

Primrose Bank Ltd

# Primrose Bank Care Home

## Inspection report

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Date of inspection visit:  
20 February 2020

Date of publication:  
15 April 2020

## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Primrose Bank Care Home is a residential care home providing personal care for up to 44 older people. There were 39 people using the service at the time of the inspection. The service is provided from a large property close to the town centre, with communal areas and provides people with their own private bedrooms.

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

People received safe care and were protected against the risk of abuse and avoidable harm. Staff assessed and managed risks to people to help keep them safe. Staff managed people's medicines safely and kept the home clean and hygienic.

People were cared for by staff who were well supported and had the right skills and knowledge to meet their needs effectively. Staff helped people with their healthcare needs and worked well with external healthcare professionals. The provider had done a significant amount of work to ensure they met people's nutritional needs and worked with them to make sure food provision also reflected their preferences. 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.

People were treated well, with kindness and compassion by staff who respected their privacy and dignity and promoted inclusion. The service supported people to be as independent as they were able. We received positive feedback about the caring approach of staff.

The service put people at the centre of the care they received. Staff used detailed assessments to identify people's needs and preferences and worked to ensure people were happy with the care they received. If people were not happy, they were confident they could speak with staff to make improvements. The service made sure people were supported to communicate and supported people with activities to enhance people's wellbeing.

The service was led by a registered manager who people felt was approachable and caring. People felt the care they received was of a good standard and liked living at the home. The registered manager understood their responsibilities and monitored the quality of the service using a range of systems.

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 01 April 2019) where we found a breach of regulation in respect of medicines management. Following that inspection, the provider submitted an action plan to tell us how they were going to make improvements. 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.

#### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Primrose Bank 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 was carried out by an inspector, a specialist advisor in medicines 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

Primrose Bank Care Home 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

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.

We reviewed information we had received about the service since the last inspection and sought feedback from the local authority. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who lived at the home, four relatives and a visiting friend about their experience of the care provided. We spoke with six members of staff including the registered manager, deputy manager and care workers.

We spent time in communal areas observing interactions between people who used the service and staff. We also observed staff administering medicines.

We reviewed a range of records. This included four people's care records and multiple medication records. We also reviewed a variety of records related to the management of the service, including training records, audits and safety certificates.

# 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 the provider had failed to ensure the safe and proper management of medicines. 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.

- Medicines were managed safely and properly. People received their medicines when they should. Only staff who had been trained, and had their competence assessed, administered people's medicines. Where people were prescribed medicines for use 'when required', staff produced written instructions and information about how and when these medicines could be given to people, to ensure they were used safely.

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

- People were protected from the risk of abuse. Staff had received training to recognise abuse and knew what action to take to keep people safe, including reporting any allegations to external agencies. People and their relatives told us they felt safe. Comments included, "Oh yes, I am definitely safe here." And, "Oh god absolutely [safe]. Without question."

### Assessing risk, safety monitoring and management

- Staff managed risks to people's safety well. They thoroughly assessed and regularly reviewed risks to people, to manage any identified risks and keep people safe from avoidable harm. Staff were familiar with people's individual risk management plans.
- The provider ensured the environment and equipment were safe. We saw the premises were suitably maintained. The registered manager ensured equipment was inspected and serviced when it needed to be and had plans to keep people safe in the event of an emergency.

### Staffing and recruitment

- The service was staffed sufficiently. People's and their relatives told us there were always enough staff on duty and staff responded quickly when people asked for help. Comments included, "Is there ever enough staff anywhere, but there is always someone about and they always seem to respond when you want them." And, "Everybody could do with more staff, but I think there is sufficient." Staff told us they felt there were enough staff deployed to meet people's needs and to keep them safe.

- The registered manager followed safe recruitment practices and kept all the records, as required by law. Staff and managers we spoke with confirmed the recruitment process remained the same as at the last inspection.

#### Preventing and controlling infection

- People were protected against the risk of infection. Staff received training related to infection prevention and control and followed good practice in their work. We observed staff wearing personal protective equipment, such as disposable gloves and aprons, to help protect people. People and their relatives confirmed the home was always clean and tidy.

#### Learning lessons when things go wrong

- The registered manager used a process to learn and make improvements when something went wrong. Staff recorded accidents and incidents, which the registered manager reviewed on a regular basis to identify any trends, themes and areas for improvement. They shared any lessons learned with the staff team, to reduce the risk of similar incidents happening again and improve the safety of the service.

# 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 remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

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.

