

Roseberry Care Centres (England) Ltd

South Park Care Home

Inspection report

Gale Lane
York
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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

South Park Care Home is a residential care home providing personal and nursing care to up to 80 people. The service provides support to people across two units one for people who require nursing care and the other unit specialises in providing care to people living with dementia. At the time of our inspection, there were 63 people using the service.

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

People living at South Park Care Home were happy and safe. Risks to people were assessed and reviewed on a regular basis. Medicines were managed well and the service was clean and welcoming. Staff were recruited safely and understood the principles of keeping people safe

Staff were appropriately trained and received ongoing support from the management team. 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.

Staff were kind and caring towards people. People told us the staff were always available to support their needs. Staff had clear knowledge of people's diverse needs which was clearly recorded within people's care plans. People were treated with respect, dignity, and supported to maintain their independence.

People chose how they wished to spend their time. The service had recently adopted an interactive activities program which people could access as they wished. Complaints were managed well and people receiving end of life care received compassionate care and support.

The provider, registered manager and staff promoted person-centred care and placed people's wellbeing at the heart of their work. Quality assurance systems in place, monitored the service effectively and drove improvements when they were needed. Lessons learnt were used as learning opportunities to continuously develop the service.

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

Rating at last inspection

This service was registered with us on 10 October 2020 and this is the first comprehensive inspection. The last rating for the service under the previous provider was good, published on 14 December 2020. During this inspection we reviewed key questions safe and well led only.

Why we inspected

This inspection was prompted by a review of the information we held about this service and to review the

key questions of effective, caring and responsive under the new provider.

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.

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?

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 ●

South 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

South Park Care 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. South Park Care Home is a care home with nursing care. 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 CQC 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 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 this information to plan our inspection.

During the inspection

We spoke with the registered manager, deputy manager, nurses and care staff. We spoke with 6 people who used the service about their experience of the care provided and 7 relatives and a visiting health professional. We reviewed a range of records. This included 8 people's care records and multiple medication records. We looked at 4 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

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 we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. People told us "I am safe here, the staff are good" and "The staff come quickly when I need them, this makes me feel safe."
- Staff knew what action to take to ensure people were safe and protected from harm and abuse.
- The service had a safeguarding policy in place and the management team followed internal and external processes to keep people safe.

Assessing risk, safety monitoring and management

- Risks to people were recorded, managed appropriately and reviewed on a regular basis. Care plans and risk assessments were detailed and provided staff appropriate guidance to support people safely.
- Staff used recognised risk assessment tools to manage risk and ensure people's safety in line with national guidance and best practice. Risk assessments in relation to falls, tissue viability etc were regularly reviewed and updated as required.
- Fire safety was managed effectively. Staff took part in fire drills and knew how to safely evacuate people from the premises.
- Staff were observed supporting people safely with moving and handling.

Staffing and recruitment

- People were supported by a sufficient number of staff. Comments from staff included, "There is enough staff to support people" and "As the people are increasing, the staffing increases, the management are good at ensuring we have enough staff to meet people's needs."
- Observations on the days of inspection were that staff were always around and we did not hear call bells ringing for long periods of time.
- Staff were recruited safely; appropriate checks were carried out to ensure staff were suitable to work with vulnerable people.

Using medicines safely

- People received their medicines as prescribed. Medicines were stored, recorded and administered safely.
- Where people had 'as required' medicines, such as over the counter pain relief, protocols were in place to guide staff on what medicine the person could be given and how often.
- Records described the support people required with medicines. Medicine administration records were regularly audited and staff were appropriately trained.

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.

Visiting in care homes

- The service accommodated visiting in line with current government guidance.

Learning lessons when things go wrong

- Accidents and incidents were recorded in detail and included actions taken and outcomes to prevent reoccurrence.
- Monthly analyses were completed to help identify trends and themes and lessons were shared with staff.

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.

This is the first inspection of this key question under the newly registered provider. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed prior to moving into the service. Assessments were used to detail people's diverse needs within their care plans.
- Nationally recognised tools were used to help monitor a person's health and well-being. This included assessments of risk for pressure ulcers to support people to maintain healthy skin condition.
- Staff consistently assessed and monitored people's needs, preferences and wishes.

Staff support: induction, training, skills and experience

- People were supported by staff who had the skills and knowledge to care for them effectively. Staff completed a comprehensive induction supported by a structured training program.
- Updated training and refresher courses were scheduled, and competency checks were carried out to ensure training and best practice was understood and practised by all staff.
- Staff felt supported within their role, comments from staff included, "We are very much supported with all areas of our role. We receive good training and supervision meetings" and "You can go to [manager name] and [deputy name] with anything, they are great."

