

Waters Park House Limited

Waters Park House

Inspection report

Exmouth Road
Stoke
Plymouth
Devon
PL1 4QQ

Tel: 01752567755

Website: www.waterspark.co.uk

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17 November 2020

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Waters Park is registered to provide nursing care for up to 23 people. They support people who have experienced a brain injury or a diagnosis which impacts on the brain such as Huntington's or a stroke. People may have mental health, physical disabilities or a sensory impairment due to the impact of their condition.

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

People were relaxed and comfortable with staff and interacted well with each other. Staff were caring and spent time talking with people as they moved around the service.

There were sufficient staff on duty to meet people's needs. The service used its own agency staff, in limited numbers, to cover any shifts.

The building was clean, and there were appropriate procedures to ensure any infection control risks were minimised.

Cleaning and infection control procedures had been updated in line with Public Health England (PHE) Covid-19 guidance to help protect people, visitors and staff from the risk of infection. During the summer months some families had met people in the park opposite to the service. New arrangements were in place for families to meet in a safe area of the service during the winter months.

The staff at the service wore a uniform when at work. The management and staff were in discussion about being encouraged and supported to wear a different set of clothes once in the building and change out of those clothes before leaving the premises to help with infection risks. We have made a recommendation about this issue.

People received their medicines safely and on time. Clear procedures were in place and staff received medicines training.

The service had suitable safeguarding systems in place, and staff knew how to recognise and what to do if they suspected abuse was occurring.

Care plans included risk assessments and guidance for staff on how to meet people's support needs. Risk assessment procedures were satisfactory so any risks to people were minimised. Both care plans and risk assessments had been updated to include actions to be carried out in the event of an outbreak of Covid-19.

The service was managed effectively. Staff felt supported. There were appropriate audit and quality assurance systems in place.

Rating at last inspection

The last rating for this service was Good (published 6 April 2018).

Why we inspected

We undertook this targeted inspection to check on specific concerns we had about staffing levels, staff training, staff supervision and recruitment practices. We also looked at medicine management and care plans as concerns were raised they had not been updated. Other issues of concern included, not reporting safeguarding concerns, complaints not being followed up and incomplete audits. There was also concerns over the management of the service and a lack of staff support. The overall rating for the service has not changed following this targeted inspection and remains as good.

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 found no evidence during this inspection that people were at risk of harm from these concerns.

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 Waters 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?

Inspected not rated.

At our last inspection we rated this key question as good. 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?

Inspected not rated.

At our last inspection we rated this key question good. 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

Waters Park House

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.

This was a targeted inspection to check on a specific concern we had received about staffing levels, staff training, supervision and recruitment practices. We also looked into medicine management and reports that care plans had not been updated. Other issues of concern included, not reporting safeguarding concerns, complaints not being followed up and incomplete audits. There was also concerns over the management of the service and lack of staff support.

As part of this inspection we looked at the infection prevention and control 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 two inspectors.

Service and service type

Waters 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.

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. 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.

During the inspection

We briefly observed people who used the service and spoke to six staff, the registered manager, clinical lead and two registered nurses. We observed staff providing care and support to people during our visit from a socially distanced position.

We reviewed a range of records. This included three people's care records and a sample of medicine records. A variety of records relating to the management of the service, including audits and a safeguarding notification sent to CQC.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training records and medicine audits.

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. 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 specific concerns we had about staffing levels, staff training, staff supervision and recruitment practices. We also looked at whether care plans had been updated and medicine management. Other issues of concern included, not reporting safeguarding concerns, complaints not being followed up and incomplete audits. There were also concerns over the management of the service and a lack of staff support. We will assess all of the key questions at the next comprehensive inspection of the service.

Staffing and recruitment

- Recruitment practices were completed and included pre-employment checks from the Disclosure and Barring Service (Police) undertaken before new staff started work.
- Staff told us there were enough staff on duty to meet people's needs and keep them safe.
- Staff confirmed they received supervision and updated training that was completed in-house or online due to the pandemic.
- The service used agency staff to cover shifts. However, they were regular agency staff as set out in the recent government guidance during the Covid-19 Pandemic.

Using medicines safely

- Medicines were managed safely and records regularly audited. Any issues identified were addressed and resolved.

Systems and processes to safeguard people from the risk of abuse

- The provider had safeguarding systems and complaints procedures in place and notified us and the local authority safeguarding team with any concerns.
- People were protected by staff who had an awareness and understanding of the signs of possible abuse. Staff felt any concerns they reported would be taken seriously.

Assessing risk, safety monitoring and management

- Risks were identified, and staff had guidance in place to help them support people to reduce the risk of avoidable harm.
- Updated risk assessments were in place to cover a Covid-19 outbreak. These risk assessments outlined the support people would need if they tested positive at their regular Covid-19 testing.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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. However, we recommend that the provider takes further measures to mitigate risk by encouraging and supporting staff to change their clothes on site at the beginning and end of each shift.

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. 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 specific concerns we had about staffing levels, staff training, staff supervision and recruitment practices. We also looked at whether care plans had been updated and medicine management. Other issues of concern included, not reporting safeguarding concerns, complaints not being followed up and incomplete audits. There was also concerns over the management of the service and lack of staff support. 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

- The management team were very visible in the service and took an active role in the running of the service.
- Staff felt respected, valued and supported and said they were fairly treated. There was a positive attitude in the staff team with the aim of trying to provide the best care possible for the people living at the service. Staff said of the management team, "The management is very supportive", and another said, "Always there when needed."
- The management team understood their role in terms of regulatory requirements. For example, notifications were sent to CQC when required to report incidents that had occurred and required attention. Audits showed all incidences and accidents were followed up.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff were motivated and fully focused on ensuring people's needs were met.
- The provider's systems ensured people received person-centred care which met their needs and reflected their preferences.
- People's care plans supported staff to provide individualised care now and if people had a positive Covid-19 test.

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

- Staff told us the service was well managed and they felt valued. Staff told us the management team were very approachable and always available for advice and support.

Continuous learning and improving care

- The company used feedback and analysis of accidents, incidents and safeguarding to promote learning and improve care.

- Organisational audits were in place and used to develop the service by reflecting good practice.
- The registered manager, clinical lead and registered nurses attended local and national forums, currently online arrangements, to help ensure they remained up to date with best practice. They implemented new ways of working or planned training to ensure these were implemented in the service. For example, following the pandemic outbreak they receive updated information and training to share with staff and people living in the service.

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

- Responsibilities under the duty of candour were fully understood by the provider, the registered manager and staff team.