

CARE QUALITY COMMISSION (CQC) INSPECTION OUTCOMES

QUARTER 2 2020-2021

The CQC is the national inspectorate for registered health and adult care services. Inspection reports are regularly produced and these are published on a weekly basis.

The CQC assesses and rates services as being 'Outstanding', 'Good', 'Requires Improvement', or 'Inadequate'. Where providers are found to be in need of improvement or inadequate, the CQC make recommendations for improvement and / or enforcement action. Specific actions taken in each case can be found in the relevant inspection report.

Where inspections are relevant to the Borough, a summary of the outcome is circulated to all Members. An update from Adult Services is included which summarises the position in relation to service provision and any actions taken at that time.

Quarterly Summary of Published Reports

This update includes inspection reports published between July and September 2020 (inclusive). These are included at **Appendix 1** and contain the results of all inspections of services based in the Borough (irrespective of whether they are commissioned by the Council).

During this quarter, **7** inspection results were published (5 of which were focused inspections). Please note: there is a time lag between dates of the inspection and the publication of the report. In addition, where concerns are identified by CQC, re-inspections may take place soon after the initial report is published. When the outcomes are made available within the same quarter, the result of the most recent report is included in this update.

The main outcomes from the reports are as follows:

- seven Adult Care services were reported on (one rated 'Good'; one rated 'Requires Improvement'; five 'Inspected but not rated');
- no Primary Medical Care services were reported on;
- no Hospitals / Other Health Care services were reported on.

A summary of each report and actions taken (correct at the time the CQC inspection report was published) is outlined below¹. Links to the full version of the reports, and previous ratings where applicable, are also included.

Overall position – Commissioned Services

Appendix 2 outlines the current overall position for those Adult Social Care services that are commissioned by the Council.

¹ of the published focused inspections, only St Mark's Care Home has a full briefing report – this has been provided in light of previously identified issues.

APPENDIX 1**ADULT SERVICES**

(includes services such as care homes, care homes with nursing, and care in the home)

| | | |
|--|---|-----------------------------|
| Provider Name | Qualia Care Limited | |
| Service Name | St Mark's Care Home | |
| Category of Care | Nursing, Residential, Dementia | |
| Address | 1 Hartburn Lane Stockton-on-Tees TS18 3QJ | |
| Ward | Parkfield & Oxbridge | |
| CQC link | https://api.cqc.org.uk/public/v1/reports/9dbf370d-87b4-488f-bc04-320595945d9f | |
| | New CQC Rating | Previous CQC Rating |
| Overall | Inspected but not rated | Requires Improvement |
| Safe | Inspected but not rated | Requires Improvement |
| Effective | Not inspected | Requires Improvement |
| Caring | Not inspected | Requires Improvement |
| Responsive | Not inspected | Requires Improvement |
| Well-Led | Inspected but not rated | Requires Improvement |
| Date of Inspection | 16th & 23rd July 2020 (focused inspection) | |
| Date Report Published | 12th August 2020 | |
| Date Previous Report Published | 5th February 2020 | |
| Breach Number and Title | | |
| <u>Regulation 17 HSCA RA Regulations 2014 Good Governance</u> The provider was not maintaining accurate, complete and contemporaneous records and systems and processes had not identified this. Reg 17(2)(b)(c). | | |
| Level of Quality Assurance & Contract Compliance | | |
| Enhanced - The home is currently in Responding to and Addressing Serious Concerns protocol under the Teeswide Safeguarding Adults Board (TSAB) guidelines. | | |
| Level of Engagement with the Authority | | |
| Poor – The provider has been unable to commit to time scales regarding the action plan and have been unable to demonstrate and evidence the improvements they are required to make within the milestones agreed. | | |

| Supporting Evidence and Supplementary Information | | |
|---|-------------------|-----------------------------|
| <p>The latest rating for this service was Requires Improvement (published 5th February 2020). A targeted inspection was carried out 16th July 2020 following a breach of regulations identified through the February inspection. Enough improvement had not been made and the provider was still in breach of regulations therefore the rating for the service remains Requires Improvement as per the inspection report published 5th February 2020.</p> <p>We have received official notice from Qualia stating they will be closing St Marks – Care Home.</p> <p>All residents, residents’ families and staff have been informed of the closure.</p> <p>St Marks have held the 1st meeting with the staff representative to discuss the planned redundancies. This is the 1st part of the 30-day consultation period with the staff members.</p> <p>Quality Assurance and Compliance are working closely with the provider, Care Management and other interested stakeholders to support the transition of residents to their new home of choice in a safe and timely manner.</p> | | |
| Participated in Well Led Programme? | No | |
| PAMMs Assessment – Date / Rating | 14/08/2019 | Requires Improvement |

