

Yorkcare Homes Limited

# Tranby Park Care Home

## Inspection report

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Outstanding ☆

# Summary of findings

## Overall summary

### About the service

Tranby Park Care Home is a residential care home providing personal care for up to 64 younger adults and older people who may be living with a physical disability or dementia. Accommodation is provided in one purpose-built building over three floors. 'Haven' on the second floor supports people living with dementia. The service was supporting 32 people at the time of our inspection.

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

The service was extremely well-led. The registered manager was committed to continually improving the service, promoting people's wellbeing and providing support to improve their quality of life. There was a distinctive person-centred culture within the service in which feedback was actively encouraged, and used to drive improvements. People felt empowered to share their opinions and their views were at the heart of how the service was run. Robust and regular audits were used to continually identify and address any issues relating to the quality and safety of the service. The provider and registered manager were proactive and highly motivated in striving for excellence.

People received safe and effective care and support to meet their needs. Staff were kind and caring in the way they supported people to maintain their dignity.

People were protected from the risk of abuse and avoidable harm. Staff were safely recruited, and they understood their responsibility to identify and report any safeguarding concerns. The registered manager was proactive in reporting and responding to any issues or concerns.

Medicines were managed and administered safely. The environment was clean, safe and well-maintained.

People's needs were assessed, and risks identified. Care plans and risk assessments were put in place and regularly reviewed. This ensured staff had the information they needed to provide effective care. Staff worked closely with healthcare professionals to promote people's health and wellbeing. We made a recommendation about reviewing how monitoring charts were used to check and make sure people's needs were met.

Sufficient staff were deployed to safely meet people's needs, although people told us they sometimes had to wait for assistance at busy times. The registered manager continually monitored staffing levels to help identify any issues or concerns.

Staff completed a comprehensive range of training. Regular supervisions and ongoing support helped staff to feel valued, build their confidence and support them to continually improve and develop their practice.

People benefitted from a spacious purpose-built environment, which was specifically designed to meet their needs.

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.

People had the opportunity to participate in a wide range of meaningful activities.

Staff were compassionate, respectful and kind in their approach to planning and meeting people's needs at the end of their life.

For more details, please see the full report which is on the Care Quality Commission's (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk).

Rating at last inspection

This service was registered with us on 22 August 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on when the service was registered.

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 effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was extremely well-led.

Details are in our well-led findings below.

Outstanding ☆

# Tranby 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.

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 was completed by three inspectors 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

Tranby Park Care Home 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 CQC. 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

The first day of our inspection was unannounced. The second day of our inspection was announced.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered. 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 this information to plan our inspection.

#### During the inspection

We spoke with eight people who used the service and four people's relatives about their experience of the care provided. We spoke with the registered manager, the provider's clinical lead, a unit manager, a care worker and the maintenance person.

We reviewed a range of records. This included eight people's care records and multiple medication records. We inspected two staff files in relation to recruitment, training and staff supervision. A variety of records relating to the management of the service, including audits and policies and procedures were also reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We requested and reviewed additional records including training data, staff rotas and other records relating to the management of the service.

We spoke with one person's relative, three members of staff, and the provider's 'nominated individual' by telephone. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also received feedback from five people's relatives and six members of staff.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were supported to stay safe by staff who were trained to identify and respond to any safeguarding concerns.
- The registered manager was very transparent in reporting any issues or concerns to the local authority's safeguarding team. This helped to safeguard people from the risk of abuse or neglect.

Assessing risk, safety monitoring and management

- People felt safe living at Tranby Park Care Home. One person explained, "I do feel safe and secure here knowing there is someone around if you need them."
- People received safe support to meet their needs. Risk assessments provided guidance for staff on how to safely support people to maximise their independence whilst minimising risks.
- Regular checks and servicing helped to ensure the environment and any equipment used was safe.

Learning lessons when things go wrong

- People received timely care and support if they were involved in an accident or incident. Staff responded to report any issues and helped people to seek medical attention if needed.
- There had been a high number of accidents and incidents. The registered manager continually monitored and analysed these to make sure appropriate action had been taken to help prevent a reoccurrence.

Staffing and recruitment

- People were supported by safely recruited staff. Appropriate recruitment checks had been completed, and a person who used the service had been involved in the recruitment process, to help make sure suitable staff were employed.
- Enough staff were deployed to safely meet people's needs, although some people said they had to wait for support at busy times, particularly at night.
- The registered manager continually monitored staffing levels and checked how quickly staff responded to people to help make sure enough staff were on duty to safely meet people's needs.

Preventing and controlling infection

- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was using personal protective equipment 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'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.
- We were assured the provider was preventing visitors from catching and spreading infections.

#### Using medicines safely

- People received safe support to take their prescribed medicines.
- Staff received training and their competency was checked to make sure they understood how to safely administer medicines.
- Management completed regular audits of how medicines were received, stored, recorded and administered. Any issues identified were investigated and addressed to help make sure medicines were managed and administered safely.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People received effective care and support to help meet their needs and improve their quality of life.
- People's needs were assessed, and care plans put in place to support and guide staff to deliver effective care.
- Staff used electronic care records, which helped management to monitor and make sure people's needs were met.
- There were some gaps on monitoring charts, used for example to make sure people were supported to reposition regularly, and reduce the risk of developing skin damage.

