

Mrs Janet Pinington

Park View Residential Home

Inspection report

95 Regent Road
Morecambe
Lancashire
LA3 1AF

Tel: 01524415893

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Park View Residential Home is a residential care home providing accommodation and personal care for up to 11 people aged 65 and over. At the time of this inspection there were 10 people living there. Located in a residential area of Morecambe within easy reach of the promenade and local amenities. On road parking to the side of the home is permitted. There are communal and dining areas on the ground floor. Bedrooms are located on the ground floor and the first floor, which is accessible by a stair lift for the less mobile. Bathrooms and toilets are available on both floors.

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

People told us they were very happy living at Park View. However, our observations and findings showed risks in the environment had not always been addressed in a timely way, specifically where external professionals had made recommendations to take action to reduce risk or make repairs to equipment. People's individual risks had been appropriately identified and assessed. Where relevant actions to mitigate those risk had been implemented although for some recorded incidents, we could not see what actions had been taken. We have made a recommendation that the provider records all actions taken to protect people and prevent further incidents.

Audits and systems were in place to monitor the service on a regular basis. However, these systems had not been completely effective as we found some concerns relating to the safe management of the premises and equipment. We have made a recommendation that the provider ensures the systems are robust.

There were enough numbers of care staff available on each shift to meet peoples' needs. However, at the time of our inspection the staff were also responsible for keeping the home clean. The provider was actively recruiting for new cleaning staff. We found some areas within the home that had not been included in the regular deep cleaning process. Infection prevention protocols were in place and we were assured by the measures in place. However, in the current pandemic consideration needs to be given to the crossing over of cleaning of the home and providing personal care to people.

People received their medicines safely and as prescribed. Medicines were stored and managed in a safe way. Safeguarding protocols were in place and staff had received regular training. Checks of suitability had been completed to ensure staff who had been recruited in the last year were fit and proper to work with vulnerable people. 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.

Staff spoke very positively about working at Park View. They told us they thought it was well-led by the management and that people received a very good standard of care. However, we found that the registered manager had limited supernumerary time allocated to perform all the requirements in managing the oversight and quality of the service. We have made a recommendation the provider continuously assess this

arrangement.

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 good (published 31 October 2018).

Why we inspected

We received concerns in relation to the cleanliness and hygiene practises in the home. A decision was made for us to inspect and examine those risks. We inspected and found there was a concern with risks associated with the environment and equipment, so we widened the scope of the inspection to become a focused inspection which included the key questions of safe and well-led.

We have found evidence that the registered provider needs to make improvements. Please see the safe and well led sections of this report. The registered provider took immediate action to address some of the concerns and improve the risks found with the kitchen environment and the management of fire safety and equipment.

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.

The overall rating for the service has changed from good to requires improvement. 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 Park View Residential Home on our website at www.cqc.org.uk.

Enforcement

We have identified a breach in relation to the safety of the premises and equipment at this inspection and have issued a requirement notice.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and 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.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-Led findings below.

Requires Improvement ●

Park View Residential 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 team consisted of two inspectors.

Service and service type

Park View Residential 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. We gave the registered manager a telephone call within an hour of the visit to ensure the correct entrance procedures were followed during the current pandemic.

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 the environmental health team. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information providers we require providers to send us to give us some key information about the service, what it does well and improvements they plan to make. We took this into account in when we inspected the service and made the judgements in this report.

During the inspection

We briefly spoke with three people living at Park View. One visitor and two staff contacted us with their views about the service. We also spoke with the registered manager and provider. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were also reviewed. We made a referral to the local authority environmental health and to the fire and rescue safety team.

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 good. At this inspection this key question has deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management

- People were not adequately protected from the risk of harm because risks in the environment had not been addressed in a timely manner. We found actions and recommendations from the last fire risk assessment had not all been completed. We made a referral to local authority fire and rescue safety team who made a request for some immediate actions to be completed.
- The inspection visit was instigated following information of concern about cleanliness and hygiene practises in the home, specifically the kitchen. We made a referral to the local authority environmental health team. They made several recommendations to the provider to improve storage facilities and make repairs.
- The bath hoist on the ground floor used by people regularly had not had repair works completed as recommended in August 2020 by the service engineer. During the walk around of the building we found a couple of areas that had not been included in the regular deep cleaning schedule. For example, the base of the stairlift chair, wheel covers of some equipment and the skirting board in the main hallway.

