

Marton Care Homes Ltd

Langley Park Care Home

Inspection report

Front Street
Langley Park
Durham
County Durham
DH7 9YY

Tel: 01913735599

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26 April 2022

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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?

Good ●

Summary of findings

Overall summary

About the service

Langley Park care home is a residential care home providing personal care to 45 people aged 65 and over at the time of the inspection. The service can support up to 46 people.

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

People felt safe and secure living in the home. People and their relatives were happy with the service and had good relationships with staff members. There was a warm and welcoming atmosphere.

There were enough staff to meet people's needs. Safe recruitment procedures were followed. Medicines were managed effectively. Staff followed infection prevention and control guidelines. Improvements to the décor had recently been made and more were planned. The premises were clean and tidy.

Staff sought people's consent before providing care and support. 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 and relatives told us staff were kind and caring and the standard of care was high. Staff treated people with respect and supported them to make decisions about the support they received.

People received personalised care that was responsive to their needs and preferences. Staff knew people's needs well. People and relatives knew how to raise concerns. There was a range of activities for people to enjoy.

People and relatives felt the service was well managed. An effective quality assurance process was in place. People and relatives were regularly consulted about the quality of the service via meetings and surveys. There was a positive culture and ethos at the service which was driven by the registered manager and deputy manager. The registered manager led by example and actively promoted responsive care which improved people's quality of life.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service under the previous provider was good (published 17 April 2020). This was the first inspection of this service since it has been operated by Marton Care Homes Ltd.

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, 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?

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 well-led.

Details are in our well-led findings below.

Good ●

Langley 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 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 was carried out by one inspector 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

Langley Park care home 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. Langley Park is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. 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 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 (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

An inspector visited the service on 6 and 26 April 2022. We spoke with 10 people who used the service. We spoke with 12 members of staff including the registered manager, the deputy manager, one senior care assistant, four care assistants, the administrator, the wellbeing lead, two kitchen staff and one domestic staff. We asked staff for their feedback about the service via email and received seven responses. An Expert by Experience spoke with 11 relatives on the telephone on 8 April 2022.

We reviewed a range of records. This included four people's care records and multiple medicine records. We looked at three staff recruitment files. A variety of records relating to the management of the service were reviewed.

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 under the provider of Marton Care Homes Ltd. 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 and relatives felt the service was safe and were happy with the care provided. One person said, "I definitely feel safe here as there are always staff around."
- People were protected from the risk of abuse. Staff received safeguarding training and knew how to recognise and report any concerns.
- The provider had systems in place to protect people from harm. The registered manager understood their responsibilities and any concerns were acted on appropriately.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were identified and managed. Staff knew people well and were aware of people's risks and how to keep them safe. People's care plans included risk assessments about individual care needs.
- Fire drills happened regularly. Each person had a personal emergency evacuation plan (PEEP) which contained details about their individual needs.
- Regular planned and preventative maintenance checks were up to date.

Staffing and recruitment

- There were enough staff to support people. The home was experiencing an outbreak of COVID-19 at the time of our inspection. Contingency plans were in place which ensured there were enough staff to support people when some staff members had to self-isolate. Several staff came in on their days off to ensure people could continue to be supported safely.
- Safe recruitment procedures were followed. Appropriate pre-employment checks were carried out.

Using medicines safely

- People's medicines were managed safely and effectively. Staff were trained to administer medicines and their competency was checked regularly.
- We checked records and actual medicine stocks and found balances to be correct. Medicines, including controlled drugs, were ordered, stored and disposed of safely.

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 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

- People were supported to see their family or friends in accordance with government guidance.

Learning lessons when things go wrong

- Accidents and incidents were recorded and reviewed to look for trends. This included looking at actions to reduce the risk of recurrence.
- Information was shared across the organisation and discussed in staff meetings to support learning and promote good practice.

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 under the provider of Marton Care Homes Ltd. 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

- Comprehensive assessments of each person's needs were completed before a care placement was agreed or put in place, to ensure the service could meet people's needs.
- Following the initial assessment, all risk assessments and individual support plans were developed with the person and their representative, where appropriate. These were regularly reviewed and updated.

Staff support: induction, training, skills and experience

- Staff were trained and had the appropriate skills to care for people. They completed regular training to keep their knowledge up to date. Relatives felt staff were well-trained and skilled at their jobs.
- Staff felt supported in their roles. They received regular supervisions and an annual appraisal.

