

Chestnuts (Arnesby) Limited

Queens Park Care Home

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

Queens Park Care Home provides care and support for up to sixteen people with a learning disability and autistic people. Some of whom have additional needs relating to mental health and/or physical disability in an adapted building. At the time of our inspection there were fifteen people using the service.

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

We have made a recommendation about updating practice with regards to working with people with a learning disability and autistic people.

Staff treated people with kindness, dignity and respect. We observed positive interactions between people and staff, and feedback from people about staff relationships were good. One relative told us, "Even during [COVID-19] lockdown, it was so nice [they] were with the staff and [their] friends at Queens Park Care Home. I am delighted at how the care staff talk to [them] and the respect that they show [them]."

People told us they liked living at the service and they were happy. They told us staff were nice to them and supported them to make choices, to access health services and take part in activities.

People were safe as they were supported by staff who understood about the risks of COVID-19 and had abuse awareness. Staff understood how to report concerns to keep people safe and where to go for additional advice.

There were enough staff. People and their families told us they received the care they required. Staff recruitment procedures ensured that appropriate pre-employment checks were carried out.

The service was clean, tidy, and staff followed infection control procedures.

People were supported safely to manage their medicines and health conditions. Storage and administration of medicines was safe, and staff had received training in this area.

Relatives told us staff communicated with them, however some relatives reported they had wanted more communication from staff during the COVID-19 pandemic than what they received. People and relatives were both happy and confident to speak with the registered manager or staff team if they had any concerns.

Audits and checks were in place to find and act on any areas for improvement. Staff felt well supported by the management team.

The management notified Care Quality Commission (CQC) of specific events, as and when required.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for

granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of safe and well-led; the service was able to demonstrate how they were meeting some of the underpinning principles of Right support, right care, right culture.

People told us staff treated them well and they were able to do what they wanted to do. Relatives also told us that staff always treated their family member with respect and kindness.

The needs and quality of life of people formed the basis of the culture at the service. Staff understood their role in making sure that people were always put first. We observed people receiving care that was genuinely person centred. However, improvements were needed regarding the use of appropriate language on care planning documents, to ensure good practice was followed and understood by staff.

The leadership of the service had worked hard to create a learning culture. Staff felt valued and empowered to suggest improvements and question poor practice. There was a transparent and open and honest culture between people, those important to them, staff and leaders. Staff felt confident to raise concerns and complaints and were passionate to improve outcomes for people.

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 11 January 2021).

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

This was a planned inspection based on the previous rating.

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 COVID-19 and other infection outbreaks effectively.

We received concerns in relation to staffing levels. As a result, we undertook 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.

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 Queens

Park Care Home on our website at www.cqc.org.uk.

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.

Queens 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 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 one inspector 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.

Queens Park Care Home 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

This inspection was unannounced.

What we did before the 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. We sought feedback from the local authority and professionals who work with the service, including 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.

During the inspection

We spoke with five people who used the service and seven relatives about their experience of the care provided. We spoke with five members of staff including the provider, registered manager and care workers.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance 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 requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had not ensured people received safe care and treatment. 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.

- People were protected from risks associated with their care and support. Risk assessments documented the risks that were present in people's lives and enabled staff to work safely with people. Detailed assessments of people's needs, such as communication, skin care, nutrition and medication were in place for people.
- Risk assessments were regularly reviewed by staff who understood and followed risk assessments appropriately. A relative told us, "I feel [they] are safe here because if [they] are poorly, say [they] has had a seizure, [staff] contact me and keep me informed on how things are going." The registered manager completed regular audits of risks and monitored practice to ensure staff understood how to keep people safe.
- Training records informed us not all staff had received training in how to manage people's emotional distress in the least restrictive way. The registered manager and provider were signposted to the Restraint Reduction Network (RRN) for information on training for its staff, in line with the new RRN standards.
- Care plans in relation to people's emotional distress contained explanations of the control measures for staff to follow to keep people safe, however some of the language contained within these was not in line with current best practice.
- We recommend the provider consider current guidance on the use of appropriate language when working with people with learning disabilities and autistic people and take action to update their practice accordingly.

