

# Barchester Healthcare Homes Limited

# North Park

## Inspection report

L'Anson Street  
Darlington  
County Durham  
DL3 0SW

Tel: 01325356000  
Website: [www.barchester.com](http://www.barchester.com)

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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

North Park is a residential care home providing accommodation and personal care to 55 older people and people living with dementia at the time of our inspection. The service can support up to 60 people in one adapted building over three floors.

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

People and their relatives told us they felt safe and secure living at North Park and feedback was positive about the home and the management of the home. 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.

Medicines were administered, recorded and managed safely. Infection prevention control practices were in place. All essential visitors had to wear appropriate personal protective equipment (PPE). Additional cleaning of all areas and frequent touch surfaces was in place and recorded regularly by staff. COVID-19 related training was in place to support infection control practices.

There were systems in place for communicating with people, their relatives and staff regarding people's care and support. The environment was clean, safe and maintained to a good standard. It was also adapted to meet people's needs.

Individualised risk assessments were in place to ensure people could take risks safely. Staff were confident about how to raise concerns to safeguard people. Robust recruitment and selection procedures ensured suitable staff were employed safely.

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

The last rating for this service was good (published 11 December 2019).

### Why we inspected

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

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 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.

# North Park

## 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.

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

One inspector and an Expert by Experience carried out this inspection. 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

North Park 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 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 information helps support our inspections. 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 our inspection.

#### During the inspection

We spoke with three people who used the service and eight relatives about their experience of the care provided. We spoke with five members of staff, the registered manager and regional manager. We reviewed a range of records. These included four people's care records and eight people's medication records. We looked at staff records in relation to recruitment and other records relating to the management of the service, including; audits, accidents and incidents, safety checks on equipment, minutes of meetings, policies and procedures and quality assurance records.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance and records relating to the management of 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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- There were enough staff to meet people's individual needs and maintain their safety.
- Staffing levels were adequate. The registered manager used a dependency tool to calculate the correct staffing levels and increased this when people's needs changed. However, we received mixed feedback regarding perception of staffing levels in the home and we raised this with the registered manager who gave assurances.
- Staff were recruited safely. The provider's processes included robust checks to ensure only suitable staff were employed.

### Assessing risk, safety monitoring and management

- People were supported to take risks in everyday life safely and had visiting wasn't restricted PPE was made available for visitors personalised risk assessments in place to reduce risks.
- Fire safety practices helped ensure people's safety and included regular fire drills and checks of equipment used by staff.
- A fire safety risk assessment was in place and actions highlighted were completed along with actions identified by the local fire department.

### Learning lessons when things go wrong

- Accidents and incidents were recorded on an individual basis. The registered manager analysed these to look for any patterns or trends and took appropriate action to minimise risk of further incidents.
- Where trends were identified through analysis, action was taken by the registered manager. For example, additional measures were implemented as a result of increased fall incidents to reduce risks.

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

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. We observed positive interactions, between staff and people living at the home.
- There were effective safeguarding and whistleblowing procedures in place at the home. Staff told us they would report any harmful or abusive practice they witnessed.
- Relatives felt their family members were safe at the home. One person told us, "Yes, I do feel safe. The carers are really good, nice and friendly."

### Using medicines safely

- Medicines were managed and administered safely.
- People received their medicines as prescribed and at the right time. Medicine records were clear for staff

to follow and were accurately completed.

- Clear guidance and procedures were in place to manage medicines for people who took them as and when required.

#### 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 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.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.



# 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 remained the same. 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 provider and management team worked hard to instil a culture of care in which staff truly valued and promoted people's individuality and protected their rights.
- Management and staff put people's needs and wishes at the heart of everything they did. The atmosphere within the home was relaxed and welcoming. One relative told us, "The manager I know her. She listens. Talked me through everything at the beginning and I feel I could ring her and chat through anything."

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

- The provider sought feedback from people and those important to them. They used the feedback to develop the service. One relative told us, "I've seen notices up about a meeting and I've had a questionnaire handed to me to make a comment on the website. I will do that. The atmosphere is calm, they all know what they're doing, all knowledgeable."
- Staff we spoke with all felt involved in developing and improving the service. Staff meetings took place, but the registered manager also had an open door policy and staff felt able to raise any issues or ideas outside of meetings.

Continuous learning and improving care

- The provider kept up-to-date with national policy to inform improvements to the service. The staff were aware of the latest government guidance in relation to COVID-19. One member of staff told us; "The manager is always updating us on where we are at with COVID-19 guidance, as and when it changes".

Working in partnership with others

- Staff at the home worked closely with a range of external professionals such as occupational therapists and district nurses.

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

- Policies and procedures were current and in line with best practice.
- The registered manager carried out audits which included action plans for improvement where needed.
- The provider understood their legal responsibility to notify CQC about incidents that affected people's safety and welfare. They had sent us notifications relating to significant events occurring within the service.

Continuous learning and improving care, working in partnership with others

- The registered manager took on board the opinions and views of people who used the service and had put regular house meetings in place for people to share their ideas and views. Questionnaires were used to collect relatives views.

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 registered manager understood their responsibility around the duty of candour and showed commitment to openness and honesty when something went wrong. And was able to share examples with us and demonstrated how they had taken appropriate action.
- The service had good working relationships with the local authority and commissioners and shared information appropriately.
- The registered manager was open with the inspector during the inspection and took on board suggestions for improvements.