

Indigo Care Services Limited

Green Park Care Home

Inspection report

Southwold Crescent
Great Sankey
Warrington
Cheshire
WA5 3JS

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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

Green Park is a 'care home' providing accommodation, nursing and personal care for up to 103 older people; some of whom lived with dementia. At the time of the inspection 69 people were living at the home across four different units.

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

Effective governance and quality assurance measures meant that the provision of care was monitored and helped to improve the quality and safety of care being provided. However, we identified that not all units were at the same consistent standard across the home. We have made a recommendation regarding this.

People received care and support that was centred around their individual care needs. Areas of risk were appropriately assessed; the relevant support measures were put in place and people's overall health and well-being was regularly reviewed. Care records contained updated changes as and when reviews had taken place.

People's care plans and risk assessments contained the most up to date information, which enabled staff to provide a person-centred level of care they needed. People's level of risk was appropriately reviewed, and the correct support measures and monitoring tools were implemented as a way of keeping people safe.

Safe medication management procedures were in place. People received their medicines as prescribed; staff were fully trained and regularly had their competency levels reviewed. Medication audits were regularly carried out, these ensured that safe systems and processes were well maintained, and any areas of improvement were quickly identified.

Although the home was supported by a large number of agency staff, staffing levels were closely monitored, people received the care and support they needed by staff who were familiar with their support needs. Effective recruitment processes were in place; people received support from staff who had been safely recruited and had undergone the appropriate pre-employment checks.

We were assured that infection prevention and control (IPC) measures were appropriately followed. The home was clean, hygienic and well-maintained. Health and safety measures were in place and the provider ensured that all regulatory compliance certificates were in date.

We received positive feedback about the management of the home. Staff and relatives all expressed they were happy with the level of care being provided and loved ones were well cared for. One relative said, "On the whole we are very happy and would recommend this home because of the staff giving such good service, we cannot praise the home enough."

Rating at last inspection and update

The last rating for this service was 'good' (published June2019).

Why we inspected

We carried out an unannounced inspection of this service to follow up on a number of concerns we had received. We found no evidence during this inspection that people were at risk of harm. Please see the safe and well-led sections of this full report.

Our report is only based on the findings in those areas at this inspection. The ratings from the previous comprehensive inspection for the effective, caring and responsive key questions were not looked at during this visit.

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 to calculate the overall rating at this inspection.

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 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 Green Park 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 our 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.

Green Park Care Home

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.

As part of this inspection we looked at the infection prevention and control measures the home had 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 carried out by one inspector, an Expert by Experience and a specialist nurse. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Green 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 both were looked at during this inspection.

The service did not have a manager registered with CQC. 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. At the time of the inspection, an interim manager had been recruited and the appropriate registration paperwork was in the process of being completed.

Notice of inspection

This inspection was unannounced.

What we did before inspection

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

from the local authority who work with the service. The provider was not asked to complete the required 'Provider Information Return'. We took this into account in making our judgements in this report. All the information we reviewed and received helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one person who lived at the home, 11 relatives about their experience of the care provided, five members of staff as well as the interim manager, area manager and quality improvement manager.

We reviewed a range of records. Records included eight people's care records, several medication administrations records and five staff personnel files in relation to recruitment, as well as a variety of records relating to the management and governance of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at audit and governance data, as well as infection prevention and control policies and procedures.

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 'good'. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Safety monitoring, assessment and management of risk was well- established and regularly reviewed as a way of keeping people safe.
- People received care and support that was tailored around their individual support needs. Areas of risk were identified; support measures were put in place and risks were regularly reviewed.
- Assessment of risk and safety management meant that staff were able to provide the most relevant level of care and people were not exposed to unnecessary risk. One person told us, "I was living alone and not coping at all, I was having falls all the time. Here, there are always staff about to keep an eye on me."
- Environmental risk management procedures were in place. The provider ensured that all health and safety measures were complied with and regulatory compliance certificates were provided during the inspection.

Using medicines safely

- Safe medication management procedures were in place. We identified one area of concern in relation to the storage of topical creams, but this was responded to and immediately managed.
- People received their medicines in line with the administration instructions and staff were appropriately trained and regularly had their competency levels checked.
- Medication was routinely ordered, correctly stored and disposed of in line with the providers medication policy.
- Medication care records contained the relevant medication administration information. staff were familiar with individual support needs and risks that needed to be managed.
- Medication audits were routinely carried out and helped to inform improved practice and performance.

