

Harbour Healthcare Ltd

# The Old Vicarage Nursing and Residential Care Centre

## 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 Old Vicarage Nursing and Residential Care Centre (The Old Vicarage) is a residential care home with nursing registered to accommodate up to 60 people in need of nursing and personal care. Accommodation is provided over two floors with single rooms and one double room. Most rooms have en-suite facilities. On the days of the inspection there were 55 people living at the home.

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

People received safe care from kind and caring staff. People were protected from the risk of harm and staff supported them to maintain their safety and wellbeing. People received their medicines as prescribed from staff who had been trained in medicines and had their competencies checked by managers.

Relatives told us they felt confident their relations were safe living in the home and praised the friendly and caring attitudes of staff and managers. People's rights were protected and their equality and diversity needs were respected. People's bedrooms were personalised to reflect their tastes and preferences.

People were confident in the management team at the home and praised how approachable they were. Relatives were similarly pleased with the way the home was managed. Some relatives and staff members said that, on occasions, the home was short-staffed. We did not see evidence of this at inspection and staffing rotas supported the home was properly staffed.

Quality assurance systems, audits and checks were robust and embedded within the service. The home, the environment and the equipment in use was clean and tidy. We did not find any shortfalls around care planning and record keeping. This assisted in ensuring people received proper and safe care.

Staff felt valued and enjoyed working at the home. They also said the new registered manager had provided a good degree of stability to the home. People's views and opinions of the service were sought and acted on.

The service made appropriate notifications to us and other authorities of safety incidents to ensure these incidents received appropriate oversight. Infection prevention control measures were robust and safe visiting processes were in place to ensure people could see their visitors safely.

People received high-quality person-centred care because the provider and managers had maintained effective oversight of the quality of care practice and records. Staff were committed to providing high-quality care and felt they were supported in their role by managers. 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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was requires improvement (published 25 April 2022).

### Why we inspected

This inspection was prompted by a review of the information we held about this service. We identified the service may have improved since the last inspection. We carried out a focused inspection to review the key questions of safe and well-led only.

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.

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 based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Old Vicarage Nursing and Residential Care Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 Old Vicarage Nursing and Residential Care Centre

## **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 Care Act 2014.

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 conducted by 3 inspectors and an expert by experience on the first day. The lead inspector returned alone on the second day.

#### Service and service type

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

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.

Inspection activity started on 7 March 2023 and ended on 8 March 2023.

#### 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, commissioners and professionals who work with the service. We also looked at information we had received and held on our system about the service, this included notifications sent to us by the provider and information passed to us by members of the public. We used all this information to plan our inspection.

We used the information the provider sent us in the provider information return. 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. This information helps support our inspections.

#### During the inspection

We spoke with 5 people who used the service. We spoke with 6 relatives about their experience. We spoke with 8 members of staff including the registered manager, 2 deputy managers, an area manager and care workers and a member of the domestic staff. We also spoke with 2 external health and social care professionals and received their feedback of the quality of the service. We looked at a variety of records to gather information and assess the level of care and support provided to people. We reviewed in detail four care records. We looked at staff rotas, risk assessments, multiple medicine records and 5 recruitment files. We also considered a variety of records relating to the management and governance of the service, including policies and procedures.

We looked around the home in both communal and private areas to establish if it met the needs of people who lived there and if it was safe.

#### After the inspection

We continued to seek clarification from the registered and area manager to validate evidence found.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as 'requires improvement'. At this inspection, this key question has improved to 'good'. This meant people were safe and protected from avoidable harm.

### Preventing and controlling infection

At the last inspection, we noted some chairs and items of equipment were dirty. We made a recommendation that the provider review the situation. They had acted on this and at this inspection, all of the items we checked were clean.

- 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.
- People could visit the home freely as and when they wished unless the home had been advised to restrict visiting due to an infection outbreak.

### Using medicines safely

- At our last inspection the provider had made improvements around medicines management and were no longer in breach of this regulation. At this inspection, we noted the improvements from the earlier inspection had been sustained. The registered manager, deputies and staff followed safe processes to ensure people's medicines were managed safely.
- The administration of controlled drugs was consistent with guidelines. These are medicines that can be abused but the service had strict protocols around their use, storage and disposal.
- Staff were suitably trained to administer medicines and checks on their practice had been carried out. One person said, "I get my medicines at a similar time every day."