| | | |
|--|---|----------------------------|
| Provider Name | Stockton Care Limited | |
| Service Name | Primrose Court Nursing Home | |
| Category of Care | Nursing Dementia (including a complex mental health unit) | |
| Address | South Road Stockton-on-Tees TS20 2TB | |
| Ward | Norton South | |
| CQC link | https://api.cqc.org.uk/public/v1/reports/510c6609-4e59-4d6e-bcd6-fcb06674da3a | |
| | New CQC Rating | Previous CQC Rating |
| Overall | Requires Improvement | n/a |
| Safe | Requires Improvement | n/a |
| Effective | Requires Improvement | n/a |
| Caring | Good | n/a |
| Responsive | Requires Improvement | n/a |
| Well-Led | Requires Improvement | n/a |
| Date of Inspection | 18th & 19th August 2020 | |
| Date Report Published | 4th September 2020 | |
| Date Previous Report Published | n/a | |
| Breach Number and Title | | |
| <p><u>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</u> The provider was not doing all that is reasonably practicable to mitigate risks or to ensure the proper safe management of medicines. REG 12 (2) (a) (b) (g).</p> <p><u>Regulation 17 HSCA RA Regulations 2014 Good Governance</u> The provider was not maintaining accurate, complete and contemporaneous records and systems and processes had not identified this. Reg 17 (2) (b) (c).</p> | | |
| Level of Quality Assurance & Contract Compliance | | |
| Enhanced – The home is currently in Responding to and Addressing Serious Concerns protocol under the Teeswide Safeguarding Adults Board (TSAB) guidelines. | | |
| Level of Engagement with the Authority | | |
| Full engagement is currently being given to the authority. | | |

| Supporting Evidence and Supplementary Information | | |
|---|-------------------------|--|
| <p>Primrose Court opened in September 2019 under new ownership and so no rating was available until the first inspection from CQC. They have encountered unprecedented circumstances in relation to COVID-19 pandemic which impacted upon organisational oversight. Alongside this leadership concerns developed. Leadership issues have now been resolved and the home is moving forward, and a stable management structure is now in place. Improvements relating to the breaches are already underway, which will be monitored via the provider action plan for service improvement.</p> | | |
| Participated in Well Led Programme? | No | |
| PAMMs Assessment – Date / Rating | Not yet assessed | |

| | | |
|--|---|-----------------------------|
| Provider Name | Indigo Care Services Limited | |
| Service Name | Green Lodge | |
| Category of Care | Residential and Residential Dementia | |
| Address | Billingham Stockton-on-Tees TS23 1EW | |
| Ward | Billingham South | |
| CQC link | https://api.cqc.org.uk/public/v1/reports/aa50b85a-4690-434c-a79c-b94a695bacd7?20200930120000 | |
| | New CQC Rating | Previous CQC Rating |
| Overall | Good | Requires Improvement |
| Safe | Good | Requires Improvement |
| Effective | Not inspected | Requires Improvement |
| Caring | Good | Requires Improvement |
| Responsive | Not inspected | Good |
| Well-Led | Good | Requires Improvement |
| Date of Inspection | 15th September 2020 | |
| Date Report Published | 29th September 2020 | |
| Date Previous Report Published | 19th June 2019 | |
| Breach Number and Title | | |
| No breaches. | | |
| Level of Quality Assurance & Contract Compliance | | |
| <p>Level 1 – no concerns.</p> <p>CQC found that at Green Lodge people felt safe and were supported by staff who were recruited safely. Staff knew of the risks associated with people's care. Medicines were managed safely. The provider followed safe infection prevention and control procedures.</p> <p>People were cared for by kind, caring staff who created a warm and welcoming environment. The provider had in place clear quality assurance and auditing processes. Staff felt supported by the management team.</p> <p>The home has a good level of contract compliance and will respond in a timely manner to all requests. The Quality Assurance & Compliance Officer speaks to them at least weekly and the Deputy and Peripatetic Manager are happy to discuss issues or seek advice.</p> | | |

| Level of Engagement with the Authority | | |
|---|-------------------|----------------------|
| The home has a good level of engagement with the Authority, attending Networks and Meetings. Historically there is poor engagement with the Alliance training, but this may be due to the companies own training provision. | | |
| Supporting Evidence and Supplementary Information | | |
| The Homes is currently without a Registered Manager. There is a Peripatetic Manager in the home supporting the Deputy Manager. Recruitment is ongoing. | | |
| Participated in Well Led Programme? | Yes (old Manager) | |
| PAMMs Assessment – Date / Rating | 03/05/2019 | Requires Improvement |

Focused Inspections

In addition to the above, the following ‘focused inspections’ have been carried out (publication date is shown in brackets) – these inspections involve checks on infection prevention and control management (a link to the published report is provided):

- **Mandale Care Home** (24th Aug 20)
<https://api.cqc.org.uk/public/v1/reports/eaf8b16c-b00e-4989-a6c4-e131170aabb4>
- **Ingleby Care Home** (9th Sep 20)
<https://api.cqc.org.uk/public/v1/reports/1db8ea6d-e555-4f84-8e9d-dd48439eea51>
- **Partners4Care Limited** (11th Sep 20)
<https://api.cqc.org.uk/public/v1/reports/1dfa4cea-a0f9-4680-963a-97e1b597910e>
- **Winford House** (11th Sep 20)
<https://api.cqc.org.uk/public/v1/reports/f19d921b-dd94-4482-abe3-05f7dfe5e384>

PRIMARY MEDICAL CARE SERVICES

No reports published.

HOSPITAL AND COMMUNITY HEALTH SERVICES
(including mental health care)

No reports published.

APPENDIX 2

OVERALL POSITION FOR COMMISSIONED SERVICES

The previous suspension of the CQC inspection schedule due to the current Covid-19 pandemic, along with the impact of this on the work of the Council's Quality Assurance and Compliance Team, means that there is no trend analysis data available that would accurately portray the current position in relation to the overall summary of CQC ratings for Adult Social Care services commissioned by the Council for Quarter 2 2020-2021.