Staffing and recruitment

- Staffing levels and recruitment procedures were safely managed
- Although a large proportion of staff were agency staff, they were consistent agency staff and were familiar with people's support needs. Relatives told us, "The whole set up at Green Park is excellent and the staff are fantastic. It is set up like a home from home" and "The staff are excellent, and the care is fantastic."
- A recruitment drive was under way at the home, vacant positions were being filled and staff were safely recruited into their positions. One staff member told us, "I complete [staffing] dependency tools with management, we look at dependencies [of people] and what staff we need."
- Effective pre-employment checks were carried out. Suitable references were obtained, employment histories were established and Disclosure and Barring Service (DBS) checks were completed for all staff.

Preventing and controlling infection

- We were assured that effective infection prevention and control (IPC) procedures were robustly in place.
- We were assured that the provider was promoting safety through hygiene practices of the premises. Additional cleaning scheduled had been implemented and the environment was well maintained.
- Staff were provided with the appropriate personal protective equipment (PPE) and essential COVID-19 policies and guidance was being followed.
- Staff, people living at the home and visitors were all engaged in a COVID-19 testing programme, which helped minimise the risk of transmission.
- Robust IPC visiting arrangements were in place; all visitors were asked to comply with IPC protocols as a measure of keeping people safe.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong.

- People were safeguarded against the risk of abuse and the provider ensured that measures were in place to review and identify where lessons could be learnt.
- Safeguarding and whistleblowing policies were in place; staff were familiar with reporting procedures and told us how they would raise their concerns and the importance of doing so.
- We received positive feedback about the provision of care people received. All relatives told us they believed their loved ones were safe and receiving the care they needed.
- Accident and incident processes were well established. Staff completed the relevant documentation and follow up actions and investigations were completed.

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 'requires improvement'. At this inspection this key question has now 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.

Continuous learning and improving care

- Although quality monitoring and improvements in care had been made since the last inspection, we did note some further areas of governance that needed to be strengthened.
- Mattress setting checks and oral hygiene interventions were being completed on the different units but not always to a consistent standard.

We recommend the provider strengthens audit tools to ensure the quality monitoring and provision of care is consistent across the home.

- A variety of different audits and checks were being completed as a measure of keeping people safe and managing risk. For instance, we saw audits in place for falls, accident/incidents and weight management.
- Staff told us they believed positive changes had taken place at the service. One staff member said, "[Area manager] is one of the best managers who has managed here. Things have turned a corner."

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

- A positive, person-centred culture had been created at the home; we observed people being provided with a good level of care. One staff member told us, "This (home) is amazing, residents have choices and receive personal care."
- People received person-centred care that was tailored around their support needs and areas of risk. Staff told us the electronic care record system contained all the information they needed and helped them to develop positive relationships with people they were caring for. One relative told us, "My [relative] is always dressed beautifully and always has her make up on and her nails manicured and varnished because she was like that at home."
- People appeared happy and content living at Green Park. One person told us, "The staff are really good; I cannot say a bad word about them [staff]. The staff help me wash and dress and always treat me with dignity."

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

- Managers and the staff team understood the importance of their roles, ensured risks were managed and complied with regulatory requirements.
- The provider ensured there were effective measures in place to monitor quality performance and ensure

people received a good level of care.

- Regulatory requirements were complied with; previous historical risks have been well managed, and improvements have meant that people were receiving a good level of care.
- An electronic care record system meant that risks were consistently reviewed, staff were able to identify and respond to any concerns and people received care and support in a timely and effective manner. One relative told us, "I was involved with a change of care plan when my [relative] had to move units as her care needs increased."

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 provider understood duty of candour responsibilities and ensured legal and regulatory duties were complied with.
- The provider maintained open and transparent lines of communication with people, relatives, CQC and the local authority accordingly. One relative told us, "They [staff] always phone me and tell me when things happen."
- Accidents, incidents and safeguarding's were appropriately responded to. Recording systems were in place, trends were established, and investigations were completed when needed.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff, relatives and people were involved and included in the provision of care being delivered. Partnership work was well established and people received a holistic level of care from other healthcare professionals when needed.
- Good levels of effective communication were established across the home. Staff meetings, daily handovers and 'flash' meetings supported the lines of communication between the staff and management team. Staff felt supported and valued working at the home. One staff member said, "Yes (I receive) lots of support, they listen to my ideas."
- Although the pandemic had limited the amount of engagement that could take place between relatives, they all told us that levels of communication had been 'excellent'. Relatives told us, "Every member of the family received a face time call on Christmas day which was lovely" and "Once a month we are phoned and updated about [relatives] condition."
- No recent satisfaction surveys had been circulated. However, 'suggestion' boxes were available and 'you said, we did' posters were visible throughout the home.