We found no evidence that people had been harmed. However, we found evidence that people had been exposed to potential risks of harm because the provider had not ensured that the fire safety of the building, standards of the kitchen environment and equipment maintenance recommendations had been completed in a timely manner. This is a breach of Regulation 15 (Premises and equipment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider responded immediately during and after the inspection. They communicated with the local environmental health agency and the local fire and rescue safety team and took actions to reduce some of the risks identified. They also made arrangements for repairs to be made to the bath hoist operating mechanism.

Learning lessons when things go wrong

- People had their individual risks assessed and monitored regularly and where accidents or incidents had occurred these had been monitored and reviewed by the registered manager. However, we did not see that any details had been recoded to identify what actions or lesson learned had been made. Although the registered manager could tell us about actions had been taken following any incidents to protect people and mitigate risks, these were not formally recorded.

We recommend the provider formally records any actions taken by the service to protect or prevent further incidents.

Staffing and recruitment

- The registered manager continually assessed staffing levels to ensure there were enough staff available to support people. However, we saw that during the working day for the care workers they were also responsible for the cleaning of the premises. The registered manager told us about the current recruitment for two cleaners to work across the week. In the current pandemic and increased infection prevention and control the provider needs to consider the increased risks of cross contamination with this practise.
- The provider had recruited staff in a safe manner and completed the necessary checks of suitability to ensure they were fit and proper to work with vulnerable people.

Using medicines safely

- People received their medicines when they should and as they had been prescribed. The provider had audit systems in place to check people had received their medicines safely.
- Staff who administered medicines had undertaken appropriate training. Medicines were stored and managed safely.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from abuse. Staff understood their responsibilities around protecting people from abuse.
- People told us they thought the service was safe. One person told us, "I feel safe here. They are always checking on me."

Preventing and controlling infection

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was preventing visitors from catching and spreading infections. A visitor to the home said, "I observed the staff working really hard with full personal protective equipment (PPE) on to make sure that the residents were looked after during this pandemic with little thanks like most other care homes they do a fantastic job."
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 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.

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 good. At this inspection this key question has deteriorated to requires improvement.

This meant the oversight of the quality and safety of the environment was not always effective.

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

- The registered provider had systems and processes in place to monitor quality and safety in the home. However, we found the systems had not been robustly implemented in identifying or acting on the potential risks we found in the environment and with equipment during the inspection.

We recommend the provider improves the systems used to monitor the quality and safety of the environment. Ensuring they are robust, and any actions required are completed in a timely manner.

- Staff and management understood their roles. However, we found the registered manager had limited identified time during the working week to perform all the required management role. We also saw that during the working day for the care workers they were also responsible for the cleaning of the premises.

We recommend the provider continuously assesses these arrangements to ensure staff have enough time to complete the duties of their individual roles.

- The registered manager regularly monitored and reviewed any accidents and incidents to identify any patterns that needed to be addressed. However, we found no detailed records to show evidence of a lessons learned process to show how the registered manager had taken actions to prevent reoccurrence of incidents where possible and reduce risks. We have made a recommendation under the safe domain of this report about this.

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

- The registered manager and staff interacted with people in a manner that was positive and very respectful and were focused on doing their best for people they supported. One staff member told us, "The home is well-led" and "This home is the best, it is a very friendly place." A relative said, "Another staff member told us, "I work with a very good team of people with well-led management. We provide a very good standard of care to all the residents we look after."

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 responsibilities under the duty of candour. We had been notified of significant events which had occurred in the home. The notifications showed appropriate actions had been taken in response to incidents, including sharing information with appropriate authorities when incidents had occurred.

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

- People had been involved in regular reviews of their care needs and were fully involved in how the home was managed. People attended the resident's meetings where they could request any changes and they would be acted upon. We saw how people had been involved in choosing furniture and décor for the communal areas of the home.

- The registered manager worked effectively in partnership with health care professionals from multidisciplinary teams to achieve good outcomes for people.

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	<p>Regulation 15 HSCA RA Regulations 2014 Premises and equipment</p> <p>People had been exposed to potential risks of harm because the provider had not ensured that the fire safety of the building, standards of the kitchen environment and equipment maintenance recommendations had been completed in a timely manner.</p> <p>People who use services and others were not protected against the risks associated with unsafe or unsuitable premises because of inadequate maintenance.</p>