We recommend the registered manager reviews how monitoring charts are used to monitor and make sure people's needs are met.

Staff support: induction, training, skills and experience

- People gave generally positive feedback about the effective care and support staff provided.
- Staff received a comprehensive induction to the service, shadowed more experienced staff and completed a wide range of training to support them to provide effective care.
- Staff consistently praised the training and support provided. Comments included, "The training and support I have been given is outstanding" and, "The support and guidance I have received from staff and the management team has been immense."
- Regular supervisions and annual appraisals, alongside observations and competency checks helped management monitor and make sure staff had the skills and experience necessary to provide effective care.

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

- People were supported by staff where necessary to help make sure they ate and drank enough.
- A varied menu was in place and people had choices about what to eat and drink at mealtimes and throughout the day.
- People gave mixed feedback about the quality and choices of food available at times. The registered manager was aware of this feedback, and had worked hard to continually monitor the support provided and respond to people's individual preferences.
- People were regularly weighed, and the registered manager completed a monthly audit to monitor and make sure appropriate action had been taken where people were at risk of malnutrition.

Adapting service, design, decoration to meet people's needs

- People benefitted from living in a spacious and homely environment, which had been decorated to a high standard and was specifically designed to meet their needs.
- The provider had won an award for the design of the service. There were numerous communal and quiet areas, including lounges, bar areas, shops and a cinema. There were safe and accessible outdoor spaces for people to use and enjoy.
- People had spacious en-suite bedrooms and had been encouraged to decorate and personalise this space according to their individual preferences.
- The provider had taken positive steps to create and maintain a comfortable, accessible and stimulating dementia friendly environment.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to access healthcare services when needed. Staff worked closely with external professionals to promote people's health and wellbeing and support them to achieve good outcomes.
- The provider had purchased a suction machine (used if someone is choking on food) and a defibrillator (used if someone is having a heart attack) to help improve the chances of a positive outcome if people needed urgent medical attention.

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

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 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.

- People were involved in decisions about their care; staff sought and recorded people's consent to the support they provided.
- Where people were unable to make certain decisions for themselves, appropriate protections were in place to help make sure decisions made on their behalf were in their best interests.
- People's human and legal rights were protected as appropriate applications had been made when necessary to deprive people of their liberty.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect. (ensure there is a full stop at the end of the sentence)

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People received caring support from well-trained staff. Feedback included, "All the staff are lovely, and very caring." A relative explained, "The caring staff at Tranby Park Care Home are wonderful. They are all, without exception, caring, professional, patient, kind and attentive."
- Staff were attentive and kind in the way they spoke with and supported people. They took time to sit with people and comfort them if they were anxious or upset and needed reassurance.
- People shared positive caring relationships with the staff who supported them and enjoyed their company. One person explained, "Some of the staff are really nice and we have a laugh. There is a nice atmosphere here."

Supporting people to express their views and be involved in making decisions about their care

- People felt empowered to express their views and to make decisions about their care. They chose how to spend their time and staff respected people's wishes.
- Staff routinely offered people choices and supported them to be involved in making decisions. For example, at mealtimes people had a choice of what to eat and drink and were shown options to help them decide.
- People's care plans reflected their wishes and views and showed they had been encouraged to make decisions and be involved in planning their care.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were maintained by the kind, respectful and discreet staff. A relative said, "The staff are kind, compassionate and respectful."
- People were supported to take pride in their appearance and to maintain their dignity. Staff were attentive in supporting people to meet their personal care needs and dress according to their individual personal preferences.
- Staff spoke with people in a respectful and kind way. They provided patient and unrushed support to meet people's needs and promote their independence.
- Staff respected people's privacy and personal space; they knocked on their bedroom doors before entering people's room.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People gave generally positive feedback about the person-centred care staff provided. Feedback included, "The staff are mostly really good and caring."
- Staff were observed providing very patient and attentive care; although we spoke with the registered manager about developing a more person-centred approach to organising and supporting people at mealtimes on Haven.
- Care plans contained person-centred information to guide staff on how best to support each person. The care plans were regularly reviewed to help make sure staff had up-to-date information about people's care and support if their needs changed.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed, and information recorded in their care plans to guide staff on how to share information in an accessible way.
- Staff spoke with people in a person-centred way. This helped make sure people could understand what was being communicated and be involved in decisions.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People had the opportunity to take part in a wide range of regular and meaningful activities. A relative explained, "The range of activities is endless, and they take great care to try and include everyone."
- The provider employed an activities coordinator and had a comprehensive activity plan in place. People were encouraged to give feedback about the activities and make suggestions about what they would like to do.
- The provider had been proactive in ensuring people could meet safely with family and friends throughout the COVID-19 pandemic. This helped people to maintain important relationships and to avoid social isolation.

