

Castlegrounds Limited

Red Court Care Home & The Grove Care Home - Pudsey

Inspection report

Chapelton
Pudsey
Leeds
West Yorkshire
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Date of inspection visit:

06 October 2020

09 October 2020

12 October 2020

14 October 2020

19 October 2020

21 October 2020

26 October 2020

Date of publication:

29 December 2020

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

Red Court Care Home & The Grove Care Home - Pudsey provides personal care across these two separate buildings for a maximum of 103 older people, some of whom are living with dementia. At the time of our inspection there were 79 people living at the service.

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

People felt safe and were treated with kindness and compassion. Risks associated with people's care needs and the environment had been assessed and staff were provided with information on how to support people safely. Some risk management plans needed to be more detailed.

Overall, people's medicines were managed safely and stored securely. We noted some minor improvements to records were needed and the registered manager addressed these at the time of our visit. There were enough staff on duty to meet people's needs. Staff had received training and support to enable them to carry out their role safely. People were protected from abuse by staff who had received training and were confident in raising concerns. There was a safe recruitment process in place to check staff were suitable to work with people who may be vulnerable.

The premises were very clean and well maintained. 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. People had access to the equipment they needed. The gardens were attractive and accessible and there was garden furniture for people to use in the better weather.

People and relatives had confidence in the registered manager and management team. They told us the service was well managed. Staff were positive about the management team and the registered manager demonstrated good knowledge of people's needs. They showed a commitment for providing a person-centred quality service. Audits and monitoring procedures were used effectively to monitor the service and to make improvements. When accidents or incidents occurred, learning was identified to reduce the risk of them happening again.

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 (published 20 December 2017).

Why we inspected

The inspection was prompted in part due to concerns we had regarding the number of falls people had experienced in the service and wanted to be assured these were managed and responded to appropriately. We therefore carried out a focused inspection to review the key questions of safe and well-led only.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Red Court Care Home & The Grove Care Home – Pudsey 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. 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.

Red Court Care Home & The Grove Care Home - Pudsey

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.

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 carried out by two inspectors, a medicines inspector, a specialist advisor in governance and an Expert by Experience. 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

Red Court Care Home & The Grove Care Home – Pudsey 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 service is run and for the quality and safety of the care provided.

Notice of inspection

We gave short notice of the inspection. Due to the COVID-19 pandemic we wanted to review documentation remotely and also make arrangements to speak with people, relatives and staff by telephone after our site visit. This helped minimise the time we spent in face to face contact with the registered manager, staff and

people who used the service.

Inspection activity started on 6 October 2020 and ended on 26 October 2020 We visited the service on 6 and 7 October 2020.

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

During the inspection

We spoke face to face with two people who used the service and by telephone with seven people who used the service and nine relatives about their experience of the care provided. We spoke face to face with the registered manager, two deputy managers, one member of care staff, the senior housekeeper and an agency staff member. We spoke by telephone with five members of care staff and a domestic assistant. We received feedback by e mail from a health professional. We spent time observing the care and support people received. We reviewed 14 people's medicines records.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

After the inspection

We reviewed a range of records. We reviewed most of the documentation remotely by asking the registered manager to send us key information before and after our site visit. This included people's care records. We looked at staff records in relation to recruitment and reviewed the staff training overview. A variety of records relating to the management of the service, including audits, policies and procedures were also reviewed.

We continued to seek clarification by telephone from the registered manager to validate evidence found.

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 the same. This meant people were safe and protected from avoidable harm.

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

- People had their needs assessed prior to moving into the service. Risk management plans guided staff on how to support and protect people whilst minimising any restrictions placed upon them. For example, people who were at risk of falls had equipment in place to reduce falls.
- Staff had a good understanding and knowledge of the needs of the people they supported. We saw good, safe moving and handling practice. However, one person's risk management plan relating to falls prevention and safe mobility needed updating. The registered manager took immediate action to address this.
- A range of other risk assessments were in place which covered areas such as skin integrity, choking and mobility. Overall, these were clear and gave staff specific instructions on how to support people safely.
- Regular checks were undertaken on the fire alarm system and firefighting equipment in the service. Staff received training in fire safety awareness.
- Accidents and incidents were analysed on a monthly basis to see if improvements could be made to keep people safe. For example, the introduction of sensor equipment to prevent falls. Events were audited by the registered manager to identify any patterns or trends which could be addressed, and subsequently reduce any apparent risks.

