

Spring Mount Specialist Care Home Limited

Spring Mount

Inspection report

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15 September 2020

17 September 2020

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09 October 2020

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service effective?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Spring Mount is a residential care home providing personal care to 25 people living with dementia. The home supports younger adults and people over the age of 65. At the time of the inspection there were 22 people living at the home.

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

Improvements had been made to the quality assurance systems and the shortfalls identified at the last inspection had been addressed.

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. We have made a recommendation about updating people's documentation to fully reflect their and/or their representatives' involvement.

The home was clean and well maintained and surrounded by spacious gated grounds. The home had an open-door policy. This meant people were able to come and go freely from the house into the gardens.

People and relatives were happy with the care provided. People looked well cared for and comfortable. One person said, "It's a great place to be."

People's medicines were managed safely. The service aimed to promote an environment where people living with dementia were supported without the use of sedating medication. The staff team were experienced and consistent and had a good understanding of how to care for people who lived at the home.

The registered manager provided people with leadership and was approachable.

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 (published 16 July 2019) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this targeted inspection to check whether the requirement notices we previously served in relation to Regulations 12 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Spring Mount 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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service effective?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Spring Mount

Detailed findings

Background to this inspection

This was a targeted inspection to check whether the provider had met the requirements of the Requirement Notices in relation to Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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

The inspection was undertaken by one inspector.

Service and service type

Spring Mount 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 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 announced. We gave the service short notice of our inspection. Due to the COVID-19 pandemic, we needed to check the COVID-19 status of the home and plan to enter the home safely to reduce the risk of infection transmission. Inspection activity started on 15 September 2020 and ended on 22 September 2020. We visited the home on 17 September 2020.

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 asked the provider to send us records including audits and training records. 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 used all this information to plan the inspection.

During the inspection

We observed care in the garden and communal areas, including the lunch-time service. We spoke with two people who used the service about their experience of the care provided. We spoke with five members of staff including the registered manager, team leader, senior care worker and care workers. We reviewed a range of records. This included five people's care records and multiple medication records. A variety of records relating to the management of the service were reviewed.

After the inspection

We spoke with three relatives about their experience of care provided.

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. 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. The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to monitor the risks to people's health and safety. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

At this inspection sufficient improvements had been made and the provider was no longer in breach of Regulation 12.

- Risk to people's health and safety were assessed and a range of risk assessments completed. Staff understood people's needs well and how to manage the risks they were exposed to.
- People were supported safely with their moving and handling requirements. Staff received training, including regular recorded observations. Moving and handling plans were clear and regularly reviewed.
- We observed people being supported gently by staff to move around the home and change position.

Using medicines safely

At our last inspection the provider had failed to manage people's medicines safely. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

At this inspection sufficient improvements had been made and the provider was no longer in breach of regulation 12.

- Medicines were managed safely.
- Staff who supported people with medicines received regular training. Competency assessments were completed every six months.
- Protocols were in place for people who needed 'as and when required' medicines. However, they would benefit from more person-centred details to ensure medicines were administered consistently.

Preventing and controlling infection

- The home was clean and well maintained. Effective measures were in place to prevent and control the spread of infection.
- The registered manager and staff had a good understanding of the COVID-19 infection control guidance.

- Systems were in place to ensure staff and people were able to access regular testing.
- Staff confirmed they had received support and guidance from the registered manager throughout the COVID-19 pandemic. One care worker said, "We've had brilliant support."

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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about. The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to maintain clear records about people's capacity to consent to their care. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

At this inspection sufficient improvements had been made and the provider was no longer in breach of Regulation 17.

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.

- Capacity assessments had been completed. Where people lacked capacity to make decisions for themselves clearer information about their capacity and showing information had been made in their best interests needed to be recorded. Individual decisions need to be recorded in a clearer way to show the involvement of people and their representatives.

We recommend the provider seeks advice and guidance from a reputable source, about working within the principles of MCA.

- Appropriate DoLS applications had been made in a timely manner.

- People were able to make choices which were respected by staff. One care worker said, "We offer as much choice as possible. It's the little things that matter."
- Relatives confirmed people were encouraged to maintain their independence and make their own choices.

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

At our last inspection the provider had failed to monitor people's eating and drinking where risks had been identified. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

At this inspection sufficient improvements had been made and the provider was no longer in breach of Regulation 17.

- People's nutritional needs were assessed and met by the service. People's weights and details of their food and fluid intake were monitored where it was part of their care plan.
- Staff had a good understanding of people's nutritional needs.
- The mealtime experience was relaxed and sociable. Where people needed help with their meals this was done sensitively and not rushed.
- Relatives confirmed staff responded quickly to any changes and kept them up to date. One relative commented, "When [person] lost weight they were really onto it."

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. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about. The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to monitor the quality and safety of the service. Systems and processes were not effective. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activity) Regulations 2014.

At this inspection sufficient improvements had been made and the provider was no longer in breach of Regulation 17.

- Quality assurance systems had improved. Audits were in place and we saw action was taken when issues were identified.
- The home had a Service Improvement Plan. This demonstrated the provider's commitment to ongoing development and improvement.
- Shortfalls identified at the last inspection had been addressed. For example, fire drills had improved and included all staff. There was a system in place to review care plans monthly and they contained current and person-centred information. Staff training had been kept up to date.
- Relatives and staff praised the home and the way it was run. There was a warm and inclusive atmosphere. One relative said, "It feels like a family."