

PWC Care Limited

Pear Tree Residential Care Home

Inspection report

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Date of inspection visit:

12 April 2021

07 May 2021

Date of publication:

03 June 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Pear Tree Residential Care Home is a small care home that is registered to provide support to 11 older people, some of whom may be living with dementia. At the time of our inspection, nine people lived at the service.

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

Quality assurance systems had identified shortfalls but needed further development to ensure they continued to do so. We have made a recommendation about governance systems. Action plans had been created and completed to address quality issues.

Safeguarding concerns had been looked into and changes made to improve people's safety. Staff followed individual risk assessments and took appropriate action to keep people safe. Staff ensured people lived in a clean environment. Infection prevention and control measures followed government guidance.

People received their medicines as prescribed and supported people in a person-centred way which maintained their dignity. There were enough staff to meet people's needs safely and in a timely manner.

Staff worked closely with relevant professionals to ensure people's healthcare needs were met. Staff were attentive and kind and people's relatives were happy with the care provided.

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.

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 inspection was a targeted inspection therefore the service did not receive a rating (published 16 October 2019). This meant the provider kept the rating of good from the previous inspection (published 27 June 2019).

Why we inspected

We received concerns in relation to the care provided and safeguarding. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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.

The overall rating for the service has not changed and remains good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Pear Tree Residential Care Home on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

Pear Tree Residential 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. 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 was completed by one inspector.

Service and service type

Pear Tree 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.

What we did before the inspection

We contacted the local authority and looked at information sent to us since the last inspection, such as

notifications about accidents and safeguarding alerts. 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 used all of this information to plan our inspection.

During the inspection

We spoke with six members of staff including two care staff, a senior carer, a cleaner, the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We observed staff interactions with people using the service, spoke with four relatives and received written feedback from one relative.

We looked around the home to review the facilities available for people and the infection prevention and control procedures in place. We also looked at a range of documentation including care files and medication administration records for two people. We looked at two staff recruitment files and reviewed documentation relating to the management and running of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at a variety of records relating to the management of the service including audits, lessons learnt, infection control practices and risk assessments.

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 remained the same. This meant people were safe.

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing had been identified and addressed. Staff followed appropriate safety strategies which were recorded in people's care plans.
- People and their relatives or advocates were included in decisions about how to keep people safe.
- The provider had maintained the safety of the premises and equipment through regular checks, servicing and maintenance.
- Fire safety checks were completed, and personal evacuation plans were in place to ensure people received the right support in an emergency.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The provider had appropriately addressed safeguarding concerns. However, staff had not always raised concerns in a timely manner, which placed people at risk of abuse. During the inspection, staff understood how and when to raise concerns.
- The provider had reviewed the concerns and taken measures to implement learning, which included further training for staff and reminding staff of the importance of whistleblowing and the procedure to follow.
- Appropriate action was taken following any accidents and incidents. These were monitored and reviewed to aid learning.

Using medicines safely

- People's medicines were administered safely.
- Medicine systems were organised and ensured sufficient stock was available.
- Staff understood how people liked to take their medicines. We observed people being supported in a personalised manner and their dignity being maintained.
- Protocols were in place to guide staff how to administer 'as and when required' medicines. Staff understood when people needed their medicines. Some protocols required more detail to ensure all staff could administer them consistently.

Staffing and recruitment

- Staffing levels were appropriate to meet people's needs and enabled staff to support people in a timely manner.
- We received positive feedback about staff at the service. Relatives told us, "I've always found staff very helpful and friendly" and, "Very friendly staff, they know my relative inside out and go the extra mile to give them the care they require."
- The providers recruitment processes helped to ensure only suitable staff were employed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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 promoting safety through the layout and hygiene practices of the premises.
- 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 were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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

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. At this inspection this key question has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Audits needed further development to ensure they continued to be able to identify quality shortfalls. For example, a PPE audit was in place but had not been updated to reflect current guidance.
- Completed audits were not always detailed which meant information could not be double checked by the provider.

We recommend the provider seek advice and guidance from a reputable source, about reviewing and updating governance systems.

- Audits were completed in line with the provider's audit schedule.
- The provider had oversight of completed audits and ensured action was taken to address quality shortfalls.

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

- Systems were in place to gather feedback from people, their relatives and professionals and some feedback had been sought, though the registered manager acknowledged they had not fully used these systems due to the COVID-19 pandemic.
- Staff meetings were held to inform them of changes to the service, address quality issues and for staff to provide their views.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others

- People were happy with the service provided. The service had received thank you cards and a relative told us, "I think it's absolutely excellent. The staff and the owners are just so nice, friendly and down to earth. It's just the right place for [person's name]."
- Staff worked with people and professionals to achieve good outcomes. Referrals were made to relevant professionals when required. A relative told us, "I am very happy with the way they have turned [person's name] around, they hadn't eaten well for ages, but now they do. The level of care was very good. Putting [person's name] into a care home was difficult, but very quickly I was at peace because of the way they were looked after."

- Staff supported each other and worked well as a team and extra support was available from the management team. A staff member told us, "I've not needed that much support from the management team as I get the support from the other staff and seniors. If I need any extra support, I know I can go to them [management team] if needed."

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; Continuous learning and improving care

- Processes were in place to respond appropriately if things went wrong and the registered manager understood their legal obligation to inform relevant people.
- The provider used learning from accidents and incidents to improve the service.