

PJ Care Limited

# Mallard House

## 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

We carried out an unannounced comprehensive inspection of this service on 19 January 2017. After that inspection we received concerns in relation to an incident following which a person using the service died. As a result we undertook a focused inspection to look into those concerns. This report only covers our findings in relation to those concerns. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Mallard house on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Mallard house is a residential care home. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

At the time of inspection, Mallard house were providing care to 49 people.

Mallard house had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.'

The staff we spoke with had an understanding of abuse and the safeguarding procedures that should be followed to report abuse. Risk assessments were in place to manage risk within people's life, and identified how people should be supported. Assessments were regularly reviewed and updated when required.

The staff recruitment procedures ensured that appropriate pre-employment checks were carried out to ensure only suitable staff worked at the service. Adequate staffing levels were in place. We saw that people were responded to in a timely manner when they called for assistance.

The provider had systems in place to monitor the quality of the service as and when it developed and had a process in place which ensured people could raise any complaints or concerns. Incidents and accidents were recorded accurately and CQC were notified as required to incidents that took place.

## 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 remains good.

### **Is the service well-led?**

**Good** ●

The service remains good.

# Mallard House

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014 .

We undertook this un-announced focussed inspection on 7 November 2017 and it was carried out by one inspector. We inspected the service against two of the five questions we ask about services: is the service safe, and is the service well led.

This inspection was prompted by a notification of an incident following which a person using the service died. We are continuing to gather information and make enquiries around this specific incident. This inspection did not examine the circumstances of the incident, however, the information shared with the Care Quality Commission (CQC) about the incident indicated potential concerns about the management of risk, staffing levels and response times within the service. This inspection examined those risks.

No risks, concerns or significant improvement were identified in the remaining Key Questions through our on-going monitoring or during our inspection activity so we did not inspect them. The ratings from the previous comprehensive inspection for these Key Questions were included in calculating the overall rating in this inspection

Before the inspection, we reviewed the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We also contacted the Local Authority for any information they held on the service. We also received information from the Coroner and the police who had been alerted about a recent incident, following which a person using the service died.

We spoke with four people who used the service, the registered manager, three care assistants, a unit manager who was a nurse, the support services manager (person in charge of maintenance, domestic and catering staff) and two directors. We reviewed four people's care records to ensure they were reflective of their needs, three staff files, and other documents relating to the management of the service, including quality audits

# Is the service safe?

## Our findings

People told us they felt safe living at the service, and receiving care from the staff. One person told us, "I feel very safe here, there are plenty of staff around and I never have to wait long for someone when I push my call bell." We saw written feedback from a family member which stated, 'I take great comfort in [person's name] being in such a pleasant and safe environment.'

The staff we spoke with had a good understanding of safeguarding, the signs of abuse, and how to report it. One staff member told us, "I report concerns to the manager, or go higher if I need to. I can contact the police or the Care Quality Commission also." Staff also had a good understanding of whistleblowing procedures. The manager was aware of the requirement to notify CQC about incidents as required. During our inspection, we saw staff interact with people who appeared to be very comfortable and at ease with the staff in the environment.

Risk assessments were in place for all areas of risk within a person's life. These covered areas such as medical history, skin integrity, moving and handling, behaviour, and self-harm. Risk assessments were positive in their nature, and allowed people to have as much independence as they could. All the assessments we saw were regularly updated and reviewed.

There were enough staff working at the service to keep people safe and respond to their needs. All the people we spoke with felt that staffing levels were good, and that someone was always around to help them. Our observations during the inspection were that there were numerous staff on shift with a wide variety of skills, which meant that people received the support they needed. We saw care staff, nurses, managers, domestic staff, maintenance staff and administration all working within the service.

Medication administration systems were safe and accurate. We saw that people were administered their medication on time, and correctly. Medication records were all correctly completed, and medicines were stored safely. Information relating to people's medicines and treatment were recorded, communicated and updated appropriately. People told us they were happy with the support they got to take medicines.

People were well protected by the prevention and control of infection. During our inspection we saw that the premises were clean and tidy. Domestic staff were seen to be cleaning throughout the building, and people told us they were happy living in a clean and sanitary environment. Staff felt they had enough personal protective equipment to minimise the risk of the spread of infection, and training in this area was provided. We saw that the service used an assessment system with people who were returning from hospital stays, to check for the signs of any infections and to act appropriately and safely should any be found.

The service monitored accidents and incidents, and made improvements when required. The staff we spoke with were confident that when they recognised changes in people's needs, they could inform management who would update and review care plans and risk assessments as required. We saw clear documentation around incidents and any other problems, and how they had been acted upon to make sure lessons were learnt and communicated through supervision or staff meetings.

## Is the service well-led?

### Our findings

The registered manager had a clear vision and positive approach to managing the service. We saw that they had a good knowledge of the people using the service and the staff team. People and staff both clearly knew who the registered manager was and interacted with them in a positive manner. The people we spoke with felt that as a result of the service being well managed, the quality of their care was high.

Staff across all levels of the service understood their roles and responsibilities. There were individual unit managers who had the skills and experience to oversee particular parts of the service. It was clear from the conversations we had with staff that they understood what was expected of them, and what was required to make the service run smoothly and safely.

A registered manager was in post at the time of the inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was aware of the responsibility to submit notifications and other required information.

The people using the service and their families were able to feedback on quality. We saw that quality questionnaires were completed for people which enabled them to record their views. We saw that feedback was mostly positive, and that action was taken and recorded if any concerns were raised.

The service engaged with community services and encouraged people to use them. We saw various care plans that showed how people were supported out into the community to use various health, leisure and social facilities such as clinics, coffee shops and sporting venues. Staff we spoke with understood the value of supporting people to access the wider community for both health and social wellbeing.

Quality assurance systems were in place to help drive improvements and ensure sustainability. The registered manager had a good knowledge of all aspects of the service, and knew what areas needed updating and when. Audits took place to monitor areas of the service, and actions were created and followed through when any errors or faults were found.

The service worked in partnership with other agencies in an open honest and transparent way. We received positive feedback from the local authority around the care and support that people received. We saw that some individuals were supported by a variety of professionals from different agencies, and the service recorded all correspondence within people's files.