# CARE QUALITY COMMISSION (CQC) INSPECTION OUTCOMES

# **QUARTER 4 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 each month. 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 January and March 2021 (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, **16** inspection results were published (14 of which were focused inspections). <u>Please note</u>: there is a time lag between dates of the inspection and the publication of the report. In addition, where concerns are identified by the 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:

- 14 Adult Care services were reported on (two rated 'Good'; twelve 'Inspected but not rated');
- 0 Primary Medical Care services were reported on;
- 2 Hospital / Other Health Care service were reported on (one rated 'Inadequate'; one 'Inspected but not rated').

A summary of each report and actions taken (<u>correct at the time the CQC inspection report was published</u>) is outlined below<sup>1</sup>. 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.

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of the published focused inspections for Adult Services, only Roseville Care Centre 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	Care Matters (Homecare) Ltd	
Service Name	Care Matters Teesside (Homecare) Ltd	
Category of Care	Care at Home	
Address	Unit 2 Orde Wingate Way Stockton-on-Tees TS19 0GA	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/7f39500c-d530-42ad-9d14- 7bf787e2fd92?20210108130000	
	New CQC Rating	Previous CQC Rating
Overall	Good	Requires Improvement
Safe	Good	Requires Improvement
Effective	Good	Good
Caring	Good	Good
Responsive	Good	Good
Well-Led	Good Requires Improvement	
Date of Inspection	7 <sup>th</sup> & 8 <sup>th</sup> December 2020	
Date Report Published	7 <sup>th</sup> January 2021	
Date Previous Report Published	28 <sup>th</sup> January 2020	
Breach Number and Title		
There are no breaches.		
Level of Quality Assurance & Contract Compliance		
Level 1 – no concerns/minor concerns		

### **Level of Engagement with the Authority**

The Provider is in weekly contact with the Authority and has engaged well with the Quality Assurance and Compliance Team.

The Provider has also engaged with the wider support available through the Transformation Managers, attending Provider Forums and other meetings and showing a good level of engagement and willing to contribute.

# **Supporting Evidence and Supplementary Information**

The two areas of concern for this Provider previously were Safe and Well-led.

The previous CQC report identified issues within the 'Safe' element around a lack of personalised risk assessments and their quality systems were either not in place or not robust enough. Within this report it identified that the care plans contained good explanations of the control measures to keep people safe, and the monthly checks now picked up errors and omissions and implemented required actions where appropriate.

Within the Well-Led element, the previous report identified systems to assess, monitor and improve quality were not robust enough and records were not always complete and up to date. This report identified that Provider had made a range of improvements to quality assurance checks which had resulted in improvements across the service.

Participated in Well Led Programme?	No	
PAMMS Assessment – Date / Rating	03/09/2019	Good

Provider Name	Prestige Care (Roseville) Ltd	
Service Name	Roseville Care Centre	
Category of Care	Nursing, Residential, Dementia	
Address	Blair Avenue Ingleby Barwick Stockton-on-Tees TS17 5BL	
Ward	Ingleby Barwick West	
CQC link	https://api.cqc.org.uk/public/v1/reports/ae964f59-dd94-48f1-a9fe- cf341245878e?20210119130000	
	New CQC Rating	Previous CQC Rating
Overall	Inspected but not rated	Requires Improvement
Safe	Inspected but not rated Requires Improvemen	
Effective	Inspected but not rated	Requires Improvement
Caring	Not inspected Good	
Responsive	Not inspected	Good
Well-Led	Inspected but not rated	Requires Improvement
Date of Inspection	23 <sup>rd</sup> September 2020 (focused inspection)	
Date Report Published	19 <sup>th</sup> January 2021	
Date Previous Report Published	22 <sup>nd</sup> May 2019	
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#### **Breach Number and Title**

Regulation 12 HSCA RA Regulations 2014 Safe care and treatment

Medicines were not always managed safely. Records were not always accurate or sufficiently detailed and the provider's own policies were not always adhered to. 12(1)(2)(g).

# **Level of Quality Assurance & Contract Compliance**

Level 2 – Moderate concerns and supportive monitoring

### Level of Engagement with the Authority

The Provider is in weekly contact with the Authority and has engaged well with the Quality Assurance and Compliance Team.

The manager has attended a couple of the leadership meetings, but attendance has dropped off. The home is working with TEWV around wellbeing support following their outbreak.

# **Supporting Evidence and Supplementary Information**

The current rating for this service is Requires Improvement (published 22 May 2019) and there was one breach of regulation (highlighted above). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection enough improvement had not been made/ sustained, and the provider was still in breach of regulation.

This targeted inspection was to check whether the breach of regulation and other concerns identified at the last inspection had been addressed. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC found 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; however, the policies and systems in the service did not always support this practice. Records relating to people's capacity to make decisions was not always in place or completed correctly.

Quality assurances processes were in place but had not identified or resolved all of the issues found during the previous inspection. Some records were not up to date or accurate.