At the last inspection, we made a recommendation for the provider to seek and implement best practice guidance around mental capacity assessments.

At this inspection, we found the provider had made improvements.

- Staff assessed people's capacity to consent to and make decisions about their care. Staff continued to offer people as much choice and control as possible over their care. Where people lacked capacity, staff followed the MCA code of practice to ensure any decisions made on their behalf were in their best interests. However, we found some documentation was inconsistent in relation to people's mental capacity and their abilities to make decisions about their care. The registered manager and deputy manager assured us they would address this following our inspection.
- The registered manager sought legal authorisation where people were subject to any restrictions for their safety. Where DoLS authorisations were granted, we saw the service ensured any conditions were met.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff used recognised tools to assess people's needs and referenced good practice guidance and

legislation. This helped to ensure people received effective and appropriate care which met their needs and protected their rights.

- Staff assessed people's needs regularly and involved them, or others acting on their behalf, in care planning to ensure their choices and preferences were considered and their needs were met effectively. Staff gathered information from the person, those that knew them well and professionals involved in their care to create written plans of care for staff to follow. Staff knew people's individual needs and preferences well which helped them provide effective care.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and had completed training which gave them the skills they needed to carry out their role effectively. People's relatives and external professionals all gave us positive feedback about how knowledgeable staff were about their needs and how staff supported people. Comments included, "They seem very competent." And, "I think they are very good."

- Staff were well supported by senior staff and the registered manager. Staff told us they felt supported through day to day contact, regular supervision and annual appraisals of their performance. Staff had opportunity to discuss any concerns, issues, work performance and development with the registered manager.

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

- Staff supported people to ensure they received a balanced diet and sufficient fluids to maintain their health. They assessed people's nutritional needs and sought professional guidance where people were at risk, for example of malnutrition or difficulties with swallowing. We saw professional guidance was used in care planning to help ensure people's nutritional needs were met effectively.

- The provider recognised the importance of ensuring people's nutritional needs were met, in order to maintain a good quality of life. They had carried out a significant amount of work to make sure the meals provided were nutritionally balanced. They provided drinks and snack stations around the home, to encourage people to drink and eat when they pleased in addition to main meals. Comments we received from people included, "The meals are very good. You get two choices at lunch and tea. I have always got plenty to drink – there is a cabinet in the hallway with cartons of fruit juice and I can go and help myself." And, "The meals are brilliant. He will always make me something else if I don't like anything. I always like to have soup at tea time."

- The provider taken significant steps to make mealtimes a social occasion, which people enjoyed. In addition, they held social occasions every few months where people could invite their friends and relatives for a restaurant-style meal, at no extra charge. We received very positive feedback about this initiative, including, "The meals are very good. They have themed evenings, once every three to four months, when friends and relatives can come in for a meal, at no extra charge. Everyone gets dressed up and they put on a three-course meal with wine or beer. I have been to nearly all of them, they are marvellous." And, "I have been here at special nights, it was amazing. The food was restaurant quality and we had wine and the tables were set out unbelievably well."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked with healthcare professionals to ensure people's healthcare needs were met effectively and consistently. The service worked closely with services such as people's GPs and specialists. We saw examples of how the service had worked with external professionals and supported people with nutrition, continence, confidence and social interaction, resulting in great improvements to their wellbeing and quality of life. One relative fed back to the service about this saying, "The care [family member] received

saved his life...Primrose Bank turned his life around."

- The service supported people to live healthier lives with guidance around healthy eating, exercise provision and access to healthcare services.

Adapting service, design, decoration to meet people's needs

- The service was adapted to be safe, accessible, comfortable and homely. Corridors were wide enough to accommodate people who used a wheelchair and lift access was available on all floors. Communal areas provided space for people to relax and were homely in character. The provider had installed raised flower beds for people to continue their interest in gardening with greater ease. The provider ensured the premises were maintained.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were treated with respect, compassion and kindness, by staff who promoted equality and valued diversity. Staff received training which covered equality and diversity and the importance of valuing people's individual backgrounds, cultures and life experiences. We received positive comments from people's relatives about the approach of the staff team. One told us, "They always seem to be very caring." Another said, "I have had no issues whatsoever, they are so nice."

Supporting people to express their views and be involved in making decisions about their care

- Staff involved people in decisions about their care and support. The registered manager used several methods to gain people's views including daily interaction, regular reviews of people's care, conversations with relatives and satisfaction surveys. Comments we received from people included, "They did that when I first came in – I am well looked after." And, "We discuss it as and when it is necessary."

