

Park Vista Care Homes Limited

# Park Vista Care Home

## Inspection report

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Cambridgeshire  
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Tel: 01733555110

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

About the service: Park Vista Care Home is registered to provide nursing and personal care and accommodation for up to 59 people. At the time of the inspection there were 54 people living in the service.

People's experience of using this service:

People felt safe living at the service. Risk assessments ensured that action was taken to keep people safe. Staffing levels meant that people were safe and they received their care in a timely manner. People received their medication as prescribed. There were systems in place to record, monitor and learn from accidents and incidents.

Staff had the knowledge, skills and support they required to meet people's needs effectively. However, they would benefit from specific training about people's health conditions. People's physical, emotional and social needs were identified so staff could meet these. People received support with eating and drinking when needed. People were supported to maintain good health and were supported by, or referred to, the relevant healthcare professionals.

People received care and support from staff that were kind and caring. People's privacy and dignity was protected and promoted. Staff knew people well and what made them happy. People received person centred care that met their needs. Care plans were detailed so that staff knew people's preferences and how people would like to be supported. Activities were provided according to people's interests and hobbies. People knew how to make a complaint if needed.

People's views had been sought in the running of the service. The provider and registered manager had worked hard to identify and make improvements to the service.

Rating at last inspection: Requires Improvement (report published January 2018)

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor information we receive about the service until we return to visit as scheduled in our re-inspection programme. If we receive any concerning information we may inspect sooner.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://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 effective?

Good ●

The service was Effective.

Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

# Park Vista 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was unannounced and was carried out by two inspectors.

Service and service type:

Park Vista Care home is a 'care home'. People in care homes receive accommodation, nursing and/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 the 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.

What we did:

Before the inspection we reviewed all the information that we have in relation to this service. This included notifications. A notification is information about important events which the provider is required to send us by law. We also reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make

During our inspection we observed how the staff interacted with people and how people were supported. We spoke with seven people, four relatives, the registered manager, two representatives of the provider, a health and safety officer and three members of staff. We looked at five people's care and support records. We viewed records relating to the management of the service. These included quality audits, medication records and incident and accident records.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- We identified a breach of regulation at the previous inspection which meant that safeguarding concerns had not always been reported or investigated appropriately. Improvements had been made. Any concerns had been reported to the local authority, investigated and any action taken as necessary.
- People who lived at the service told us they felt safe. One person told us, "I do feel safe and comfortable here, the staff are all very kind and do their best. I trust them."
- The provider had effective safeguarding systems in place and staff understood what to do to protect people from harm and how to report concerns.
- The registered manager and staff had provided an information session to people living in the service informing them what abuse was and how they could report it.

Assessing risk, safety monitoring and management

- We identified a breach of regulation at the previous inspection which meant that not all risks to people's health and welfare had been identified and action had not always been taken to reduce risks. The necessary improvements had been made.
- Staff understood when people needed support to reduce the risk of avoidable harm. Assessments identified risks and the action for staff to take to keep people safe. Records used to monitor risks such as people's food and drink intake, or regular repositioning to avoid pressure areas, were consistently completed and monitored.
- The registered manager assessed risks to people's health and welfare such as moving and handling, choking and falls.
- Each person had a personal emergency evacuation plan in place, so that they could be safely evacuated from the building in the case of an emergency.

Using medicines safely

- We identified a breach of regulation at the previous inspection which meant that people did not always receive their medication as prescribed. The registered manager had made the necessary improvements.
- People confirmed that they were given their medication at regular times by the staff. One person told us, "Staff give me my [medicine] after breakfast and have never forgotten it."
- There were systems in place to ensure that medication was ordered, administered, recorded and disposed on in a safe manner.
- Comprehensive protocols were in place to inform staff when as required medication should be administered to people.
- Records of creams that were prescribed were completed appropriately.
- Staff have received training and completed competency checks before administering medication.

#### Staffing and recruitment

- Staff were employed after the required pre-employment information and checks were obtained. People could therefore be assured newly employed staff were suitable for the role.
- People and their visitors told us that they received care and support in a timely way.
- People's needs determined the staffing levels. There were enough staff to ensure that people were safe. Staff confirmed that they had time to carry out their roles.
- The registered manager said that when people's needs changed the staffing levels were adjusted. This meant that people's needs were still met in a timely manner.

#### Preventing and controlling infection

- The service was clean, tidy, and free of unpleasant odours.
- The housekeeping staff were very knowledgeable about the procedures for the prevention and control of infections.
- Staff had completed training in how to reduce the risk of infection and followed good practice guidance.
- There was a good supply of gloves and other protective equipment to reduce the risk of infection and we saw staff used this correctly.