The Quality Assurance and Compliance Team will liaise with CQC who will monitor progress against their action plan and support the provider to ensure they improve and progress against the outstanding breach.

Participated in Well Led Programme?	No	
PAMMs Assessment – Date / Rating	04/08/2019	Good

Provider Name	St Martin's Care	
Service Name	Woodside Grange Care Home	
Category of Care	Residential, Nursing, Dementia	
Address	Teddar Avenue Thornaby Stockton-on-Tees TS17 9JP	
Ward	Stainsby Hill	
CQC link	https://api.cqc.org.uk/public/v1/reports/ec745715-0c72-42f3-baf1-bae1ae1cc512?20210127130000	
	New CQC Rating	Previous CQC Rating
Overall	Good	Requires Improvement
Safe	Good	Requires Improvement
Effective	Good Requires Improvement	
Caring	Good Requires Improvement	
Responsive	Good	Requires Improvement
Well-Led	Requires Improvement	Requires Improvement
Date of Inspection	7 <sup>th</sup> January 2021	
Date Report Published	27 <sup>th</sup> January 2021	
Date Previous Report Published	21st January 2020 (full) / 17th December 2020 (focused)	
Breach Number and Title		

#### **Breach Number and Title**

n/a

# **Level of Quality Assurance & Contract Compliance**

Quality threshold level 1 – no concerns/minor concerns.

# **Level of Engagement with the Authority**

The provider is in regular contact with the Council and has engaged well with the Quality Assurance and Compliance team.

The provider has also engaged with the wider support available through the Transformation Managers, attending meetings such as provider forums and being willing to contribute.

# **Supporting Evidence and Supplementary Information**

In the previous full CQC inspection report, all areas were rated Requires Improvement. A new Manager had recently come into post at that time. Breaches were identified in relation to Regulation 12; Safe Care & Treatment and Regulation 17; Good Governance.

Most areas are now rated Good, with improvements noted in relation to the environment, documentation, medication, risk management, DoLS and auditing systems.

The Well Led element retains its Requires Improvement rating. At the last inspection the provider had failed to ensure robust quality assurance systems were in place and accurate, up to date records were kept. This was a breach of Regulation 17. Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17. However, further improvement was needed with some records and audits.

A further targeted inspection took place on 7 and 29 January 2021 to ensure that the service was compliant with infection prevention and control (IPC) measures, as the home had been identified for use by the Local Authority as a designated care setting in response to the Winter Plan for people discharged from hospital with a positive Covid-19 status. This report was published on 5 February 2021 and shows that CQC were assured that appropriate IPC measures were place.

Participated in Well Led Programme?	No	
PAMMs Assessment – Date / Rating	08/07/2019	Good

### **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 (link to the published report is provided):

- Mandale Care Home (20<sup>th</sup> Jan 21) https://api.cqc.org.uk/public/v1/reports/1ebcdc71-5f8c-4977-84ff-967f16f92d53?20210120130000
- Beeches Care Home (3<sup>rd</sup> Feb 21) https://api.cqc.org.uk/public/v1/reports/e67af1cd-89b3-40dd-9746-126f67c1974f?20210203130000
- Woodside Grange Care Home (6<sup>th</sup> Feb 21) https://api.cqc.org.uk/public/v1/reports/3c3f800c-1f43-4b1b-af75-d75ea96e700a?20210206130000
- The White House Care Home (12<sup>th</sup> Feb 21) https://api.cqc.org.uk/public/v1/reports/4f4acfce-e0d8-4e52-9ce9-15fbb81b7d87?20210212130000
- Ashwood Lodge Care Home (27<sup>th</sup> Feb 21)
   <a href="https://api.cqc.org.uk/public/v1/reports/b4b64f0c-9f8d-4aa0-80af-17aa56ca80d3?20210227130000">https://api.cqc.org.uk/public/v1/reports/b4b64f0c-9f8d-4aa0-80af-17aa56ca80d3?20210227130000</a>
- Hadrian Park (4<sup>th</sup> Mar 21)
   <a href="https://api.cqc.org.uk/public/v1/reports/d55694c7-f965-4cd9-94e0-656a795ec35b?20210304130000">https://api.cqc.org.uk/public/v1/reports/d55694c7-f965-4cd9-94e0-656a795ec35b?20210304130000</a>
- Wellburn House (4<sup>th</sup> Mar 21) https://api.cqc.org.uk/public/v1/reports/a21b1432-f84d-4f23-bf53-d992d21cd98c?20210304130000
- Willow View Care Home (17<sup>th</sup> Mar 21)
   <a href="https://api.cqc.org.uk/public/v1/reports/692eed87-77fe-40b7-b3de-207dd0560743?20210317130000">https://api.cqc.org.uk/public/v1/reports/692eed87-77fe-40b7-b3de-207dd0560743?20210317130000</a>
- Victoria House Nursing Home (23<sup>rd</sup> Mar 21) https://api.cqc.org.uk/public/v1/reports/6fb9034a-f371-4a5f-b27b-cc7871f5f761?20210323130000
- Roseville Care Centre (23<sup>rd</sup> Mar 21 update to previously published 19<sup>th</sup> Jan 21 report) https://api.cqc.org.uk/public/v1/reports/ae964f59-dd94-48f1-a9fe-cf341245878e?20210323130000
- Park House Rest Home (26<sup>th</sup> Mar 21)
   <a href="https://api.cqc.org.uk/public/v1/reports/ef213693-dcf9-40cc-844a-960e01db2633?20210326130000">https://api.cqc.org.uk/public/v1/reports/ef213693-dcf9-40cc-844a-960e01db2633?20210326130000</a>