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and supported them to maintain their dignity. People and their relatives gave us positive feedback about the caring approach of staff.
- Staff respected people's right to privacy and ensured, when delivering personal care, doors and curtains were closed and people were covered.
- Staff promoted people's independence as far as possible. Staff supported people to make choices and to do what they could for themselves. For example, prompting people to support them with personal care, rather than taking over and doing the task for them. One person told us, "They don't take over – if I want to shave, I shave myself."
- The service protected people's private information. Information was stored securely and was not left visible, on desks or noticeboards.

# 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 as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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

- People received care and support which was personalised to them. Staff assessed people's needs and recorded their preferences in relation to health and social needs when they first moved into the home. Staff involved people and, where appropriate, others acting on their behalf, in regular reviews to ensure planned care continued to meet their needs.
- The service helped to ensure people's religious needs were met. Clergy visited the home to carry out services on a regular basis. People told us they appreciated this and one said, "I go to the service when they come here. Someone comes about twice a week to give communion."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service met people's communication needs. Staff assessed people's communication needs and recorded this information as part of the initial assessment and care planning process. Information about people's communication needs was shared with other services when appropriate, for example, if someone needed to attend hospital.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were provided with and supported to participate in activities to help maintain their social health. Staff supported people with activities in the home, such as exercises, quizzes, arts and crafts and trips out to local attractions. A local primary school visited regularly. People who lived at the home and the children had been taking salsa dancing lessons together. The provider had also arranged for art classes to be held each week, and supported people to exhibit their art. In addition, the provider had helped set up a chess league, where people played against students from a local high school. All this activity helped people to follow their interests and to maintain a link with the local community and younger people.
- The provider supported people to continue to experience things which were new to them. They arranged 'round the world cruise' days on a regular basis. They used virtual reality equipment to help people experience the sights from various places around the globe. The days were themed around a particular place or country with food, and arts and crafts sessions linked to the chosen place. People we spoke with enjoyed these days.
- People were supported to maintain relationships with those close to them. Staff supported people to call

relatives on the telephone and over video calling and relatives we spoke with told us there were no restrictions on when they were able to visit. The home had an internet café which people made regular use of and were supported by staff to increase their IT literacy.

Improving care quality in response to complaints or concerns

- The provider had processes to ensure complaints were dealt with properly. The service had received no complaints since the last inspection. The provider's processes treated any concerns or complaints as an opportunity to learn and to improve the service. No one we spoke with had any cause for complaint. They were confident any concerns or complaints would be dealt with appropriately. One person told us, "I have no concerns. When I have asked for anything it is done, nothing is too much trouble."

End of life care and support

- The service had processes to support people to have a dignified and pain-free death. At the time of our inspection, the service was not supporting anyone at the end of their life.

# 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.

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

- The registered manager had created a culture that was open, inclusive and put people at the heart of the service. Staff ensured people's needs were met through ongoing review of their care and referenced current legislation and best practice guidance to achieve good outcomes for people. People spoke positively about the care they received.

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

- The management team understood their legal obligations, including conditions of CQC registration and those of other organisations. We found the service was well-organised, with clear lines of responsibility and accountability.
- The registered manager and staff were experienced, knowledgeable and familiar with the needs of people they supported. Staff were enthusiastic about their working roles. All staff had a clear understanding of their job roles and how to provide high-quality care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service engaged with people, others acting on their behalf and staff in an inclusive way. The registered manager used face to face meetings to gain feedback about the service. We saw various topics about the service were discussed in meetings where people were able to influence decision making about the premises, food provision and activities, for example. One person told us the staff and manager continually asked for feedback and said, "We have residents' meetings and we get minutes, all typed up! I have asked for something and it was implemented – I think it was something to do with the food." A relative explained, "Last week I filled in a form about the flower beds being overgrown and they were done within a couple of days."
- The registered manager continually engaged with staff. Staff meetings were held, along with individual meetings with the manager. This gave staff the opportunity to influence how the service was delivered to people.
- The service worked in partnership with a range of healthcare professionals. This helped to ensure people's needs continued to be met and their wellbeing enhanced.

Continuous learning and improving care

- The registered manager used a variety of method to assess, monitor and improve the quality of the service provided. We saw they used audits, feedback from people, their relatives, staff and healthcare professionals to identify areas for improvement. Where improvements could be made, the registered manager consulted people who used the service, so they were involved in shaping how the service developed.

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 provider had a policy and procedure which provided guidance around the duty of candour responsibility if something was to go wrong. The registered manager knew how to share information with relevant parties, when necessary.