#### Learning lessons when things go wrong

- Staff followed the providers procedures when any accidents or incidents occurred.
- The registered manager used learning from accidents or incidents and shared lessons learnt with the staff team. For example, the plugs on the pressure mats had been changed to ensure they worked more effectively.

# 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

Good: People's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs had been assessed prior to admission in line with legislation and up to date guidance. This enabled the registered manager to make sure they had enough staff with the right skills.
- Staff knew people well and the care plans contained information about people's needs.

Staff support: induction, training, skills and experience

- We identified a breach of regulation at the previous inspection which meant that staff did not always receive the support they required to carry out their role effectively. The registered manager had made the necessary improvements.
- Staff had received training when they first started working at the service and this was updated as necessary. New staff shadowed experienced staff until they were confident to work alone and had been deemed competent.
- People and relatives told us that staff knew how to care for people and knew how to use equipment.
- Staff told us they felt supported and received regular supervisions and an annual appraisal where they could discuss any training requests or issues they may have. Staff also confirmed that they could speak to the registered manager or the provider at any time.
- The registered manager told us that they were trying to create an atmosphere where staff could approach them at any time if they had any concerns or questions. We saw that this was the case during the inspection.

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

- People had choice and access to enough food and drink throughout the day. People told us they enjoyed their food. One person said, "I like the food and you can ask for more if you want. I love ice cream and staff bring me it whenever I ask."
- When needed people received support with eating and drinking at a pace that suited them. Staff were aware of people's dietary needs. They monitored people's food and fluid intake to make sure it was sufficient to maintain a healthy weight.
- The chef was aware of people's likes and dislikes and helped to serve the meals so they could see what people enjoyed and consider feedback for future menus.
- Specialist diets such as pureed foods were presented in a way so that the person got to taste the individual flavours rather than blending it all together.
- Where people preferred, staff provided them with finger food that they could eat when they wanted to.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff supported people to attend appointments with health professionals such as GPs, dentists,

chiropodist, opticians and hospital consultants.

- One relative told us, "[Family member] gets the helps she needs, and generally I'm very happy with the care. She sees the GP and chiropodist regularly. Staff ring me as soon as mum feels unwell and if there has been a GP visit."
- Staff told ensured people had the support they needed if healthcare was required and they made referrals when necessary.
- The registered manager worked closely with other professionals to ensure people received effective care and made sure any advice received was used to improve their care.

Adapting service, design, decoration to meet people's needs

- The premises were decorated to a high standard and people had many personal belongings in their rooms to help them to feel it was their home.
- The premises had enough amenities, such as bathrooms and communal areas, to ensure people were supported easily.
- Regular maintenance of systems and equipment was carried out to ensure it was in good working order.
- The corridors would benefit from being decorated with interesting objects and pictures for people to enjoy as they walked up and down them.

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 with appropriate legal authority. In care homes, 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- Where needed, DoLS had been applied for to ensure that people were kept safe.
- Staff ensured that people and/or their relatives were involved in decisions about their care.
- Where people were assessed as lacking capacity to make a certain decision, staff worked in their best interest.
- One staff member told us all about the MCA and the principles that had to be considered when assessing a person's capacity to make a decision. They had also shared their knowledge with other staff.
- We saw staff always gained people's consent before carrying out any support and assisted people to make day to day decisions as much as possible.



# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

Good: People were supported and treated with dignity and respect; and involved as partners in their care. Ensuring people are well treated and supported; respecting equality and diversity

- People were treated with kindness and we saw warm interactions with staff. People and their relatives were positive about the staff's caring attitude. Staff handed out drinks to people and made comments such as, "You look lovely today ladies." Another person told us, "I like that staff know me and they always shout 'hello [name]' when they pass my room."
- There was a very caring and friendly atmosphere between staff and people using the service. Staff clearly knew people very well and told us about individuals and their lives and families. This enabled them to engage well with people, and we saw them chatting, which increased people's sense of well-being. One relative told us, "Staff do a wonderful job."
- People told us that staff knew their preferences and used this to care for them in the way they liked.
- Staff enjoyed working in the service and were motivated to provide a kind, caring, and good quality service.