### Staffing and recruitment

- Safe recruitment procedures were followed. Checks with previous employers in health and social care and other pre-employment considerations were completed in the files we looked at. Checks such as those into identity, right to work and criminal records had also been made.

- Some relatives and staff members told us there weren't always enough staff available to support people appropriately. At inspection, we noted there were enough staff employed. We considered recent staffing rotas and these supported that sufficient staff had been rostered to meet people's needs. One staff member said, "Staffing levels have got better, since I first came." Another said, "We have to use agency staff sometimes. The registered manager is quite good at making sure there's cover."

#### Systems and processes to safeguard people from the risk of abuse

- The provider and registered manager ensured people were protected from the risk of abuse. Staff had access to appropriate training and understood how to raise any concerns about poor practice. Staff were confident the registered manager and deputy would act quickly to keep people safe if they reported any concerns. One staff member said, "If I had concerns I would report to the nurse and the managers. I could also raise a safeguarding or ring CQC."
- People felt safe. One person said, "I love it here and feel safe." Relatives had no concerns about their family members safety.
- The registered manager, deputies and staff were clear about when to report incidents and safeguarding concerns. Policies and procedures provided guidance to staff and supported the priority of keeping people safe.

#### Assessing risk, safety monitoring and management

- The registered manager, deputies and senior staff assessed and managed risks to people's health, safety and wellbeing. People's care records included guidance for staff about how to provide their care in a safe way.
- Accidents and incidents were recorded and acted on. The registered and deputy managers provided oversight of these incidents. This helped establish if there were any trends or patterns and whether appropriate action had been taken to keep people safe.
- Equipment had been serviced and maintained in accordance with manufacturers recommendations and a range of environmental checks had been carried out to ensure the home was safe and fit for use.
- A range of other safety checks were completed including essential utilities. This also included extensive fire safety checks. We did note the provider had employed an external fire safety specialist to review the position in the home in November 2022. Some items that required attention were still in the process of completion. All essential issues had been addressed. After inspection, we received a copy of the provider's action plan around the remaining items and were satisfied work was proceeding and, in the interim, people were safe.

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)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

### Learning lessons when things go wrong

- The provider had systems to ensure lessons were learnt from any incidents. This included sharing the outcome of incidents with the staff team to further improve the safety of the service.

# 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.

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

- The provider's systems to monitor and oversee the quality of the care and support to people were effective and had been properly embedded within the fabric of the service. Senior staff members told us the registered manager had implemented a series of checks and new practices that had helped in how the home was run.
- The registered and deputy managers were clear about their roles and responsibilities. Their practice, and day-to-day management of the home served to advance the best interests of people and support staff in achieving this goal.
- Most people, their relatives and staff told us the registered and deputy managers were visible, approachable and supportive. A health care professional said, "There has been real improvement in this home. It feels better organised and staff are attentive and focused." A person who used the service said, "The bosses are OK. I would tell the managers if I had a problem" Another said, "All staff and managers are wonderful and approachable."
- Staff understood their individual responsibilities and contributions to service delivery. They had access to guides, policies and procedures. They also knew who to contact if they required support and assistance.
- The provider appointed area representatives to visit the home regularly and conduct audits and checks. These were effective and had spotted issues that had been resolved before the inspection.

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

- People received person-centred care and support. Plans of care were well written, person-centred documents, which provided the staff team with guidance about people's needs and how these were to be best met.
- Feedback from the staff members we spoke with was mostly positive. Most said they enjoyed working at the home and were well supported. One said, "The new manager has helped us. We feel valued." Another said, "Things have improved in the home compatibility wise, since the new unit opened and the new manager arrived." Keeping staff member's anonymity, we drew some concerns to the registered manager and area manager's attention. They said they would discuss the issues in staff meetings.
- People said they felt staff and management valued their views and acted on this to provide person-centred care and support.

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 and deputy managers told us they were always honest with people if things went wrong and, where appropriate, would make referrals to the local authority safeguarding team. Staff also understood the importance of reporting accidents and keeping families informed.
- Where appropriate, we noted the registered manager apologised to people and their relatives when something had not gone according to plan. The area manager said this was something that was encouraged and policy and process on this point was under review to strengthen the position on this important principal.

Working in partnership with others□

- Records showed, where appropriate, advice and guidance was sought from health and social care professionals. A health/social care professional said, "The service has improved. When there are issues, I note they work with others in the best interests of people."