Using medicines safely

- Peoples medicines were mostly managed safely. However, medicines related records were not always completed. Thickeners used to thicken fluids for people with swallowing problems were not recorded when they had been used. Documentation was not always available to support staff to give people their medicines according to their preferences. The registered manager took immediate action to rectify these matters.
- As and when required medicines (PRN) and variable dose medicines were managed safely. Accurate records were made of their use.
- Temperature records to ensure the safe storage of medicines were completed daily in accordance with national guidance.
- There were appropriate arrangements in place for the management of controlled drugs (medicines that require extra checks and special storage arrangements because of the potential for abuse).
- Staff administered medicines in a compassionate way and were competent for this role. People were given their medicines at the right time.
- The registered manager and members of staff qualified to handle medicines regularly completed audits (checks) to make sure that procedures were followed, any issues identified had been acted upon and improvements made.

Staffing and recruitment

- Overall, people were protected by safe recruitment processes. Pre-employment checks were completed

before a new member of staff commenced work. One staff member's records indicated the registered manager had not followed their policy of gaining a reference from the last employer. The registered manager confirmed this had been an error and took immediate steps to remedy this.

- People we spoke with felt there were enough staff on duty, most of the time to support them and keep them safe. One person said, "Plenty (of staff); it's okay they come when I need them." Others said there were occasional times they had to wait for support if the home was short staffed. Most relatives told us they had no concerns about staffing levels.
- Staff said overall, they had enough staff to meet people's needs and ensure people's choices on routines such as when to get up or go to bed.
- Call bells were answered promptly and people received prompt responses to any requests for assistance.

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.
- We were, in the main, 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.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of avoidable harm and there were good systems in place to safeguard people from abuse. Without exception, all people and relatives we spoke with told us they or their family members were safe and well cared for. Comments we received included; "Definitely safe, they just look after you. Definitely respect dignity, they make sure that they shut the door to my room" and "Definitely (safe) no problems what so ever. I feel [family member] is well looked after."
- Staff interactions were positive, and kind. We discussed some minor areas for improvement with regards to supporting people to make choices with the registered manager. The registered manager said they would address this with the staff team.
- A health professional told us, "The care given to residents is individual to their needs and responsive to any health decline." They were confident people were treated with respect and dignity.
- The registered manager was aware of their responsibility to liaise with the local authority about safeguarding issues, and where any concerns had been raised, these had been managed well.
- Staff were trained in safeguarding and understood how to identify abuse and report concerns.

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 the same. 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; 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 and management team carried out a range of quality assurance audits to monitor and improve standards. This included care records, medicines, clinical risks and cleanliness. Remedial action was taken when audits identified issues. For example, increasing the number of hand gel stations in the home.
- The management and staff structure provided clear lines of accountability and staff were clear about their role and what was expected from them. Staff said communication and teamwork were effective.
- The registered manager was aware of the duty of candour and their legal responsibility to be open and honest. They sent us notifications in relation to significant events that had occurred in the service.
- Relatives had confidence in the registered manager and management team. They told us the service was well managed. One relative said, "Yes both managers have been on the ball from what I can see; very approachable and on first name terms." Another relative said, "They are lovely and approachable. They are normal, I can talk to them."

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

- The registered manager understood and knew people's needs well. They showed they were committed to providing good quality care and promoted a person-centred culture. They had ensured there was a good variety of activity for people, that was tailored to meet people's needs during the current COVID-19 pandemic.
- Relatives told us they were very pleased with the service their family members received. One relative said, "I have experience of a couple of care homes, this is by far the best. [Family member] has received excellent care in the two years they have been there."
- Most people told us they knew who the registered manager was, and they frequently had contact with them. The registered manager demonstrated an honest and positive approach. They made Improvements to the service when these were identified as needed.
- Concerns and complaints were listened to and acted upon to help improve the services provided.
- Staff spoke about their work and the service with pride and enthusiasm. They said they felt they were supported well.

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

characteristics; Working in partnership with others

- The registered manager sought feedback to help maintain and improve standards at the service. Surveys were undertaken which indicated a high degree of satisfaction with the service.
- Regular staff meetings, supervisions and daily handovers were held to ensure important information was shared. Staff told us they felt valued. They said they felt confident to make any suggestions or raise new ideas.
- The registered manager and staff worked effectively with partner agencies. They had developed positive working relationships with other health and social care professionals which meant advice and support could be accessed as required. A health professional told us, "I would like to take this opportunity to say how well led the management and care staff have been and dealt with the current pandemic and the effect it has had on both the residents and staff." They described care at the service as "Excellent patient centred dementia care."