Supporting people to express their views and be involved in making decisions about their care

- Meetings were held so that people could give their views about the care and support they were receiving. People's views were considered and actions were taken in respect of their requests.
- Staff supported people to make decisions about their care. Decisions were recorded in their care plans such as when they liked to get up and go to bed and what they enjoyed eating and drinking.
- Staff signposted people and their relatives to sources of advice, support and advocacy.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect. Staff knocked on people's doors before entering their rooms.
- People were supported to maintain and develop relationships with those close to them.
- One person's care plan included important information that sometimes they just liked to be left alone and when they were ready they would talk to staff about how they were feeling.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: ☐ People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- We identified a breach of regulation during the previous inspection that meant that people's care plans were not always in place, accurate, or included information about people's preferences. The necessary improvements had been made.
- People were supported by staff who had a good understanding of their care and support needs and their personal preferences. This enabled them to provide personalised care tailored to the needs and wishes of the individual.
- People's care plans contained information for staff on how best to support them with personal care, eating and drinking, medicines and other day to day activities. They also included detailed information about their health needs, how these were being checked, and appointments with healthcare professionals.
- Care plans included people's goals and aspirations.. The registered manager had plans to have a wish tree for people to put their wishes on and then staff would arrange for their wishes to be carried out.
- People and/or their families had signed their care plans to say they agreed with what had been written. People and/or their families were also invited to review the care plans on a regular basis.
- People had access to a range of group activities such as games, entertainers, craft sessions and trips out. One to one sessions with staff also took place for those people who did not want to join in with the group sessions, or were cared for in bed.
- We saw people enjoying playing games such as skittles and hoopla. Others were enjoying colouring in some pictures and taking great pride in their work.
- One family told us how the registered manager and clinical lead had taken time to explain about their relative's dementia and how it had advanced. They said that this had given them a lot of comfort and helped them to come to terms with it and know how to respond when their relative was confused. We heard the registered manager explaining about support groups to the family.

Improving care quality in response to complaints or concerns

- The complaints procedure was displayed near the registered manager's office. The records showed that complaints had been investigated in line with the complaints procedure.
- The management team took complaints seriously, investigated and provided a timely response.
- The registered manager also asked people in meetings if they thought the service was providing a safe, effective, caring and responsive service and if the team was well led.
- One person told us that they could, "Speak their mind to staff" and they knew who the registered manager was and they felt confident they could raise any concerns with them if needed.
- One relative told us that they had raised a minor concern with the registered manager and it had been resolved immediately. Another relative told us, "I've seen improvement in the last couple of years, and there seems to be good communication between staff and [registered manager]. I have raised several issues

about [family members] care with him and they usually get resolved quickly."

#### End of life care and support

- The registered manager stated that he thought the service was very good at supporting people and their families at the end of life.
- If relatives wanted to stay over they were given somewhere to stay and a hamper of items to make their time more comfortable such as toiletries and snacks. They were also provided food and drinks during their time at the home.
- The staff worked with the local GP to ensure that medication was provided so that people could be free from pain and comfortable.
- One staff member told us, "We have end of life plans and anticipatory medicines in place for all who need them. It's also really important that we support relatives too as it can be very difficult for them, I always make time for them."

# 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

Good: ☐ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- We identified a breach of regulation at our previous inspection that meant that the systems in place to check the quality of the care being provided were not effective. Records were not accurate and up to date. The necessary improvements had been made.
- The provider, registered manager and staff had worked hard since the last inspection to make the required improvements so that people received a better-quality service.
- The provider was aware of the duty of candour responsibilities and ensured, where needed, information was shared with the relevant people.
- The registered manager said they had worked hard to build a team of quality staff who were also committed to making improvements and providing a good quality service.
- The provider and registered manager had carried out detailed quality assurance visits and audits with clear action plans that had brought about improvements.

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

- The service was well-run. Staff understood their roles and responsibilities and told us that they worked well as a team. One member of staff told us, "[Registered manager] does not treat us with superiority and always makes time for me if I need it."
- The registered manager was clear about their responsibilities for reporting to the CQC and the regulatory requirements.
- Audits were completed on a wide range of areas within the home. Action plans showed who was responsible for the actions and when they had been completed.
- Information from analysis of incidents and accident accidents, feedback from people and their relatives, and complaints were used to continually improve the service being offered.
- Meetings were held for people and/or their relatives to attend to give feedback on the service.
- Surveys were given out to people and/or their families asking them to rate the service. A report was written to collate the findings. The latest survey showed that 93% of people felt that Park Vista Care Home gave them a better quality of life.

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

- People were involved in day to day issues at the service. The manager regularly worked with people so they could see how people were and observe staff practice.

- The service had good links with the local community and key organisations.

Continuous learning and improving care; Working in partnership with other agencies

- The service had an open and transparent culture, where constructive criticism was encouraged. The provider, managers and staff were enthusiastic and committed to further improving the service delivered for the benefits of people using it. One member of staff told us, "My interview was thorough and [the provider] was very honest with me about the last inspection report and what needed to be done to improve the home."
- The registered manager had an action plan to take forward improvements to the service based on feedback they gained from a variety of sources and the findings from quality audits.
- One staff member told us, "There are regular staff meetings where we can raise our concerns and ideas. I do feel my opinion matters."
- The service worked well in partnership with health and social care professionals who were involved in people's care.