

Roseberry Care Centres (England) Ltd

South Park Care Home

Inspection report

Gale Lane
York
YO24 3HX

Date of inspection visit:
30 July 2020

Date of publication:
01 September 2020

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
Is the service responsive?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

South Park Care Home is a residential care home providing personal and nursing care to 41 people aged 65 and over at the time of the inspection. The service is separated into two units, one provides nursing care and the other specialises in providing care to people living with dementia. The service can support up to 80 people.

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

People and their relatives were happy and spoke positively about the care received and the management of the service. Procedures were in place to ensure infection control was well managed. Staff understood their responsibilities to maintain infection control and manage infectious diseases.

Within the context of the Covid-19 infection risk, 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 best practice.

End of life care plans were detailed and clearly explained people's needs, wishes and preferences. Complaints were responded to appropriately, in line with the provider's policy.

Staff had recently received training and their competency checked in specific areas, including infection control and end of life care.

The provider had recently taken over the service. The registered manager was supported to complete regular audits to identify improvements and maintain a safe working environment. They had an ongoing action plan to track improvements were made.

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

The last rating for this service was good (published 20 November 2019). This rating was given under the previous provider.

Why we inspected

We undertook this targeted inspection due to a number of complaints we had received. The complaints highlighted concerns in relation to end of life care, communication with families, management of complaints and infection control arrangements. Given the complaints, we also considered the provider's duty of candour, to be open and honest with people. We looked at the engagement between people, families and professionals and action the provider had taken to ensure lessons learnt were embedded throughout the service. The overall rating for the service has not changed following this targeted inspection

and remains good.

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 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?

At our last inspection we rated this key question good. 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 responsive?

At our last inspection we rated this key question good. 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 good. 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

South Park 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 was a targeted inspection to check whether the provider had met the requirements of Regulation 12 (Safe care and treatment) and Regulation 17 (Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in relation to some specific concerns about end of life care and infection control arrangements at the service. As part of this inspection we looked at the infection control and prevention measures in place.

Inspection team

The inspection site visit was carried out by one inspector.

Service and service type

South Park 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

We gave a short period of notice due to the current Covid-19 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 professionals who work with the service. 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 three people who used the service about their experience of the care provided. We spoke with six staff including the registered manager, the area quality manager, unit managers, two nurses and one care worker. We spoke with five relatives and two health professionals.

We reviewed a range of records in relation to the governance of the service. This included four people's care records, including monitoring records and handover notes. We sampled recent audits and staff training records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed policies and procedures and quality assurance documents.

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. 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 in relation to this key question, was to check on specific concerns about the management of infection control and infection control practices within the service. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management;

- People told us they felt safe at the service. One person told us, "I feel very safe here they look after me well and I am very happy."
- Staff had a good understanding of current guidance and best practice to minimise risks to people and maintain their safety.
- Staff said they felt infection control practices ensured their safety, and they had a good understanding of government guidelines in relation to COVID-19. Staff told us, "In the beginning it was so hard, guidance was changing on a daily basis and we worked really hard to keep people safe. It has been a really difficult time for us all" and "The provider had been really supportive and provided training to keep all the staff up to date with guidance."
- Risk management plans were in place to support good infection control practices. For example, regular checks were completed to identify if any staff or people were displaying symptoms of the virus. On admission to the service people were supported in isolation for the required period, in line with government guidance.

Preventing and controlling infection; Lessons Learnt

- Systems and processes were in place to prevent anyone entering the service from catching and spreading infections. One relative told us "I am so happy that I am able to visit now. There is a strict screening process for everyone, but it is for the safety of everyone."
- The provider ensured that stocks of personal protective equipment were in place and staff were using these effectively and safely.
- The registered manager was completing daily checks of the service and responded to any concerns to effectively manage and prevent infection outbreaks.
- Over the course of the pandemic, changes had been made to ensure the service worked in line with government guidance. Lessons learned and reflection had been completed to help support the service to manage the Covid-19 virus.
- The service had no cases of confirmed or suspected Covid-19 and where people and staff displayed symptoms, tests were arranged.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. 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 in relation to this key question, was to check specific concerns about end of life care and complaints we had received about the service. We will assess all of the key question at the next comprehensive inspection of the service.

Improving care quality in response to complaints or concerns

- People and their relatives knew how to raise concerns and were confident these would be addressed appropriately. One relative said, "I know how to raise a complaint. I have never had too, but I am confident the registered manager would deal with any concerns I may have."
- There were procedures for receiving, handling and responding to comments and complaints. The service had a complaints policy and procedure and complaints log in place. Where complaints had been made, they were responded to appropriately.

End of life care and support

- People received end of life care which respected their beliefs and maintained their dignity.
- Care plans and risk assessments were completed in detail to inform staff of people's life histories, wishes and preferences for their end of life care.
- Staff were skilled at supporting people and their families to explore their wishes at the end of their life.

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. 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 in relation to this key question, was to look to see if the provider had been open and honest about events that happened within the service. We will assess all of the key question at the next comprehensive inspection of the service.

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 was open and honest throughout the inspection process.
- The provider communicated with people and their relatives when things went wrong and involved them to make improvements. Learning was shared with staff to ensure improvements were sustained.
- In response to staff previously raising concerns outside the organisation, the provider had taken action to enhance the opportunities for staff to feel confident in raising concerns. Staff we spoke to felt confident about doing this.
- Quality assurance audits completed by the registered manager supported the service to identify improvements. A continuous action plan was used to monitor the improvements made.

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

- People, relatives and staff spoke positively about the service, the management team and the support they received. Comments included, "There has always been good communication from the service, and it is always clean", "It's a marvellous place. I love it here" and "The registered manager and their staff have been absolutely fantastic. I cannot fault this service."
- Regular meetings took place for people, relatives and staff to keep them up to date and fully involved in the running of the service.
- Opportunities to reflect on practice and lessons learned were embedded in the service. For example, staff attended daily huddles to share any changes in guidance and agree how to adapt their practice in relation to the changes.