

Gainsborough Care Home Limited Gainsborough Care Home

Inspection report

53 Ulwell Road Swanage Dorset BH19 1LQ Date of inspection visit: 15 October 2021

Tel: 01929253106 Website: www.agincare.com/carehomes/dorset/gainsborough-care-home-swanage Date of publication: 08 November 2021

Ratings

Overall rating for this service

Good

| Is the service safe? | Good | |
|--------------------------|------|--|
| Is the service well-led? | Good | |

Summary of findings

Overall summary

Gainsborough Care Home is a residential care home providing personal and nursing care to 44 people aged 65 and over. The service can support up to 48 people in one building, which is adapted for the needs of people with mobility difficulties.

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

At the previous inspection the home had demonstrated improvements in managing risks to people's safety from unsecured furniture and auditing to identify and manage the risk. At this inspection we found evidence improvement in this area had been sustained and people were safe.

The registered manager had brought stability to the home and greater managerial oversight. People, relatives, staff and professionals were unanimous in their praise for the registered manager seeing them as pro-active, receptive and keen to encourage all to contribute ideas to drive further improvement.

People felt safe and happy living at Gainsborough Care Home. People were supported by staff who understood how to keep them safe from harm or abuse and knew their responsibility to raise concerns if they were to witness poor or abusive practice.

People and their relatives told us they felt there were sufficient staff to meet people's needs in a timely and person-centred way. Our observations confirmed this.

People received their medicines on time and at the prescribed dose. Medicines were only administered by staff with the required training and competency assessments.

Staff felt recognised and told us management encouraged and supported them to progress. Staff and management told us they enjoyed working at Gainsborough Care Home and loved their jobs. Management told us they felt supported by the provider.

The home had a friendly, open and supportive atmosphere.

Good working relationships with other organisations such as local hospitals were helping the wider health and social care system at a time of significant pressures.

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

Rating at last inspection

The last rating for this service was requires improvement (published 15 October 2020).

Why we inspected

We inspected Gainsborough Care Home to support creating more capacity in the local adult social care

2 Gainsborough Care Home Inspection report 08 November 2021

system. We undertook a focused inspection to check improvements made at the previous inspection had been sustained. As a result, we did an inspection of the Safe and Well Led key questions and our report only covers our findings in relation to those areas. No areas of concern were identified in the Caring, Effective and Responsive key questions.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Gainsborough Care Home on our website at 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 reinspection 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 • |
| Is the service well-led? The service was well-led. | Good • |



Gainsborough Care Home

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 carried out by two inspectors 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

Gainsborough Care Home is a 'care home'. 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection This inspection was unannounced.

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 and professionals who work with the service. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and six relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, deputy manager administrator, senior care workers, care workers and domestic staff.

We reviewed a range of records. This included six people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including audits, policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, policies and quality assurance records. We spoke with a professional who visits the service.

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 now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

• Risks within the home environment were robustly managed. This included the security of furniture such as wardrobes in people's rooms, vacant rooms and communal areas. There was evidence of sustained improvement in this area. A relative expressed, "We don't see anything unsafe. My [family member] was a fireman, and we were brought up with health and safety in mind, and we don't spot anything unsafe it is all really good."

• Risks to people from fire had been minimised. Fire safety records recorded regular fire drills, equipment tests and servicing. In addition, people had personalised evacuation plans that detailed how they should be supported in the event of a fire.

• People had personalised risk assessments that were up to date and clearly detailed risks in their lives alongside control measures that could help minimise these risks as much as possible. This included areas such as mobility, skin integrity, hydration and nutrition and medicines.

• People told us they felt safe living at Gainsborough Care Home. Two people confirmed, "I feel safe as there is always someone around" and "I feel very safe at this home." Relatives also expressed confidence their family members were kept safe. Comments included, "We are sure [name] is safe" and "They are very safety conscious."

Systems and processes to safeguard people from the risk of abuse

• Staff had a good understanding of how to safeguard people in their care from harm and abuse. They told us they felt confident management would listen and take appropriate action if they raised concerns.

• Staff received safeguarding training and spoke confidently on the signs and symptoms that may indicate a person was being abused or harmed. They were clear about how they would report such concerns.

