

Prestige Care (Roseville) LTD

Roseville Care Centre

Inspection report

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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 effective?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Roseville Care Centre is a residential care home providing personal and nursing care to 87 people aged 65 and over at the time of the inspection. The service can support up to 103 people across five areas, each of which has separate adapted facilities. One of the wings specialises in providing care to people living with dementia. Another area was being developed to care for people who were isolating due to COVID-19.

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

Medicines were not always managed safely.

Effective infection prevention and control systems were in place. One relative told us, "We met [relative] in reception, [relative] sat at one side and I was at the other. We had to wear masks and wash our hands. They have done a good job of keeping everyone safe."

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; however, the policies and systems in the service did not always support this practice. Records relating to people's capacity to make decisions was not always in place or completed correctly.

Quality assurances processes were in place but had not identified or resolved all of the issues we found during our inspection. Some records were not up to date or accurate.

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 22 May 2019) and there was one breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection enough improvement had not been made/ sustained and the provider was still in breach of regulation.

Why we inspected

We undertook this targeted inspection to check whether the breach of regulation and other concerns identified at the last inspection had been addressed. 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.

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.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection.

We have identified continuing breaches of regulation in relation to safe care and treatment. Please see the action we have told the provider to take at the end of this report.

Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Roseville Care Centre 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?

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.

Inspected but not rated

Is the service effective?

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.

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.

Inspected but not rated

Roseville Care Centre

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the breach of Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and other concerns identified at the last inspection had been addressed.

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

This inspection was carried out by one inspector, an assistant inspector and a medicines inspector. An Expert by Experience supported the inspection remotely. 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

Roseville Care Centre 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 announced. Having consideration of the coronavirus pandemic, we gave the registered manager a short period of notice of our arrival. This was to ensure safe systems were in place to protect everyone.

What we did before the inspection

We reviewed information we held about the service, including the notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within

required timescales. We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority 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 the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people and seven relatives about their experience of the care provided over the telephone. We made observations around the service.

We reviewed a range of records. This included seven people's care records. We reviewed five medicine administration records and accompanying records. We spoke with thirteen members of staff, including the nominated individual, registered manager, deputy manager, members of the domestic team, nursing and care staff.

After the inspection

We reviewed a number of records that had been sent to us and continued to seek clarification from the provider 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 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 whether the breaches of regulation identified at the last inspection had been addressed. We will assess all of the key question at the next comprehensive inspection of the service.

Using medicines safely

At our last inspection the provider had failed to manage medicines safely. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 12.

- Topical medicines were not applied as prescribed and the provider was not following their own policy. For example, one person who was supposed to receive a topical medicine after each incontinence episode only received application of this cream on one occasion despite being incontinent four times that day.
- For medicines given 'as required' the protocols were in place, however, of the three documents we looked at two contained incorrect information.
- Information to support staff in administering thickener lacked detail and accuracy. For example, we found one person receiving double the amount of thickener over a prolonged period.
- We looked at records for one person who was receiving their medicines covertly (the intentional disguising of medicines in food or drink to aid administration when deemed in a person's best interest following a mental capacity act decision). Whilst the necessary paperwork was in place, administration of medicines did not always follow the paperwork and reviews had not taken place as per providers policy.
- We reviewed the providers audits and whilst they had effectively picked up a number of issues, they had not identified everything we found on inspection.

These findings evidence a continued breach of Regulation 12 Health and Social Care Act (Regulated Activities) Regulations 2014 (Part 3)

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were somewhat assured that the provider was meeting shielding and social distancing rules. We witnessed some breaches of social distancing amongst staff. When activities were taking place in the lounge area chairs had been moved closer together and there were a lot of people in a small area.
- We were assured that the provider was admitting people safely to the service.

- We were somewhat assured that the provider was using PPE effectively and safely. Staff were wearing PPE correctly, however, procedures for safe disposal needs to be communicated to all staff to ensure these are followed at all times. Some staff were wearing rings not in line with bare below the elbow guidance.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. However, the arrangement of furniture in lounge and dining areas did not always allow a safe distance between people using the service. Not all cleaning products were labelled in line with COSHH guidelines and this posed a risk to staff and people using the service.
- We were 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.

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

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.

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 have specific concerns about.

The purpose of this inspection was to check whether the provider had addressed concerns identified at the last inspection. We will assess all of the key question at the next comprehensive inspection of the service.

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 when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- DoLS authorisations had been applied for appropriately and kept up to date. However, one person had a condition on their authorisation which had not been met.
- Mental capacity assessments had not been clearly or accurately documented. Some records contained incorrect information about the specific decision that was being made.
- Best interest decisions were not always clearly recorded. Some best interest decisions were recorded on the electronic system without any corresponding MCA assessment to evidence the person lacked capacity to make the decision themselves.
- Relatives were consulted when best interest decisions were made. One relative told us, "They don't ask about everyday things like having a bath or activities, but they did ring about the Covid test. I said 'no' because I thought it would be too distressing for him, so they didn't do it for him."

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 we have specific concerns about.

The purpose of this inspection was to check whether the provider had addressed concerns identified at the last inspection. We will assess all of the key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider had a comprehensive system of audits that included oversight of medicine records and systems at both management and provider level. These audits had effectively identified some areas where improvement was required, however, they had failed to pick up all of the issues we found during our inspection.
- Care records were not always up to date or accurate. This increased the risk of harm for people.
- The management team were aware of their regulatory responsibilities. The registered manager assisted us throughout the inspection, listened to the advice given and quickly acted upon any issues raised.
- Staff felt confident to raise any issues and felt improvements would be made where necessary. One staff member told us, "I'm confident that [registered manager] would take action if I went to them with anything."

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment
Treatment of disease, disorder or injury	Medicines were not always managed safely. Records were not always accurate or sufficiently detailed and the provider's own policies were not always adhered to. 12(1)(2)(g)