

Good Companions (Cumbria) Limited

The Good Companions (Cumbria) Limited

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

About the service

The Good Companions (Cumbria) Ltd is a residential care home providing personal care for up to 39 people. The service provides support to older people, some of whom may have dementia-related needs. At the time of our inspection there were 31 people using the service.

The care home is a large, adapted building. The accommodation is over three floors. People living with a dementia-related condition were accommodated on a lower ground floor unit with access to a sheltered, secure courtyard and gardens.

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

People and relatives had many positive comments about the caring, welcoming and warm atmosphere in the home. People said staff were kind, friendly and helpful. Relatives said the Good Companions was homely and provided personalised care for each person.

People and relatives said it was a safe place to live and they felt supported and encouraged by staff to lead fulfilling lives. Risks to people were now assessed and managed in a safe way. The home was clean, bright and well-maintained.

People got appropriate support with their medicines, but records were not always completed correctly. We have made a recommendation about this.

There were enough staff to support people. New staff were appropriately vetted before they started to work at the home. People said staff were "always on hand" and relatives commented, "Staff respond to the call buttons quickly."

People were supported to have maximum choice and control of their lives and staff assisted them in the least restrictive way possible and in their best interests; the policies and systems in the service upheld this practice.

People and relatives described the provider and registered manager as open and amenable. Staff said they felt supported by the new registered manager and enjoyed working at the home.

The registered manager carried out checks of the quality and safety of the service and acted on any issues. The provider and registered manager were committed to improvements. Shortfalls from the last inspection had been addressed and a refurbishment programme was taking place.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published on 25 January 2021) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection. We carried out an unannounced inspection of this service on 25 November 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Good Companions (Cumbria) Ltd on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Good Companions (Cumbria) Limited

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

This inspection was carried out by an 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

The Good Companions (Cumbria) Ltd 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. The Good Companions (Cumbria) Ltd 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the

quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and the local Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return (PIR). 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. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who lived at the home and 12 relatives. We used the Short Observational Framework for Inspection (SOFI) during a teatime meal. SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with 9 staff including the registered manager, senior care and care staff, laundry and catering staff, activity and maintenance staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed 4 people's care records and multiple medication records. We looked at 3 staff files in relation to recruitment checks and records relating to the management of the service.



Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to ensure risks to people were assessed and safely managed. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks to people were assessed and actions were put in place to keep them safe. The registered manager had introduced a better care planning system which included clear risk assessments and measures to reduce avoidable harm.
- People and relatives described actions staff took to keep them safe. They told us, "[Family member] is very safe indeed because staff take notice of various things about them" and "When [person] had a fall they informed me what's happened and what they've done about it."
- Safety checks of the building were up to date and action was taken when issues were identified.

At our last inspection the provider had failed to follow safeguarding protocols or monitor the safety of the service. This contributed to a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

Systems and processes to safeguard people from the risk of abuse; learning lessons when things go wrong

- The provider had systems in place to protect people from potential abuse. Staff and managers understood their responsibility to safeguard people. Any concerns were reported appropriately.
- People said they felt "very safe" at the service. One person commented, "I'm safe and comfortable here,

the staff are lovely." Relatives' comments included, "[Family member] is absolutely safe. I'm very reassured getting the care they need" and "[Person] is happy, settled and safe in the home."

- Systems and processes were in place to learn from accidents and incidents. The registered manager analysed trends in incidents, such as falls, and lessons were learnt to help reduce them recurring.

Using medicines safely

- Overall, medicines were managed safely.
- People's medicines were securely stored and administered by staff who had training in medicine management.
- Some minor recording issues were discussed with the registered manager and addressed immediately.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- The service was working within the principles of the MCA.
- There were records of people's consent to the support they received or capacity assessment where they were unable to consent. The registered manager made sure there were copies of the legal status of relevant representatives who could make decisions on behalf of people who lacked capacity.
- People said they made their own decisions. Relatives commented, "Staff listen to him, give him choices and don't talk to him like he's stupid" and "[Family member] gets to make choices. Nothing's forced on her."

Staffing and recruitment

- The provider ensured there were enough staff to provide sufficient support to people who use the service. Staffing levels had improved since the last inspection.
- People told us staff were "always on hand" and were "very helpful". Relatives commented, "Staff respond to the call buttons quickly and they make regular night visits to check on my family member" and "There seem to be plenty of staff on."
- The provider used safe recruitment practices to check new staff were suitable to work with people. People and relatives said staff were very good at their jobs and seemed well trained.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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 arrangements were in line with current guidance. People were able receive visitors and were able to go out of the home.

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection we found the inconsistent approach to management and failures in governance systems which contributed to a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager had been in post for less than a year. They had made noticeable improvements to the stability and governance of the service. Staff commented, "It's much improved and the morale is so much better now" and "[Registered manager] has really improved it, I love working here."
- People and relatives had more confidence in the way the service was run. They told us, "[Registered manager] is doing the job well - he always makes sure the staff do what's required of them" and "I think they do a sterling job of organizing things."
- The provider had quality assurance checks in place. The registered manager carried out several audits to ensure the safe running of the service. The medicines audit was not sufficiently robust to identify medicines record shortfalls.

We recommend the provider reviews the medicines audit tool to ensure it is fit for purpose.

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

- The service promoted a positive, person-centred culture. Improvements had been made to the way the

home was organised to support this.

- Relatives made many positive comments about the outcomes for people living there. They told us, "The best thing about the home is they treat mum as an individual. She gets really good personalised care" and "When my family member first went in, staff were pro-active in what they were going to do and they organised things that matter to my family member."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; 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 provider and registered manager understood their duty of candour responsibilities.
- People and relatives told us the registered manager and staff team were "very approachable" and they were invited to give their views in surveys and in person. They told us, "I feel as if I'm listened to and they've managed to sort out any suggestions" and "Communication is something the home does really well. Every time I've rang, they've been super helpful."
- The registered manager had introduced a 'resident of the day' system so that at least once a month each person's care was reviewed and their relatives were contacted for their input. One relative commented, "They give me a monthly update phone call to see if I've got any questions."
- Staff said they now felt fully involved in how improvements were made. They were invited to give their views at meetings and in surveys, but also on a daily basis. One staff commented, "It's much better. We're not getting different instructions from different managers now. We can go to [registered manager] any time and get the right answer."

Continuous learning and improving care; working in partnership with others

- The provider and registered manager were committed to continuous improvements.
- The registered manager had compiled and acted upon individual action plans from regular audits. He was developing a new audit planning system which would result in an overarching development plan for future improvements.
- The service worked with other health and social care professionals who were involved in people's care.