

# George Ronald Limited Marquis Court

### **Inspection report**

Tunstall Village Road Silksworth Sunderland Tyne And Wear SR3 2BB Date of inspection visit: 30 June 2022

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Tel: 01915210796

### Ratings

### Overall rating for this service

Inspected but not rated

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

Marquis Court is a care home that provides personal care for up to 47 people, some of whom are living with dementia. At the time of the inspection there were 44 people living in the home.

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

People were safe and happy living in Marquis Court. People's comments included, "I like living here. The girls are all lovely" and, "[Staff] are all lovely, I can't complain." A 'thank you' card recently received from a relative described staff as, "Amazing" and, "Worth their weight in gold."

Staff safeguarded people from abuse. Staff were confident in how to protect people and report any concerns and had received up to date training. There were enough staff to meet people's needs. Infection control processes were embedded into the service and staff followed government guidance in relation to infection control and prevention practices, in particular, relating to COVID-19.

People were supported to have maximum choice and control of their lives, and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

Staff supported people in a person-centred way. People had person-centred care plans in place that detailed how they wished to be supported.

The home was well managed. People and staff felt the registered manager was open and approachable. One person said, "Oh she's lovely, you see her around a lot. I feel comfortable going to the girls or [registered manager] if I have any issues. They're all approachable." An effective quality assurance process was in place.

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 30 April 2020).

#### Why we inspected

We undertook this targeted inspection to follow up on specific concerns we had about safeguarding, staffing levels, care planning and quality management in the home. A decision was made for us to inspect and examine those risks.

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. We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the Safe, Responsive 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 Marquis Court 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 reinspection 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?	Inspected but not rated
At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.	
Details are in our safe findings below.	
Is the service responsive?	Inspected but not rated
At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.	
Details are in our responsive findings below.	
Is the service well-led?	Inspected but not rated
At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.	
Details are in our well-led findings below.	



# Marquis Court Detailed findings

# Background to this inspection

#### The inspection

This was a targeted inspection to check on concerns we had about safeguarding, staffing levels, care planning and quality management in the home.

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 one inspector.

#### Service and service type

Marquis Court is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people and three relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, the administration manager, the senior supervisor and a care worker.

We reviewed documentation, inspected the safety of the premises and carried out observations in communal areas. We reviewed a range of records including three people's care records, two staff files and quality audits. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We also reviewed all evidence sent to us.

### 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 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 was to check specific concerns we had about safeguarding and staffing levels. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- Staff supported people to keep them safe. One person told us, "Oh yes I feel safe. The girls are always around if I need them."
- Staff knew people well and were aware of how to report any safeguarding issues or concerns. Staff had completed safeguarding training.
- The registered manager alerted local authorities of safeguarding concerns in a timely way.

#### Staffing and recruitment

• There were enough staff on duty to safely meet people's needs.

• Staffing levels were determined in line with people's needs. Staff told us, "I think it's manageable and there's enough staff to look after everyone, meet their needs and keep them safe" and, "Some days run really smooth, but other days, if something happens and there's an incident, it can have a ripple effect. Although there's still enough of us to keep people safe, it can just be a little busier."

• Staff were recruited in a safe way with all necessary checks carried out to ensure staff were suitable, fit and able to work in the home.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

• We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

#### 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 supporting people living at the service to minimise the spread of

infection.

• 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 responding effectively to risks and signs of infection.

• 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.

## 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 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 was to check specific concerns we had about care planning. We will assess all of the key question at the next comprehensive inspection of the service.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

• People received person-centred care which met their needs. Care plans instructed staff how to support people in line with their needs and wishes.

• The home was in the process of transitioning from paper-based care plans to electronic care plans. The registered manager and staff were able to explain how they checked both systems to ensure that they provided people with the correct care in accordance with their latest care plans, during the transition process.

• Management and staff regularly reviewed people's care plans to ensure they continued to reflect people's changing needs.

### 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 good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check specific concerns we had about quality management. We will assess all of the key question at the next comprehensive inspection of the service.

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

• The home was well-managed. The registered manager and staff understood their roles and responsibilities. Staff felt supported in their roles.

• The provider and registered manager monitored the quality of the service to make sure they delivered a high standard of care and to drive improvement. Where short falls were identified, action was taken and lessons were learnt.

• Due to the COVID-19 pandemic and workforce pressures experienced because of this, the registered manager informed us that some quality audits had previously lapsed. However, they had managed to bring these up to date and were implementing a scheme of delegation to mitigate the risk of a reoccurrence.