Improving care quality in response to complaints or concerns

- People felt confident speaking with staff or management if they were unhappy about the service or needed to complain.

- The provider had a complaints procedure setting out how they managed and responded to any complaints. Surveys, audits and meetings were also used to encourage people to give feedback and raise any issues so these could be addressed.
- The registered manager was very proactive in responding to concerns. For example, offering to meet with people to understand and explore any issues they had.
- The registered manager took consistently positive steps to try and address people's concerns and make improvements in response to feedback.

#### End of life care and support

- People were supported to have a comfortable, dignified and pain-free death.
- Staff encouraged people to share their wishes and views, and to make decisions about their preferences for end of life care.
- Information was recorded in people's care plans about any decisions they had made, including whether they had refused to be resuscitated.
- Staff were very respectful and kind in their approach to end of life care. For example, staff had created a 'memory box' for a person's family member who could not be with them approaching the end of their life. They had supported people to attend a virtual funeral, when COVID-19 restrictions prevented people attending in person.

# 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.

This is the first inspection for this newly registered service. This key question has been rated outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- People praised the person-centred service and told us Tranby Park Care Home was very well-led. Comments included, "In the main I think they do a wonderful job" and "I certainly would recommend this place; it's lovely." A relative said, "The home itself is very well organised...I wouldn't hesitate and indeed have recommended the home."
- Management were outstanding in their commitment and drive to provide high-quality care. The registered manager was highly motivated and promoted a very open, inclusive and person-centred culture. They were approachable, consistently encouraged feedback, and worked hard to respond to people's needs to achieve positive outcomes and improve their quality of life.
- People were at the heart of the service. They had been empowered to confidently voice their opinions and be actively involved in decisions. A 'resident ambassador' helped ensure people's views were understood and were central in shaping how the service met their needs.
- Surveys and regular meetings were used to share information and continually seek feedback and suggestions on any improvements that could be made. The provider had proactively moved to holding some meetings online as this made it easier and safer for more people to participate.

Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider was committed to being an excellent role model for other services. They shared learning, resources and advocated for wider changes in COVID-19 guidance, which provided wider benefits for people who use services.
- The registered manager worked in partnership with other professionals to make positive changes and improve people's quality of life. For example, they started a 'decaffeinated drinks' trial to see if this reduced sleep disturbances, anxiety and distress or affected the overall number of accidents or incidents that occurred. They had also purchased a 'light machine' for a person, in response to research about the benefits of light therapy on people's wellbeing.
- People praised the communication and partnership working. A professional told us, "I have been impressed by the organisation and professionalism of the leadership team, especially [registered manager's name]...This high standard of organisation has continued throughout the last two years, and in 2020 Tranby Park took a strong lead in the preparation for return to care, post the initial national lockdown." A relative explained, "Communication is so important, especially for relatives, and Tranby's staff are always available, either by telephone or email, for questions to be answered or that bit of reassurance that can sometimes be

required."

- Staff were very engaged and clearly proud of the service. They told us, "It's a great home, I love working there", "It's an amazing place to work" and "[Registered manager's name] is dedicated, firm, but fair and respected by all of the staff. I feel honoured to work here."
- Staff consistently praised the outstanding support and encouragement they received. Feedback included, "Tranby Park management team are amazing and very supportive. They are always there should you ever need them regardless of the time of day" and "They are very supportive if you make mistakes. They are very approachable, and you can go in anytime and if you are struggling, they will help you. They are really good."
- Staff felt valued by management. The provider and registered manager were committed to supporting staff to develop and progress their careers. Management had taken exceptionally positive steps to support staff's mental health and wellbeing throughout the COVID-19 pandemic and to recognise and reward their hard work.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Robust governance arrangements were well-embedded in the running of the service. The provider and registered manager used a comprehensive range of regular audits to carefully monitor the quality and safety of the service and support the delivery of high-quality care.
- Management were extremely proactive in identifying opportunities to develop the service and improve the way quality and risks were monitored and managed. The registered manager had taken the lead in developing electronic recording systems during the COVID-19 pandemic. This provided very effective tools to support management oversight and to help monitor and make sure people's needs were met.
- The provider and registered manager's approach to responding to the COVID-19 pandemic had been extremely robust and proactive. This had a positive impact on people using the service in helping to keep them safe.
- There was a particularly strong emphasis on continuous improvements. Management continually strived for excellence and took an extremely proactive approach to identifying and addressing any issues or concerns to help make sure people received high-quality care.
- There was a distinctive and positive culture of learning. A member of staff explained, "The extensive training, the high standards expected, and the fine examples set by staff members does encourage all staff to continually do their best to raise their own standards and meet the expectations of our wonderful residents."
- A strong keyworker system was used to review research, reflect on and share good practice, and support continuous improvements.

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 the importance of being open and honest with people and apologising if things went wrong.
- Management were extremely transparent in reporting any issues or concerns. Notifications were sent to CQC when legally required, for example, if there had been a safeguarding concern. This helped to monitor and make sure the service was meeting people's needs.