

Mrs Mubashra Qadir

Springfield Nursing Home

Inspection report

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Ratings

Overall rating for this service	Good •
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

About the service

Springfield Nursing Home is a residential care home providing care and support to up to 35 people in one adapted building. At the time of our inspection there were 30 people using the service.

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

People were supported to mobilise safely. Risk assessments were completed to identify the help and support people required. These were available and known by staff. People's nutritional needs were considered, and risk assessments were available to guide staff on the support people needed.

Storage for the safe management of medicines was secure and access to medicines was restricted to staff who had received training and were assessed as competent in the safe management of medicines.

Staffing was arranged so people could receive help and support when they needed it. People told us they were happy with the deployment of staff, and they did not have to wait for support. The home employed staff who delivered care, housekeeping and laundry staff, administration, and maintenance staff. An activities co-ordinator was also employed and they supported people at mealtimes.

The home was clean and there were processes in place to help ensure good standards of hygiene were maintained.

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 13 July 2121.)

Why we inspected

The inspection was prompted in part due to concerns received about the deployment of staff, moving and handling practices, management of nutritional needs and medicines. A decision was made for us to inspect and examine those risks.

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 following this targeted inspection and remains good.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

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.

Inspected but not rated



Springfield 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 Health and Social Care Act 2008.

This was a targeted inspection on a concern we had about safe moving and handling practices, the safe management of medicines, management of nutritional needs and the deployment of staff.

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

Springfield Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Springfield Nursing Home is a care home with nursing care, however there was no one receiving nursing care at the time of the inspection. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service. This included information we had received from the public and notifications sent to us by the provider. We sought feedback from the local authority. This information helps support our inspections. We used all of this information to plan our inspection.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 5 people who used the service about their experience of the care provided. We spoke with 8 members of staff including the registered manager, Nurse Liaison, 4 care workers and a housekeeper. We reviewed risk assessments and care plans and care records for 3 people.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection this key question was rated as 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.

Staffing and recruitment

- The provider and registered manager ensured staff were effectively deployed. There was a staffing tool in place to help inform the number of staff required on each shift. This was regularly reviewed to ensure it remained accurate.
- People told us they had no concerns with the staffing arrangements. Comments included, "They're usually quick." And "I'm not left waiting."
- We observed the staffing deployment during a busy time. We saw people were helped quickly and staff were well organised and did not rush people.
- Staff told us they had no concerns with the arrangements for staffing and if required, additional staff were provided if this was required. We saw rotas were arranged in advance and any gaps were identified and additional staff members were provided.

Using medicines safely

- The provider and registered manager had arrangements in place to help ensure medicines were managed safely. If people wished to take responsibility for their own medicine needs, this was supported. Risk assessments were in place to minimise the risk of avoidable harm occurring.
- Staff were trained in the safe management of medicines and their competency was assessed to ensure they were able to manage medicines safely.
- Storage of medicines was secure and restricted to staff who had completed the required training and competency assessment. This helped minimise the risk of avoidable harm.

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.

The home followed guidance from the local infection and prevention teams and visitors were supported to attend the home to visit loved ones.

Assessing risk, safety monitoring and management

- Staff completed risk assessments in areas such as falls, nutrition and mobility. Care plans were developed to address any risks.
- Referrals were made to external health professionals if risk assessments indicated this was required.
- We observed people being supported in accordance with their assessed needs and staff were knowledgeable of the individual support people needed.