

# Parfen Limited Sunnyside Residential Home

## **Inspection report**

Adelaide Street Bolton Lancashire BL3 3NY

Tel: 01204653694 Website: www.sunnysideresidentialhome.com Date of inspection visit: 14 August 2020 21 August 2020

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## Ratings

## Overall rating for this service

Inspected but not rated

Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

### About the service

Sunnyside is a care home for up to 27 older people over two floors. The home is situated about two miles away from Bolton town centre. At the time of the inspection there were 23 people using the service.

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

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.

Improvements had been made around the storage of products and cleaning materials. These were all stored safely and securely within the home. Confidential records were stored securely.

Care plan records had improved and were complete and up to date. People's weights and food and fluid intake were recorded where a risk had been identified in this area. The records were audited and any issues identified were followed up with appropriate actions.

The home was clean and tidy and appropriate cleaning schedules were followed. Extra support had been given around the Covid-19 pandemic and staff used Personal Protective Equipment (PPE) as required.

Governance systems had improved and quality assurance audits were in place. Records around environmental and health and safety monitoring were complete and up to date.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

## Rating at last inspection and update

The last rating for this service was requires improvement (published 16 August 2019) and there were breaches of regulations with regard to safe care and treatment and good governance. The provider was issued with a warning notice and 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 requirements of the warning notice had been met. The service was no longer in breach of regulations.

### Why we inspected

We undertook this targeted inspection to check whether the warning notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. We found the requirements of the warning notice had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on warning notices or to check specific concerns. They 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.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Inspected but not rated
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.	
Is the service well-led?	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.	



# Sunnyside Residential Home

**Detailed findings** 

# Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the warning notice in relation to Regulation 17 (Good governance), of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Inspection team The inspection was completed by two inspectors.

#### Service and service type

Sunnyside Residential 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

We gave a short period notice of the inspection. This was due to the Covid-19 pandemic to ensure we had prior information to promote safety.

#### 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the

service. We used all this information to plan our inspection.

We asked the service to supply some information prior to the inspection to minimize the length of time inspectors would spend on the premises. This was because of the Covid-19 pandemic, to help ensure people's safety.

### During the inspection

We spoke with three people who used the service. We spoke with five members of staff including the registered manager, two senior carers, an activities/care staff and a cleaner.

### After the inspection

We continued to seek clarification from the provider 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. 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.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- Some new water systems had been put in place and water temperatures were taken regularly and any issues identified and addressed promptly.
- Fire equipment checks and tests were completed regularly and logged.
- Confidential records were locked in an office and cleaning materials were safely stored in a locked cupboard.
- Individual risk assessments were completed, reviewed and updated as required.

Using medicines safely

• Food and fluid thickening agents and topical creams were all stored safely.

Preventing and controlling infection

How well are people protected by the prevention and control of infection?

- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

## 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

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Continuous learning and improving care

- Quality monitoring and governance systems were now being operated effectively.
- Audits were completed regularly and any issues addressed with actions. Health and safety checks were in place and records were completed accurately.
- Confidential documents were now stored securely.
- People's care plans and risk assessments were complete and up to date.

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

• The registered manager and deputy manager were working through an improvement plan, and had improved systems within the home to help ensure better care provision.

• More robust safety and quality monitoring processes had been implemented.