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

- People were supported to have enough to eat and drink. Meals were nutritious, appetising and well presented. People enjoyed their meals and told us if there was anything else they wanted, they only had to ask.
- There were enough staff to support people to eat safely. The mealtime experience was pleasant and relaxed.
- Staff had a good understanding of people's nutritional needs. Where people were at risk of poor nutrition, plans were in place to monitor their needs closely and professionals were involved where required. Where people required their food to be prepared differently, for example, because of problems with swallowing, this was catered for.

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

- Staff liaised with health and social care professionals to help ensure people's health needs were met. Advice from professionals was clearly set out in people's care records for staff to follow.

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

- The home was being redecorated. Improvements were being made to ensure the environment supported the orientation and needs of those people who were living with dementia.
- The premises were designed to offer people choices about where they spent their time.
- People's bedrooms were personalised. Communal lounges and dining areas were comfortable and had a homely feel.

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 relating to those authorisations were being met.

- Staff supported people in line with the MCA and best practice guidance.
- DoLS applications had been submitted to the local authority in line with legal requirements.
- Staff received regular MCA training and sought consent from people before providing support.

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.

This is the first inspection for this newly registered service under the provider of Marton Care Homes Ltd. 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 told us staff were respectful and kind, and the standard of care was high. One person told us, "The staff are marvellous. They're always kind, respectful and very caring without a doubt."
- Interactions between people and staff were relaxed. People knew staff well and we saw them chatting, smiling and showing affection. Staff showed an interest in what people were doing. When people showed signs of anxiety, staff were patient, reassured them and engaged them in activities which reduced their distress.
- Staff were keen to ensure people's rights were respected and were aware of their cultural and spiritual needs.

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

- People felt involved and were able to express their views. People were encouraged to make decisions about their day to day routines and express their personal preferences.
- People and their relatives were involved in care planning.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was considered and upheld by staff. Staff knocked on doors and waited for a response before entering.
- People's independence was respected and promoted without compromising their safety. Some people preferred to do some aspects of their own personal care. People said staff respected their independence and provided support when needed.
- People were supported to maintain relationships with those close to them. Relatives were made to feel welcome.

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 under the provider of Marton Care Homes Ltd. 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 received person-centred care. Care plans were person-centred, up to date and reviewed regularly. People's care needs were clearly set out and included guidance for staff about how to support people with their specific needs.
- People were encouraged to make choices about their day to day care. Staff supported people to follow their preferred routines for daily living.
- People's care plans contained information about their previous occupations, interests and lifestyle choices. This helped staff to understand what was important to each person and plan their care and support accordingly.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider was meeting the AIS. Information was available in a variety of formats to meet people's communication needs.

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

- Staff supported people to maintain contact during the pandemic and during recent COVID-19 outbreaks through video and phone calls.
- The provider employed a wellbeing co-ordinator to ensure people were supported to take part in a range of activities within the home. As the weather had started to improve, more trips out were planned. People and relatives were happy with the activities and social stimulation provided.

Improving care quality in response to complaints or concerns

- People and relatives knew how to raise concerns. People and relatives were confident any concerns raised would be resolved quickly.
- Where the service had received a complaint, this had been investigated and responded to appropriately. Nobody we spoke with had any concerns.

End of life care and support

- Care records contained people's wishes in relation to end of life care and included details about their spiritual needs and funeral plans. They also recorded if people had a Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) and whether emergency health care plans were in place.

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 under the provider of Marton Care Homes Ltd. This key question has been rated good. 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

- There was a positive culture and ethos at the service which was driven by the registered manager and deputy manager. The registered manager led by example and actively promoted responsive care which improved people's quality of life.
- Relatives spoke positively about the registered manager. One relative told us, "[Manager] is very approachable. The communication is excellent. If anything happens they ring me straight away. I wouldn't change anything about this home."
- Care plans were person-centred. People were encouraged to take part in activities they liked and to be as independent as possible. People's rooms were individual to their tastes, and people were given choice and appropriate support. Staff were knowledgeable about people's likes and dislikes.

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 legal responsibility to be open and honest when something goes wrong. They submitted notifications to CQC for significant events that had occurred at the service, such as accidents and incidents.

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

- Quality assurance systems were effective in identifying and generating improvements within the service.
- The registered manager and staff understood their roles and responsibilities.
- When an incident occurred, this was investigated thoroughly and lessons were learnt where appropriate.

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

- The service involved people, relatives and staff in a meaningful way. People and relatives were supported to provide feedback through surveys and regular meetings. Suggestions were followed up by the service, and changes were made in response to feedback.
- Staff meetings were held regularly. Staff told us they were well supported and had plenty of opportunities to provide feedback about the service.

Working in partnership with others

- Staff worked in partnership with other professionals. People's care records showed involvement and guidance from other professionals such as GPs, social workers and speech and language therapists.