

Farrington Care Homes Limited

Palace House Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Palace House Care Home is a residential care home providing personal and nursing care to 33 people. At the time of the inspection, there were 33 people living in the home.

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

People felt safe. They said staff were kind and helpful and they were treated well. People and their relatives were happy with the service they received. Staff understood how to protect people from abuse and recruitment processes ensured new staff were suitable. There were enough staff to meet people's needs and to ensure their safety, although people's views varied on this. People's medicines were managed safely. People received their medicines when they needed from staff who had been trained and had their competency checked. We discussed areas for improvement such as ensuring opening dates were recorded to all boxed and bottled medicines. Any risks to people's safety and well-being were assessed and recorded; clear guidance was provided for staff and any changes in people's health and well-being were referred to healthcare professionals as appropriate. Infection control was well managed, and the home was clean, maintained and free from odours. We discussed areas for improvement such as the lift flooring and walls and doorways in need of attention. However, there was a development plan available to support improvements.

People, their relatives, visitors to the home and staff told us the service was managed well. Staff enjoyed working at the home. The home worked in partnership with other organisations to provide safe, effective and consistent care. People were treated as individuals and their diversity was respected. People's care was tailored to their needs and preferences and staff knew people well. There were effective systems to assess and monitor the quality of the service and the practice of staff. People's views and opinions of the service were sought and acted on. The registered manager promoted an open culture in relation to accidents and incidents. There was clear evidence of changes to practice and lessons learned from any incidents.

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 11 September 2019).

Why we inspected

The inspection was prompted in part by notification of a specific incident and concerns in relation to failure to seek prompt medical advice. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We found no evidence during this inspection that people were at risk of harm from this concern. We found lessons had been learned and measures had been put in place to improve the service provided.

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.

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. The overall rating for the service remains good. 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 Palace House 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?

Good ●

The service was well-led.

Details are in our well-led findings below.

Palace House 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 carried out by one inspector and an Expert by Experience.

An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Palace House 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. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with CQC. 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 looked at the information we held about the service. This information included statutory notifications the provider had sent to CQC. A notification is information about important events which the service is

required to send us by law. 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 also spoke with local authority commissioners for their views about the service. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spent time in the communal areas observing how staff provided support for people to help us better understand their experiences of the care they received. We spoke with nine people living in the home and with 3 relatives. We also spoke with the registered manager, the clinical nurse lead, three care staff, the activity person and a healthcare professional.

We had a tour of the premises and looked at a range of documents and written records. These included three people's care and support records, two staff recruitment records, training and supervision records, staff rotas, minutes from meetings and complaints and compliments records, maintenance and servicing certificates and records related to the auditing and monitoring of service. We also looked at the recent monitoring report from the local authority.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider ensured people were protected from the risk of abuse and discrimination. Staff had access to appropriate training and understood how to raise any concerns about poor practice.
- The registered manager worked with the local authority and with people's authorised representatives to ensure, where people were deprived of their liberty, any decisions made on people's behalf, were lawful and in their best interests.
- People felt safe. One person said, "I do feel safe; there are always people knocking about" and "I'm safe because there is always a lot of help." Relatives confirmed their family members were safe. We observed people being treated with care and kindness. Conversations were friendly and appropriate. We heard staff offering encouragement and reassurance to people.
- The registered manager and staff were clear about when to report incidents and safeguarding concerns. The local authority safeguarding team had recently concluded their investigations into a serious incident. We noted the recommendations made had been acted on and shared with staff. Staff were confident the management team would act quickly to keep people safe if they reported any concerns.

Learning lessons when things go wrong

- The registered manager promoted an open culture in relation to accidents, incidents and near misses. There was clear evidence of lessons learned being discussed at management and staff meetings.
- The registered manager reviewed all incidents and accidents to ensure appropriate actions were taken and to determine whether there were any trends or patterns. We noted appropriate actions were taken following a review of incidents, to ensure people's safety and to prevent any reoccurrence.

Assessing risk, safety monitoring and management

- The registered manager assessed and managed risks to people's health, safety and wellbeing and ensured people had choice and control over their lives, including those with protected equality characteristics.
- Staff were provided with clear guidance on how to manage any risks in a safe and consistent way. Staff had received mandatory safety training.
- Equipment was serviced and maintained in accordance with manufacturers recommendations. A range of internal checks had been carried out, to ensure they were clean and fit for use.