An example of the contents from a previous focused inspection report (**Teesdale Lodge Nursing Home**) is included below to show Members the usual contents and CQC 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 was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

As part of CQC's response to the coronavirus pandemic we are conducting a thematic review of infection control and prevention measures in care homes. The service was selected to take part in this thematic

review which is seeking to identify examples of good practice in infection prevention and control. This inspection took place on 11 November 2020 and was announced.

Teesdale Lodge Nursing Home is a residential nursing home providing personal and nursing care to older people and people living with a dementia. It accommodates up to 38 people in one purpose-built building. There were 29 people using the service when we visited.

#### Our findings:

How well are people protected by the prevention and control of 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.

# PRIMARY MEDICAL CARE SERVICES

No reports published.

### HOSPITAL AND COMMUNITY HEALTH SERVICES

(including mental health care)

Provider Name	Relief Professionals Group Ltd	
Service Name	Relief Group Care	
Category of Care	Homecare (Personal Care)	
Address	8 West Row, Stockton-on-Tees TS18 1BT	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/a9c7f53d-f8a9-4361-b18b-f6067c314864?20210120130000	
	New CQC Rating	Previous CQC Rating
Overall	Inspected but not rated	Requires Improvement
Safe	Inspected but not rated	Requires Improvement
Effective	Not inspected Good	
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Inspected but not rated	Requires Improvement
Date of Inspection	16 <sup>th</sup> December 2020 (focused inspection)	
Date Report Published	20 <sup>th</sup> January 2021	
Date Previous Report Published	30 <sup>th</sup> October 2019	

#### **Further information**

Relief Group Care is a domiciliary care agency (not commissioned by SBC). It provides personal care to people living in their own houses and flats in the community. At the time of the inspection the service was providing personal care to seven people. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, CQC also consider any wider social care provided.

The last rating for this service at the previous premises was requires improvement. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection enough improvement had not been made and the provider was still in breach of the following regulations:

#### Regulation 12 HSCA RA Regulations 2014 Safe care and treatment

- Medicines were not always managed safely.
- Care records and risk assessments were not detailed enough to keep people safe.

### Regulation 17 HSCA RA Regulations 2014 Good governance

 Quality monitoring was ineffective as it did not highlight the areas of concern that we found during the inspection.

Provider Name	n/a	
Service Name	Tees, Esk and Wear Valleys NHS Foundation Trust	
Category of Care	Mental Health (adults / children and young people)	
Address	West Park Hospital, Edward Pease Way, Darlington DL2 2TS	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/ebdb75c1-e25b-44d4-a705- e3b772b7ad09?20210326010509	
	New CQC Rating  (Acute wards for adults of working age and psychiatric intensive care units only)	Previous CQC Rating (full organisation)
Overall	Inadequate	Requires Improvement
Safe	Inadequate	Requires Improvement
Effective	Not graded	Good
Caring	Not graded	Good
Responsive	Not graded	Requires Improvement
Well-Led	Inadequate	Good
Date of Inspection	20 <sup>th</sup> – 22 <sup>nd</sup> January 2021 (focused inspection – acute wards for adults of working age and psychiatric intensive care units only)	
Date Report Published	26 <sup>th</sup> March 2021	
Date Previous Report Published	3 <sup>rd</sup> March 2020 (full routine inspection)	

#### **Further information**

The Care Quality Commission (CQC) carried out this unannounced focused inspection because it received information giving concerns about the safety and quality of the services. Five wards were inspected (three at Roseberry Park, Middlesbrough, one at West Park Hospital, Darlington, and one at Cross Lane Hospital, Scarborough) from the acute wards for adults of working age and psychiatric intensive care unit services. The service provides treatment for people who are acutely unwell and whose mental health problems cannot be treated and supported safely or effectively at home. The Trust provides the service across 14 wards.

The CQC found that the following legal requirements were not being met:

- Regulation 17 HSCA (RA) Regulations 2014 Good governance
- Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment

As a result, the provider must send the CQC a report that says what action they are going to take to meet these requirements.

# **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 4 2020-2021.

As we move out of the pandemic and restrictions are easing, the CQC and the Council's Quality Assurance and Compliance Team are starting to resume their inspections and quality assurance assessments. As the results of these are published, we will start to see the trend data emerging that will allow a meaningful summary to be presented hopefully by Q1 / Q2 of 2021-2022.