

Four Seasons (No 7) Limited

Charlton Park 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

Charlton Park Care Home is a care home providing personal and nursing care to people aged 65 and over. At the time of our inspection 46 people were using the service. The care home can support and accommodate up to 66 people.

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

People were safeguarded from abuse. Risks to people were managed in way that reduced harm to them. Lessons were learned from incidents and accidents and when things went wrong. The staffing level was sufficient to promote safe care for people. People's medicines were administered and managed safely. Staff followed infection control procedures to reduce risks of infection.

The service met people's needs and promoted their well-being. The quality of the service was regularly checked, and actions were put in place to drive improvement. The provider worked in partnership with other organisations to develop the service. The registered manager met their statutory responsibilities to the CQC.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update: The last rating for this service was requires improvement (4 November 2020) when we found two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when they would improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating.

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.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to 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 Charlton Park 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.

Charlton Park 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.

Inspection team

The inspection team consisted of one inspector, and an Expert by Experience. The Expert by Experience made phone calls to people and their relatives. 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

Charlton Park 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. 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 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 the information we held about the service which included notifications of events and incidents at the service. 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 the service and made the judgements in this report.

During the inspection:

We looked at three people's care files, medication administration record sheets for 15 people, quality assurance reports and other records relating to the management of the service including incidents and accidents records. We spoke briefly with two people using the service, we talked with 10 relatives. We also spoke with the registered manager, deputy manager, two qualified nurses, two care workers and the regional support manager.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visited the service.

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 now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection we found people's medicines were not managed in a way safe way. This was a breach of regulation 12 (Medicine management) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection we found that improvements had been made and there was no longer a breach of Regulation 12 (Medicine management).

- People's medicines were managed and administered safely. Staff who administered medicines to people were qualified and suitably trained to do so. Medicine administration record (MAR) charts were completed correctly for each person. There was a protocol in place to manage 'as and when required' medicines.
- Medicines were stored safely under the recommended temperature and guidelines. Medicines such as eye and ear drops, which were required to be disposed of after being open for 28 days, were labelled to indicate when they were opened. Controlled drugs were stored safely.
- Regular medicines audits took place to ensure medicines were accounted for. Records of medicines received into the service were maintained and there was a system available for disposing of unused medicines.

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

At our last inspection we found risks to people were not effectively managed to reduce harm to them. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection we found that improvements had been made and there was no longer a breach of Regulation 12 (Risk management).

- People were protected from risks of harm that were preventable. Risks to people were assessed and management plans were devised to manage the risks identified. Risks covered people's physical and mental health conditions and behaviours.
- Detailed guidance was in place to manage the risk associated with one person's PEG (Percutaneous Endoscopic Gastrostomy) tube used for their nutrition and medication. People at risk of developing pressure sores were supported to reduce the risk. They were supported to regularly reposition [turn] and they had pressure relieving equipment in place. Record showed staff completed turning charts to show people's turning regimes as required.
- Lessons were learnt from incidents and when things went wrong. Incidents and accidents were monitored and reviewed by the registered manager and by senior managers at regional level. The registered manager acted as necessary, for example if the incident was deemed as a safeguarding concern, they referred it to the local authority safeguarding team and sent a notification to CQC. Where necessary people's care plans were

reviewed, and professionals were involved.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People and their relatives told us they were safe. One person said, "Oh yes, I'm safe here." One relative commented, "Yes, [loved one] is safe and seems to enjoy it here. Everyone is very friendly."
- There were systems and processes in place to safeguard people from abuse. Training records showed staff had completed training on safeguarding people from abuse. Staff told us they knew how to recognise abuse and told us about the actions they would take. They told us they would report any concerns to the registered manager. Staff said they would whistle blow to relevant authorities if needed.
- The registered manager demonstrated they understood their responsibilities to safeguard people from abuse. They had followed relevant safeguarding procedures to address safeguarding concerns appropriately including carrying out investigations and notifying CQC.

Staffing and recruitment

- There were enough staff available to support people with their needs. People and their relatives told us there were always staff around to attend to people. One relative told us, "When I was able to visit, there seemed to be enough staff." Another relative said, "Staffing levels are okay, they could always do with more."
 - Staff told us staffing levels were enough on each shift to support people. One member of care staff said, "We are enough on each shift. I can't complain." We saw staff support people with their needs as required. Staff didn't seem rushed. They stopped to chat with people when people needed this.
 - Staffing levels were determined based on people's needs and occupancy level. The registered manager reviewed staffing levels regularly and adjusted the rota accordingly. The rota showed the home was covered 24 hours by a team of nursing and care staff deployed around the home.
 - The provider followed safe recruitment processes to ensure people were supported by staff who were fit and suitable to support them. Recruitment records included satisfactory references, right to work in the UK, employment history, and criminal records checks.

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 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.

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 now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

At our last inspection we found the provider had failed to operate systems to assess, monitor and improve the safety of the service provided. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we saw there were systems for monitoring and assessing the quality of the service; and these were effective. The service was no longer in breach of Regulation 17.

- The quality of the service was regularly assessed and monitored to ensure it was effective, safe and met people's needs.
- Quality checks and audits were completed by the registered manager and by members of the senior management team at provider level. Checks and audits completed included, care planning and delivery, staff training, safeguarding, incidents and accidents, complaint management, and health and safety. We saw that care planning and medicine management had improved from concerns previously identified.
- Actions plan were put together to address any identified gaps in quality. There was a service improvement plan in place which was reviewed regularly. The regional support manager visited the home regularly to support the manager to drive improvement and to discuss any concerns relating to quality.

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

- There was a visible leadership and management presence at the service. People and their relatives told us they knew who to go to if they had any concerns and they commented their concerns were resolved. One relative mentioned, "Family member is pretty much settled here. They seem happy and well looked after. They are always clean and smiling. The care staff are nice and friendly." Another relative said, "I feel my family member is being cared for well. They get the service and care they deserve. There have been significant improvements since lockdown which is encouraging for us as we are not able to visit regularly."
- Staff were trained and supported to deliver care to people that met their needs. Staff we spoke to told us they were supported by the registered manager and senior staff to deliver care effectively to people. Staff received regular training, support and supervision to improve their knowledge, skills and experience in their roles.

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

- The registered manager understood the importance of being open, transparent and honest when things went wrong. They regularly reviewed incident and accident logs and took actions as required. They investigated complaints and safeguarding concerns as required; and they shared lessons learned with staff.
- The registered manager understood her role and responsibilities in meeting the legal requirements of running an effective service and meeting the regulatory requirements of their registration. The registered manager had notified CQC of notifiable incidents in line with their registration conditions.

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

- People and their relatives told us they were kept informed about the service and their views were considered. One relative told us, "The home does well, they are approachable and willing to change things if necessary and my loved one gets the care and support they deserve." Another relative said, "The registered manager and staff ring me if there are any changes in loved one's care. I also ring them if I have any questions and they answer my questions."
- The registered manager involved and updated relatives about the service and their loved ones care regularly using newsletters, phone calls and emails. Relatives were able to plan visits using a designated visiting area designed for the purpose.
- Staff told us they felt involved and listened to by the registered manager and other members of the management team. Regular staff meetings took place to discuss the care people received and issues relating to the service.

Working in partnership with others.

- The service worked closely with local service commissioners, Public Health England, and health and social care professionals to improve the service delivered to people.