

Loven Richden Park Limited

Richden 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?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Richden Park is a residential care home providing personal to 34 people aged 65 and over at the time of the inspection. The service can support up to 52 people, some of whom may be living with Dementia.

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

People felt safe and well cared for. People were supported to maintain their independence where possible and were positive about staff's approach and conduct.

A registered manager was not in post at the time of the inspection. We discussed this with the provider and explained this would impact on the rating for well-led. The provider gave assurances that a suitable registered manager had been recruited and would commence employment in the near future. In the absence of a registered manager, the service was supported by the business development manager, a care and support coordinator and the regional manager.

Medicines were managed safely, although we identified some minor improvements which were required with people's 'as and when required ' medicines to support staff. The provider took immediate action to improve protocols.

Staff were recruited safely and attended a programme of induction before providing care to people.

The provider had oversight of the quality and safety of the service through audits and gathered feedback from staff and stakeholders. This information was used to improve the service.

Checks were carried out regularly to ensure the safety of the premises for people who live there and staff.

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.

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 December 2018).

Why we inspected

We received concerns in relation to the safety of people living at the service and a lack of support with nutrition and hydration. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe 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 Richden Park 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Richden 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 was carried out by two inspectors.

Service and service type

Richden Park is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with eight members of staff including the regional manager, the business development manager,

the care and support coordinator, the deputy manager, a senior care assistant, two care assistants and the head chef. We spoke with three people who used the service about their experience of the care provided.

We reviewed a range of records. This included four people's care records and supplementary records. We reviewed three staff files in relation to recruitment and staff supervision. A range of records relating to the management of the service, including policies and procedures were also 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with two relatives of people who used the service and one professional.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person told us, "I like it here; I feel safe and the staff are quite nice."
- Systems and processes were in place to safeguard people from the risk of harm or abuse. The management team reviewed these regularly.
- Staff received training in safeguarding awareness and understood their responsibilities. Staff knew how to report concerns.

Assessing risk, safety monitoring and management

- Risk assessments were completed in consultation with people receiving care and support. Reviews took place when people's care and support needs changed.
- Accidents and incidents were reported by staff and reviewed by the management team. Action was taken to aid learning and reduce the risk of similar incidents occurring.
- Fire safety checks were carried out and personal emergency evacuation plans were in place to support a safe evacuation.
- The premises were clean and tidy. All areas were maintained to a good standard.

Staffing and recruitment

- There was an adequate number of suitably trained staff to support people.
- Staff were recruited safely and attended a programme of induction and training before supporting people.
- Staff received supervision to support them in their roles.
- We observed meaningful interactions between staff and people who used the service.

Using medicines safely

- Medicines were managed safely, and people received their prescribed medicines in time.
- Protocols were in place for people's 'as and when required' medicines. However, they lacked information to support staff when to administer PRN medicines. We discussed this with the management team who took immediate action to improve and update records.
- Staff received training and regular supervision around administering medication safely.

Learning lessons when things go wrong

- The provider consulted with people who used the service and their advocates when they were dissatisfied with any aspect of their care and support.
- Regular staff meetings were held to share information and improve the service.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured 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 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 good. At this inspection this key question has now deteriorated to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

There was no registered manager in post at the time of the inspection and we have not received an application which has been approved. We discussed this with the regional manager and explained that we can only award a rating of requires improvement in this domain. The regional manager provided assurances that a suitable registered manager has been recruited and will be joining the service in the near future.

- Staff felt supported by the management team in the absence of a registered manager. The deputy manager and senior management team ensured consistent support was available to people and staff.
- Staff told us, "We are in a transition, staffing levels are improving, things are getting better."
- The provider carried out audits and other checks to monitor the quality and safety of the service.
- The provider had identified some shortfalls in the quality of the service provided and was working to make improvements.
- The provider was aware of their regulatory responsibilities and submitted notifications to the Care Quality Commission and other agencies where required following accidents and incidents.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There had been limited engagement with relatives of people who used the service. We shared this information with the management team following inspection who provided assurances they would look to undertake improvements in this area.
- Staff spent time with people getting to know their wishes and feelings. Staff told us, "The quality of the service is high because we all genuinely care, we put people first."
- Staff meetings took place regularly to address any areas of concern and share information.

Continuous learning and improving care; working in partnership with others

- Staff were encouraged to complete reflective practice following accidents and incidents.
- The provider worked in conjunction with GP's, district nursing teams and other health care professionals to ensure people's care and support needs are met.

- The provider had a dedicated number of rooms available to support local hospital discharges.