• Safeguarding incidents had been reported appropriately to the local authority and CQC. Staff told us they would feel confident whistleblowing if they observed poor practice.

Staffing and recruitment

• There were sufficient staff on shift to meet people's need in a safe and person-centred way. The home completed dependency scoring when people moved in and regularly reviewed this to ensure enough staff with the required skills were on shift to support them. A person expressed, "When I press the button they come straight away." One relative told us, "There are always staff on hand for my [family member]." A staff member said, "There are enough staff on shift - we are well staffed."

• The home had safe recruitment practices. Checks had taken place to reduce the risk that staff and agency workers were unsuitable to support people at the home. This included references from previous employers, criminal record checks and reviews of agency workers' profiles.

Using medicines safely

- People received their medicines safely, as prescribed and by staff with the relevant training.
- Staff medicines competency assessments were undertaken.

• Where people were prescribed medicines they only needed to take occasionally, there was guidance in place for staff to follow to ensure those medicines were administered in a consistent way. The home was reviewing people's records to ensure they reflected people's current needs and abilities.

• Medicines requiring stricter security were stored appropriately, with stocks matching home records.

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 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

• Accidents and incidents were reported in a timely way and analysed by the registered manager to find out what had happened, the cause, identify themes and determine actions required to help reduce the risk of a re-occurrence.

• When identified, learning was shared with staff via handovers, staff meetings and supervision.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved 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; Continuous learning and improving care ; 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 home had maintained the improved quality assurance systems and oversight we observed at the previous inspection. Comprehensive auditing took place with oversight from the registered manager. Audits included Infection Prevention and Control, security of furniture, medication, care plans and call bell response times.
- The registered manager, since appointed, had brought stability to the home and, alongside the deputy manager and staff team, had driven improvement and embedded a whole team approach. A professional advised us, "The registered manager has worked their magic. It was so good to be able to visit [recently] and see a massive improvement throughout the home with the new management team and a much happier home team and residents."
- Management recognised the importance of praising good practice. This was evident in team meeting minutes, supervision records and feedback from staff.
- The registered manager and staff team were committed and motivated to learn and make improvements to the service people received. A staff member told us, "They made me [responsible for a particular task] that made me feel amazing!"
- The registered manager demonstrated a good understanding of their responsibilities under the duty of candour and promoted an open and honest culture. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- Providers are required to notify CQC of significant incidents and events. The registered manager understood the requirement to notify CQC of significant incidents and events and appropriate notifications had been submitted as required.

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

- The home had a friendly, person-centred and open culture. The registered manager explained, "I have handpicked and grown a team that share my values and ethos about care. They really do care. I'm proud of the team from domestic staff to the seniors." A staff member said, "It feels like a big family. The management bring heart, joy and safety to the home. A good balance of those. It is a special place to work."
- People, relatives, staff and the local authority commented positively about the registered manager. The registered manager was seen as very approachable, receptive and pro-active. Relatives' comments

included, "Fantastic. They are very forthcoming, and I don't feel alone because of their help" and "Easy going, but not lax, they are very approachable." A staff member commented, "[The registered manager] is fantastic, the best manager I've had. I can't ask for better than our management team."

• Staff enjoyed working at the home and felt really supported by the management team and their colleagues. Their comments included, "It's a pleasure to go to work." and "I've really enjoyed my time here. Everything about this home has been wonderful." The registered manager told us, "They (staff) are like one family. The staff are close knit and are always willing to help each other. You need to enjoy where you work. I love where I work."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

• Staff told us they felt valued as management asked for their ideas which were used to influence changes at the home. A staff member said, "[Registered manager] is a good listener when we raise things with [them] or make suggestions." Another staff member advised, "We get asked for our views - it's a constant thing."

• Surveys were undertaken with feedback used to reflect on what was working well and what could be improved. Action plans then tracked progress on identified issues. One relative said, "How can you improve on something that is fantastic?!"

Working in partnership with others

• The home had established and maintained good working relationships with other organisations such as GPs and district nurses.

• The home was contributing to the wider health and social care system, in particular local hospitals, by providing short stays for people needing support to rehabilitate. People had moved from hospital for a period of rehabilitation at the home before moving to alternative accommodation. This was helping build capacity in the health and social care system.