid-19 pandemic. For example, one relative had written, "It is such a comfort to know that you and the team efforts and sacrifices have kept [relative name] safe." Another relative had written, "Thank you

[provider's name] and best regards and sincere thanks for all your actions and commitments to ensure the safety of our loved ones. You are amazing."

Continuous learning and improving care. Working in partnership with others

- The registered manager told us, how staff had been supported with extra training such as Infection control and Covid-19 provided by the local health and social care teams.