

Barchester Healthcare Homes Limited

Hundens Park

Inspection report

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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

Hundens Park is a service providing personal and nursing care for up to 60 older people, some of whom may have dementia and behaviour that may at times be distressing. At the time of the inspection there were 42 people living at the service.

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

Infection control processes were embedded and staff were observed to understand and follow government guidance regarding the wearing of PPE and understood good infection control practice. Medicines were managed safely.

Processes to safeguard people from abuse were followed and risks were effectively reviewed and managed. Staffing levels were safe at the time of our visit but some staff raised concerns that at certain busy period sometimes it felt "stretched."

We made a recommendation the provider reviews deployment across the service to ensure the right staffing levels are in place at key times.

The service had recognised an area for improvement regarding mealtimes in relation to presentation and nutritional appropriateness. We saw they had addressed this via training, additional support and recruitment.

There was an interim management team at the service and staff we spoke with felt they could raise issues and concerns with them and stated they felt very supported by them. Some staff raised that they had not always felt supported previously.

Relatives we spoke with felt that communication with the service was generally good and they felt staff were caring, knowledgeable and kind.

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 9 December 2017).

Why we inspected

The inspection was prompted in part due to concerns received about management support, food preparation and staffing levels. A decision was made for us to inspect and examine those risks. 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 coronavirus and other infection outbreaks effectively.

The overall rating for the service has remained at Good at this inspection.

We have found evidence that the provider needs to make improvements. Please see the Well-Led section of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Hundens Park.

Follow up

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?

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.

Hundens Park

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 undertaken by one inspector.

Service and service type

Hundens Park 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 did not have a manager registered with the Care Quality Commission. A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. A registered manager from the another of the provider's services was managing the home at the time of the inspection but this post was not a permanent appointment.

Notice of inspection

We undertook this inspection unannounced.

What we did before the inspection

We sought feedback from the local authority, infection control nurse team, the CCG and other professionals who work with the service. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with ten members of staff including the interim manager, interim deputy manager, clinical lead, two nurses, four care staff and a housekeeper. We also spent time with the hospitality manager for the provider and spent time observing the kitchen team in lunch preparation.

We reviewed a range of records. This included two people's care records in depth, daily records and observation charts and multiple medicine records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies, quality assurance records, safety, environmental and accident and incident records. Following our visit we spoke with five relatives via telephone interview.

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 and protected from avoidable harm.

Preventing and controlling infection

As part of CQC's response to the coronavirus pandemic we are conducting a review of infection prevention and control measures in care homes during our inspections.

- 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.

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

- The premises were well maintained. Regular checks were carried out to ensure the environment was safe.
- Individual risks were documented and well managed. Risk assessments for the environment, staff and visitors were up to date and regularly reviewed.
- The provider demonstrated they followed up on incidents and accidents via their clinical governance meetings which were recorded and took place monthly.

Staffing and recruitment

- There were sufficient numbers of staff on duty to keep people safe. Some staff raised with us they felt at key times on the first floor that staffing was "stretched".

We recommend the provider reviews the deployment of staff across the home to ensure there are enough staff provided at key times of the day.

- The provider had an effective recruitment procedure in place. They carried out relevant security and identification checks when they employed new staff.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The management team and staff understood safeguarding procedures and had been trained in safeguarding vulnerable adults.

Using medicines safely

- Medicines were safely managed. Appropriate arrangements were in place for the safe storage, administration and recording of medicines.
- Medicines were administered by trained staff.

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.

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

- Some staff we spoke with told us they had not felt supported under the previous manager.
- This interim manager and deputy manager had only been in post a short period but had taken steps to establish improvements in care, review placements of people and to support the staff team.
- There was evidence of engagement with staff and ways of seeking views with people who lived at the service.

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

- Quality systems within the home were in place.
- The interim manager had undertaken a range of quality checks and audit processes and re-introduced peer reviews for lead staff to undertake to ensure consistency across the units.
- We saw risks relating to COVID-19 were well mitigated in practice.

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 interim manager was aware of their responsibility under the duty of candour. There had been no specific instances where they had been required to act on this duty.
- There was no registered manager formally registered with the CQC at the home, during the inspection the previous manager had de-registered. The interim manager in post was a temporary appointment and a recruitment process had been undertaken and a new manager would be joining the service.

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

- The service had put in place processes to engage with people in the running of the service.
- We saw the home had meetings for people and staff and communicated with relatives well despite current COVID-19 restrictions on visiting. One relative told us, "I had an email on Monday as it was our wedding anniversary, that was lovely."
- We saw the service promoted people's rights and staff treated people and their families with respect. One relative told us their relation's keyworker kept in regular email contact with them and this meant they felt involved in their life.

Continuous learning and improving care

- The service showed recently it had listened to staff and made changes within the home to improve care.
- The service sought support from community professionals such as the tissue viability nurse team to provide additional training for staff.

Working in partnership with others

- There was evidence in people's care records that the home worked in partnership with a range of professionals to support people's health and wellbeing.
- One relative we spoke with said, "I know [Name] has lost weight recently but they have referred them to a dietitian and have put in place weekly weights which they tell me about."