Staffing and recruitment

- Our observations during inspection were that enough staff were on shift to respond to people's needs. Staff told us staffing levels had improved and the service was less reliant on agency care staff to deliver people's care. A relative told us, "I call in at random times and there's always enough staff around even at weekends."
- Dependency assessments for people were being completed monthly by care staff, however some scores in

relation to specific needs did not always reflect the information in people's care plans. This was shared with the provider and registered manager after the site inspection for them to review.

- The provider had safe staff recruitment checks in place. This meant checks were carried out before employment to make sure staff had the right character and experience for the role.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems in place to safeguard people from abuse including safeguarding and whistleblowing policies and procedures.
- Staff had confidence the registered manager would deal with any concerns raised and they were aware of the external organisations they could report potential abuse to, which included social services, the police and the CQC.

Preventing and controlling infection

- The service was clean and well maintained, however during our inspection we saw some cleanliness issues. We raised this with the registered manager who resolved the issues immediately.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

We have also signposted the provider to resources to develop their approach.

Using medicines safely

- Systems to manage and administer medicines continued to be safe. Medicine administration records (MAR) were accurately completed, and details around people's specific needs with medicines, were documented and reviewed.
- Regular medicine audits ensured any errors in recording or managing medicines would be quickly identified and corrected. The provider had plans to further safeguard staff practice for people by trialling an electronic MAR system at the service.

Learning lessons when things go wrong

- Lessons were learned following incidents and accidents. Incidents and accidents were recorded and reported, where necessary, to the appropriate authorities.
- The registered manager reviewed incident and accident data to identify any themes or trends, and actions were taken to make improvements. Learning points were shared through team meetings by the registered manager.

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; Continuous learning and improving care

At our last inspection the provider failed to ensure effective systems and processes were in place to assess, monitor and improve the service. This was a breach of regulation 17 (Good governance) 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 17.

- The management structure was clear which ensured everyone understood their roles and responsibilities. Staff told us they were well supported by management. One staff member said, "Brilliant the [provider], as they listen to staff, as does the manager." Another staff member said, "I enjoy every single day, I love this job as I love to care for people. It feels like a big family, as people have their voices heard here."
- Quality assurance systems were effective; any shortfalls were picked up and addressed. The registered manager conducted regular checks and audits throughout the service.
- Following the last inspection the provider had implemented a refurbishment programme in the service. This included replacement of kitchen appliances and improvements to the outdoor space. In addition, decoration of the living room, dining room and new furniture. Further improvements were planned by the provider to personalise people's rooms with their involvement and enhance people's living spaces at Queen's Park Care Home.

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

- We saw that staff understood people well and communicated with them in a way they could understand.
- Staff told us they felt able to get to know people and achieve good outcomes with them. Relatives told us their loved ones were happy and looked after well by staff at Queens Park Care Home. One relative told us, "We have been very impressed with the care that they give to [our relative] and the consideration they show [our relative]."
- There was detailed guidance for staff on people's individual communication needs and what specific phrases or gestures might mean. This helped staff support people by using a personalised approach, understand how to respond to people and prevent them becoming frustrated. We also saw how staff reacted quickly when there were signs of people becoming anxious.

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

- People were given weekly updates with their chosen keyworkers to ensure they were receiving the care and treatment they wanted and that it reflected their identity and personality.
- Families were able to feedback verbally, through reviews, telephone calls, visits to the service and via surveys and questionnaires. However, they gave us mixed feedback on communication with staff at the service. One person told us, "The manager and the staff are approachable, they were little less so during the [COVID-19] pandemic, but who can blame them they must've been rushed off their feet."
- The registered manager told us communication between previous the management team and families was not of a high standard, but staff and managers were working hard to improve this.
- Team meetings were used to share information with staff and allow staff to feedback. We saw minutes of meetings to confirm these took place, and staff told us they were comfortable to speak up within this forum. Staff told us information was sufficiently handed over to them every time they started a shift. Although one member of the night staff had said they had not always seen the minutes from these meetings.

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 fulfilled their legal obligations to notify the CQC of serious incidents involving people living at the home.
- The registered manager was aware of, and had systems in place, to ensure compliance with duty of candour responsibilities. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- The management team were open and honest during our inspection and took swift action to resolve issues, including providing evidence these had been actioned.

Working in partnership with others

- Management and staff worked in partnership with other health and social care professionals to ensure people's care needs were met. People and their families told us they received the healthcare they required, and staff had a good knowledge of people's needs, and when to seek support from outside professionals.