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

- Care plans contained information of people's food preferences and specific instructions around their diets and cultural requirements relating to these.
- The lunchtime experience was positive and calm. We saw carers positively encouraging people to eat and drink in line with their wishes and dietary needs.

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

- Staff worked effectively with healthcare professionals to ensure people's healthcare needs were met. Information about visits and consultations were detailed in people's care plans, including communication with GP's, chiropodists, dentists and opticians.
- Staff understood people's health needs and knew how to access additional support if this was needed.
- Records of professional visits were recorded. Outcomes of these visits were reflected in people's care plans and communicated with their relatives.

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

- People lived in an environment that was suitable for their needs. The interior was bright and colourful, with signage and items of interest displayed along the corridors.
- Some areas of the service required refurbishing. This had already been identified by the provider and registered manager through their quality assurance systems.

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Where people were deprived of their liberty, the registered manager submitted applications to the local authority to seek authorisation to ensure this was lawful.
- The registered manager and staff understood their responsibilities for ensuring people could make decisions about their care and support, and the role of best interest decision making.
- Capacity assessments and best interest meetings were completed with advocates and relatives to ensure decisions were made in people's best interests.

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.

This is the first inspection of this key question under the newly registered provider. This key question has been rated good. 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 cared for and supported by staff that were kind, patient and respectful.
- The service made sure people's human rights, lifestyle choices, religious and cultural diversity was respected and reflected in their care plans.
- Throughout the inspection days we heard staff chatting to people in a relaxed and friendly manner. It was evident good relationships had formed and staff knew people. A relative told us, "The staff are lovely, very kind and caring."

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

- Staff knew people well and supported them to make choices around their preferred routines, likes, dislikes and what mattered to them.
- People were involved in planning their care delivery where possible. Where people were not able to make their own decisions, relatives and advocates were fully involved in the care planning process.
- Regular opportunities were given to people to feedback about the service and regarding their care.

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to maintain their independence. Staff understood and recognised when people needed assistance. Staff approached people in a considerate, sensitive manner to offer support.
- Staff were committed and passionate about treating people as individuals and responded quickly to people's changing needs. This ensured people received the right care and support to enhance their health and wellbeing.
- Confidentiality was maintained at the service.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection of this key question under the newly registered provider. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

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

- The service had an exemplary approach to finding activities that were not just fun, but also helped people to improve confidence, develop relationships and maintain culture and self-identity to meet people's diverse needs.
- The service had recently obtained an interactive activity resource. This provided stimulation for people with dementia and supported people to form friendships within the service.
- The staff supported people keep in touch with friends and family; Visitors to the home were welcome at any time.

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

- Care plans were person-centred and were reviewed on a regular basis. Some care plans required additional information to ensure a person-centred information was fully captured.
- Staff communicated well between each other which ensured all staff had up to date information about people and their needs at all times.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Information was available in an accessible format to meet peoples' needs. Peoples' communication needs were assessed and recognised.

Improving care quality in response to complaints or concerns

- All concerns and complaints at the service were responded to appropriately. All were documented, investigated and clearly recorded.
- People and their relatives knew how to raise concerns and were confident these would be addressed appropriately.

End of life care and support

- The service provided end of life care and support to people. Care plans demonstrated discussions had taken place with people and their relatives about their end of life wishes, and these were clearly recorded.

- To support families the service had a dedicated room available for families to rest in during difficult times.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- People were happy with the support they received and felt comfortable and relaxed in their surroundings. A person told us, "They [staff] are really good to me. They [staff] treat me well and I am very happy."
- The registered manager worked collectively with all staff to demonstrate and embed a positive culture to promote a high standard of person-centred care and support for people.
- Staff were happy in their work and felt supported by the management team. Supervisions and meetings were completed continuously to promote staff development and make improvements within the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 and registered manager were clear about their roles and responsibilities.
- Systems and processes to manage quality within the service were completed on a regular basis. This enabled the service to collate information to show how the service was performing.
- Governance systems drove improvements in the quality of the service. Detailed action plans were completed from these to ensure the quality of the service was maintained.
- Staff all spoke of their high regard and respect for the registered manager and deputy manager. Comments included, "I have the upmost respect for [name of manager] they support us and are excellent in what they do" and "The manager and deputy are so supportive we couldn't wish for a better management team."
- The registered manager had submitted notifications as required by duty of candour legislation.

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

- Information was shared with people, staff and relatives through regular meetings, notice boards and one to one discussion. A relative told us, "They always let me know what's going on and there is information display around the service."
- People and their relatives and friends were involved in the service, and we saw numerous examples of involvement ranging from meetings and letters.
- The service worked closely with other agencies to ensure good outcomes for people.

Continuous learning and improving care

- Opportunities to reflect on practice and lessons learned was fully embedded in the service.