

Regency Healthcare Limited

# New Victoria Nursing Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service effective?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service

New Victoria Nursing Home is a care home providing personal and nursing care to 25 people at the time of our inspection. The service can support up to 30 adults living with dementia or mental and physical health conditions. Accommodation consists of single room accommodation with additional communal spaces for people's comfort and enjoyment. New Victoria Nursing Home will be referred to as New Victoria within this report.

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

Staff did not always follow safe recordkeeping associated with medicines management.

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

The provider was in the process of a renovation and redecoration programme to enhance people's safety and welfare. They deployed sufficient staffing levels to meet people's needs in a timely way. Staff were able to describe good practice in safeguarding principles to protect people from harm, injury or unsafe care. Staff followed current guidance to maintain good infection control measures.

The registered manager implemented personalised care to assist staff to prevent malnutrition. Staff further promoted healthy living by working alongside external health and social care professionals. 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 trained staff to develop their skills.

The registered manager demonstrated they had taken sufficient action in the ongoing improvement of care and quality assurance records. They led the home in a programme of development and reflection focused on continuous learning. Staff confirmed the registered manager was a strong, competent leader.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 16 April 2021) and there was a breach of regulation. 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.

The service remains rated requires improvement. This service has been rated requires improvement for the last two consecutive inspections. We found action had been taken to improve the leadership and safety of the home. However, we rated the key areas as requires improvement because the management team and staff need to demonstrate consistent good practice over time.

### Why we inspected

The inspection was prompted in part due to concerns received about staffing levels; environmental safety; staff training; supporting people living with dementia to have meaningful lives; nutrition; personalised care planning; and leadership. As a result, we undertook a focused inspection to review the key questions of safe, effective 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. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe, effective and well-led sections of this full report.

Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has remained requires improvement. This is based on the findings 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for New Victoria on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Follow up

We will request an action plan for 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 effective?**

The service was not always effective.

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** ●

# New Victoria Nursing 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

This inspection was carried out by two inspectors.

#### Service and service type

New Victoria 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority commissioning and safeguarding teams. 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 New Victoria and made the judgements in this report.

We used all of this information to plan our inspection.

During the inspection

We spoke about New Victoria with four people, two relatives, seven staff and the registered manager. We walked around the building to carry out a visual check. We did this to ensure New Victoria was clean, hygienic and a safe place for people to live.

We looked at records related to service management. We checked care records of five people and looked at medication, staffing levels, recruitment and quality oversight.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at their policies and training matrix.

# 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 requires improvement. At this inspection this key question has remained the same. 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.

### Using medicines safely

- Staff did not always follow safe recordkeeping associated with medicines management. For example, we saw some missing signatures and handwritten entries were not countersigned to evidence information was correct. Stock control was not always clearly monitored. We discussed this with the registered manager who assured us they would act to address our concerns.

We recommend the provider consider current guidance and take action to update their practice accordingly on medicines recordkeeping and oversight.

- The nurse completed the process safely by concentrating on one person at a time. They ensured the trolley was secure whilst away from it and signed records afterwards to confirm people had their medicines.

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

- The provider was in the process of a renovation and redecoration programme to enhance people's safety and wellbeing. For example, new flooring and furniture improved infection control systems during the current pandemic. The registered manager had control measures to reduce the risk of unsafe care and regularly checked the environment.
- People and relatives said they felt safe at the home. A family member told us, "[My relative] was not safe at home, but she most certainly is at the New Victoria."

### Staffing and recruitment

- The registered manager deployed enough staffing levels to meet people's needs in a timely way. A relative stated, "Yes, I think they have enough staff. They are busy, but I see them taking their time and sitting down to chat with the residents."
- The provider had the same safe recruitment practices we found at our last inspection. This covered full employment history, references and criminal checks to ensure staff were safe to work with vulnerable adults.

### Systems and processes to safeguard people from the risk of abuse

- Staff were able to describe good practice in safeguarding principles to protect people from harm, injury or unsafe care. The registered manager underpinned this with training and information to guide staff to reporting procedures.

### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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 effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent.

Supporting people to eat and drink enough to maintain a balanced diet

- The registered manager implemented personalised care to assist staff in the prevention of malnutrition. Support plans covered people's preferences, including making risky decisions associated with a healthy diet. The registered manager was in the process of reviewing and updating all care plans and risk assessments, which we will check at our next comprehensive inspection.
- People and their relatives confirmed they had a choice of nutritious meals with sufficient portions to meet their needs. One person said, "Good portions and if you want more that is not a problem." A relative added, "My [family member] always enjoys her meals, she's never had any problems with that. She looks well because she's eating well."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager developed personalised care plans to enhance people's lives. This included information and support for each person to make riskier lifestyle decisions. Staff further promoted healthy living by working alongside external health and social care professionals. The registered manager was in the process of reviewing and updating care planning, which we will check at our next comprehensive inspection.

Ensuring consent to care and treatment in line with law and guidance; Adapting service, design, decoration to meet people's needs

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People signed care records to evidence their consent to care and treatment. Staff had a good

understanding of assisting each person to be in control of their lives and make their day-to-day decisions. For instance, they checked what people wanted to eat and where they wished to sit.

- The registered manager followed correct procedures, where applicable, to obtain authorised DoLS to protect people. A relative stated, "The staff are very caring, you know, they are really respectful and they do things in the way [my relative] likes them done."

Staff support: induction, training, skills and experience

- The registered manager trained staff to develop their skills and underpin their knowledge. This included enhanced infection control training related to the pandemic, strengthened by current guidance. A staff member confirmed, "If you need some training, we are all supported with that."

# 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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) 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.

- The registered manager demonstrated they had taken sufficient action in the ongoing improvement of care and quality assurance records. They implemented personalised care plans and developed new, more regular auditing to maintain people's wellbeing and safety. A relative said, "I'm very reassured by [the registered manager's] caring attitude. She's very experienced."
- The staff and management team worked closely together to address identified issues to enhance people's lives. A staff member explained, "[The registered manager] is a good manager who is getting on with things and improving them."
- One area of improvement involved employing a specific activities coordinator to increase people's stimulation and wellbeing. One person told us, "There's lots going on every day." A relative added, "They have lots of activities now, that's one thing they really have improved on."

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager was leading the home in a programme of improvement and reflection focused on continuous learning. They supported staff through a variety of forums, such as meetings, training and supervision.
- Staff confirmed the registered manager was a strong, competent leader. One employee stated, "You feel supported because the manager's always around." Another staff member said, "We have team meetings and can air our views."
- Relatives told us they were fully involved in people's care and the registered manager sought their

feedback about the home. A relative stated staff interacted with them to better understand their family member. They added, "They went above and beyond when it was my [relative's] birthday during the lockdown. They got all the banners up and had a big party with a big cake."

Working in partnership with others

- The registered manager and staff worked closely with health and social care agencies to support people to maintain healthy lifestyles. For instance, they had worked hard with the local authority in improving the service.

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.