

Pearl Dusk Limited

Country Court

Inspection report

North Country Court
Southcoates Lane
Hull
Humberside
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Tel: 01482702750

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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

Country Court is a residential care home providing personal care to up to 34 older people living with dementia. At the time of our inspection there were 25 people using the service.

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

Systems were in place to record, store and receive medicines. However, information to support staff to safely administer medicines was not always available. Staff were trained and supported in their role to administer medicines.

Family and friends were not always involved or kept up to date with the running of the home. We have made a recommendation the provider engages with family and friends and acts on feedback given.

People told us they were safe. Staff had an awareness of safeguarding and knew what to do to make sure people were protected. Risk assessments were person centred and contained enough information to guide staff in their practice.

There was enough competent staff across the service to meet people's needs. Recruitment processes were robust and appropriate recruitment checks were carried out. A relative said, "Quite a few staff have joined the home, it seems much better."

Infection, prevention and control was managed well. Some areas of the home required decorating; however, the provider had an action plan in place outlining timescales for further re-furbishment and minor repairs.

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.

The registered manager and staff created a positive culture, that was person centred and empowering. Staff spoke positively about the registered manager and the nominated individual.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 7 July 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.

We also recommended the provider strengthens their quality assurance and documentation systems. At this

inspection we found improvements had been made.

Why we inspected

We carried out an unannounced inspection of this service on 18 May 2021. A breach of legal requirement was found. We undertook this focused inspection to follow up on action we told the provider to take at the last inspection and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions safe and well-led which contain those requirements.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings of the inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Country Court on our website at www.cqc.org.uk

Recommendations

We have made a recommendation about the safe management of medicines.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Country Court

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 Health and Social Care Act 2008.

Inspection team

The inspection was completed by 2 inspectors. An Expert by Experience also made phone calls to relatives the following day. 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

Country Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Country Court is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

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 and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service and 8 relatives to ask about their experience of care provided. We also spoke with the registered manager, the deputy manager, the nominated individual and 7 members of staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 4 people's care records and a range of medicine records. We looked at 2 staff files in relation to recruitment and supervision. We reviewed a variety of records relating to the management of the service. We also received information from 1 professional who visited the service.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider failed to ensure the proper and safe management of medicines. There was a breach of regulation 12 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's medicines were mostly managed safely. However, some information to support staff was not always available.
- Staff did not always have guidance for administering 'as and when required' medicines (PRN). However, guidance that was in place provided the right information for staff.

We recommend the provider reviews best practice guidance relating to the safe management of medicines.

- Staff were trained and supported in their role to administer medicines.
- The registered manager was responsive to our feedback and implemented an action plan to address the concerns identified.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. Comments from relatives included "Absolutely no concerns, [Persons name] is safe and well cared for" and "[Person's name] is safe at Country Court, we have no concerns."
- The provider had systems in place to help reduce the risk of abuse.
- Staff had completed safeguarding training and told us they would report any concerns to senior members of staff or the registered manager.

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

- Risks associated with people's care had been identified and plans were in place to minimise risk occurring. Staff told us they had access to risk assessments, and they provided the right information to care for someone safely
- Health and safety checks had been completed to help ensure the safety of the home environment.
- Accidents and incidents were analysed by the provider to look for themes and trends. Any learning was shared with staff to prevent future incidents where possible.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There were enough staff to ensure people received safe care. Staff provided support and engaged with people in a meaningful way. A relative said, "We do see enough staff when we visit, there is always someone around."
- Safe recruitment and selection processes were followed.

Preventing and controlling infection

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. There was some minor structural work required and some decor required updating. The provider had an action plan in place for the work which had already started.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

- People were supported to safely meet with visitors. Visitors to the service were encouraged, whilst staff ensure appropriate precautions were followed to help prevent the spread of infection.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Relatives were not fully engaged in the running of the service. Comments from relatives included, "I cannot think of any improvements, but it would be good to get a quarterly survey for us to put our thoughts on" and "There are no relative meetings, now that we have spoken to you there may be some."

We recommend the provider has a system in place to ensure they regularly engage and share information about the service with people and their families.

- Staff had team meetings. This provided an opportunity to discuss issues that are important to them and they feel listened to.
- The service regularly worked in partnership with other health and social care professionals to ensure people received good 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 we recommended the provider follow best practice guidance in relation to strengthening the quality assurance and documentation systems. Some improvement had been made.

- Whilst the inspection identified some areas where further improvements could be made, overall, the service was well managed and led. Regular audits were completed with action plans. A professional who visits the service told us the registered manager and staff acted on any feedback given.
- Systems were in place to review accidents and incidents and there was evidence of lessons learnt through staff team meetings and outcome of investigations. A staff member said, "Team meetings are useful; things are put in place about what we need to do."
- The provider understood their legal responsibility to notify CQC about incidents that affected people's safety and welfare. We had received notifications relating to significant events that occurred in the service.

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

- The provider had an open and honest culture. Staff told us they could speak to the managers if they had any concerns. Comments from staff included "They [registered manager] is approachable, their door is

always open" and "We have a good team now, we all support each other."

- People and their relatives spoke positively about the service. Comments from people included "Staff look after us", "I like all the staff and know them well" and "I get good care and they [staff] know what they are doing."

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 understood their responsibility in relation to the duty of candour and the need to be open and transparent when mistakes were made.