Staffing and recruitment

- Records and observations showed there were enough suitably skilled staff to meet people's needs. Staff felt there were enough staff to meet people's needs. They confirmed they had a good and supportive team that worked well together.

- People described staff as kind, supportive, helpful and friendly. Comments varied on the responsiveness of staff. Comments included, "I think there are enough staff. They come as quickly as they can", "There are enough staff", "Nothing is too much trouble" and "The staff say they are short of staff when they are late with supper or something." Relatives said, "They are a bit stretched", "It is lovely to see the same staff" and "They are always on hand if you need them."
- The registered manager followed safe recruitment systems and processes. Pre-employment checks were carried out to make sure staff had the right skills and character to work with vulnerable people. We discussed removing personal information which was no longer needed.

Using medicines safely

- The registered manager and staff followed safe processes to ensure people's medicines were managed safely. However, we found dates of opening were not always recorded on boxes and bottled medicines. We discussed this with the registered manager and appropriate actions were taken following the inspection.
- Staff were suitably trained to administer medicines and checks on their practice had been carried out.

Preventing and controlling infection

- The provider was preventing visitors from catching and spreading infections and promoting safety through the layout and hygiene practices of the premises. People made positive comments about the cleanliness of the home.
- The provider was admitting people safely to the service and was facilitating visits for people living in the home in accordance with the current guidance.
- The provider was using personal protective equipment (PPE) effectively and safely. We discussed using transparent face masks as the registered manager reported some people were struggling with communication.
- The provider was accessing testing for people using and visiting the service and staff. We were told all people living in the home and most staff had been vaccinated against COVID-19.
- The provider made sure infection outbreaks could be effectively prevented or managed. The 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 remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Management and staff planned and promoted person-centred care to ensure good outcomes for people. People told us this was a good home and they were happy living here. People said, "I give it ten out of ten", "I wouldn't change anything", "It is a lovely atmosphere" and "The care is wonderful." One relative commented, "I am extremely impressed by the lengths they go to, to make the residents happy and comfortable."
- Staff were committed to providing high standards of care and support and felt valued and supported. They told us they enjoyed their work and confirmed the home was well managed.

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 aware of their responsibilities regarding duty of candour. They promoted and encouraged candour through openness. We observed caring and friendly interactions. Good relationships had been developed between management, staff and people using the service and their family members.
- The provider was aware of their responsibility to be open and honest when something had gone wrong.

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

- There were effective systems to monitor the quality of the service and to monitor staff practice. Action had been taken to address identified shortfalls and evidence improvements had taken place.
- The registered manager was clear about their role and responsibility and was supported by the providers, a regional manager and the clinical nurse manager. The regional manager and providers visited the service to monitor the quality of the service and to monitor the registered manager's practice. We discussed ensuring the clinical nurse manager was provided with supervision and support from someone with a clinical background.
- Staff understood their individual responsibilities and contributions to service delivery. They had access to policies and procedures, contracts and job descriptions.
- People's care records were accurate, detailed and kept securely. The care records were being reviewed following a recent incident and as part of lessons learned. The language used in daily notes and care plans was respectful and care was recorded in a positive manner.

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

characteristics

- The registered manager had sought feedback from people using the service, visitors and staff to ensure they were happy and to ensure their diverse needs were met. Discussions with people and a review of people's feedback indicated they were satisfied with the service provided. We discussed re introducing residents' meetings.
- There were effective communication systems to keep people updated. Relatives confirmed they were kept up to date with any changes. Care plans considered people's diverse needs.

Continuous learning and improving care; Working in partnership with others

- The registered manager encouraged staff to participate in continuous learning and development. Staff training, supervision sessions and meetings were used to ensure learning and improvements took place.
- The registered manager and staff had good links and working relationships with a variety of professionals to enable safe, effective coordinated care and support for people. Records showed information about changes to people's health and well-being had been shared with appropriate healthcare professionals. A healthcare professional spoke very highly of the skills, knowledge and conduct of managers and staff and the care and support provided to people.
- The registered manager worked in partnership with other agencies, including the local commissioners who conducted their own reviews of the service. The registered manager and key staff attended local forums and learning sessions to keep up to date and to help improve the service.