

Platinum Nursing Care Ltd

Platinum Nursing Care

Inspection report

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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

Platinum Nursing Care is a residential care home providing personal and nursing care to up to 32 people aged 65 and over. At the time of our inspection, the care home accommodated 32 people across three wings, each of which has separate adapted facilities. One of the wings specialises in providing care to people living with dementia. People with nursing needs were supported on other units.

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

Risks to people's health and safety were assessed and well managed. Safeguarding concerns were reported and referred to the local authority and notified to us, The Care Quality Commission (CQC) as required. Medicines were managed safely, and we were assured by the infection control measures within the home. There were enough staff and staff were recruited safely. Lessons were learnt and changes made to improve the care provided and systems within 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.

Governance systems provided regular monitoring and audits of the quality and safety of care provided. When issues or areas for improvement were identified, actions were taken to address them. Staff, people, relatives and professionals spoke positively about the home and the staff. Staff felt well supported, valued and included. Relatives were kept informed and told us the home was well managed and organised. Important events and incidents were notified to us as required. People, relatives, visitors and staff were encouraged to give feedback and make suggestions for improvements. Staff were supported to undergo further training and development, and some were supported to undertake their nurse training. The provider worked closely with external health professionals to improve people's outcomes.

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 19 August 2022). 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 carried out an unannounced comprehensive inspection of this service on 6 and 13 July 2022. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

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 .

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Platinum Nursing Care on our website at www.cqc.org.uk

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?

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.

Platinum Nursing Care

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.

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 team consisted of 2 inspectors, a specialist nurse advisor 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

Platinum Nursing Care 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. Platinum Nursing Care 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 the Care Quality Commission 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 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 5 people and 7 relatives for their feedback on the care provided. We spoke with 11 members of staff including the nominated individual, registered manager, clinical lead, a nurse, senior care staff, care staff and maintenance and 1 professional who worked with the service. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We looked at 7 people's care plans, a variety of medication administration records and carried out observations of people receiving care. We also reviewed a number of documents relating to the management and governance of the service including environmental checks, audits, training records and recruitment files.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a continued breach of regulation 12(1) 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.

- Risks to people's health and safety were assessed and guidance to manage those risks were included in people's care plans.
- At our last inspection, some people assessed as needing bed rails and bumpers did not have them, and risks relating to bed rails were not managed safely. Systems had been implemented to ensure this risk was thoroughly assessed. People assessed as needing bed rails and bumpers had these in place and were set at the correct height.
- At our last inspection, catheter were not managed safely. At this inspection, people's catheters were managed in accordance with best practice guidelines.
- Regular checks of the environment and premises were carried out to monitor environmental safety and risks.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Systems and processes to safeguard people from the risk of abuse

- We received positive feedback from people about their feelings of safety. One person said, "I do feel safe

because the staff are there when I need them." Another person said, "I feel safe yes, they look after me well."

- Staff received safeguarding training to help them identify potential safeguarding concerns and were confident reporting concerns to management.
- Safeguarding concerns were reported to the local authority and notified to us, CQC, as required.

Staffing and recruitment

- There were enough staff to meet people's needs. Our observations and feedback confirmed this. One person said, "The carers are brilliant they've always got time to chat without me asking." A relative said, "When [person] presses their bell, staff respond quickly. It's the same when we've been there."
- Staffing numbers were adjusted in response to people's changing needs, to ensure people received safe care.
- Staff were recruited safely. Recruitment checks included reference requests and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed safely, and people received their medicines as prescribed.
- Medicines were regularly audited to identify where improvements were needed.
- Staff were trained and their competencies assessed to ensure only staff signed off as competent could support people with their medicines.

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

There were no restrictions on visiting and people were encouraged and supported to have visitors when they wished.

Learning lessons when things go wrong

- New systems were implemented in response to previous inspection findings and through the provider working in partnership with external agencies. For example, a warning triangle was located on people's bedroom walls which alerted staff to whether people should have bed rails and bumpers, and the height their beds should be set at. Regular audits were carried out to ensure they remained relevant to people's needs.
- Accidents and incidents were recorded and analysed for trends and patterns. One person had frequent falls due to a health condition. The registered manager worked closely with external health professionals and identified trends of when the falls occurred. This person was supported to receive 1:1 support and their falls significantly reduced.

- Handovers were changed to combine both care and nursing staff in response to this being identified as an area to improve consistency and clarity in communication.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people.

At our last inspection systems to assess, monitor and improve the quality and safety of care did not always operate effectively. This was a continued breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Enough improvement had been made and the provider was no longer in breach of regulation 17.

- A variety of audits and quality assurance checks were now carried out to monitor and improve the safety and quality of care provided to people. When improvements or changes were identified, monthly action plans were developed to address this.
- Staff understood their roles and how to manage risks to people's health and safety. There was a team approach to improving people's care, where views and opinions to make things better were valued and encouraged. Staff felt well supported by management, and each other.
- We received positive feedback from staff about working about Platinum Nursing Care. Comments included, "I love coming to work, it's like an extended family, "I love working here, it's been like a second home." Another comment was, "This is the best home I've worked in because the residents are fab, and the staff and managers bend over backwards for them."
- We also received positive feedback from relatives. One relative said, "They seem to have a camaraderie amongst staff. It seems well organised. They answer the phone quickly." Another relative said, "The staff know her really well, her care is really good. They talk to her, the communication is great. They ring me with any changes. They go above and beyond."

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 understood their responsibilities in relation to duty of candour. When incidents occurred, this information was shared with people's families where appropriate.
- Important events and incidents were notified to CQC as required.

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

- A suggestion box had been implemented to encourage people, relatives and visitors to the home to give feedback. In response to feedback, a resident's newsletter had been introduced.
- People were encouraged to help plan different activities in the home and give their feedback, to ensure activities were provided based on what people enjoyed. For example, people gave very positive feedback about the 'exercise man' who visited the home once a week. In response to this feedback, the provider increased these visits to twice a week.
- Staff were encouraged to share their views through staff meetings and supervision. The provider and registered manager operated an 'open door' policy to encourage staff to talk freely. One staff member said, "We have monthly staff meetings, night staff meetings and other teams also meet such as housekeeping and maintenance and catering. It's an open space for discussions, such as different shift needs."
- Picture cards with different languages were used to support communication with people whose first language was not English. A list of basic words and phrases were also located on people's bedroom walls.
- Software was installed on the provider's computer system to support staff with dyslexia to ensure it was accessible.

Continuous learning and improving care; Working in partnership with others

- The provider and registered manager were committed to continuous learning, training and development to improve staff knowledge and skills. This led to positive outcomes for people and a significant improvement in the quality of care provided.
- Some staff had decided to undertake nurse training, as a result of their experiences of working at the home. They said, "Training is really good. Every month there are training programmes. That's what made me get into University, being here." Another staff member said, "Working here has inspired me to become a student nurse."
- The provider worked closely with external health professionals to improve people's outcomes and ensure people received specialist healthcare when they needed it.