

The Orders Of St. John Care Trust

OSJCT Buckland Court

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

OSJCT Buckland Court provides accommodation and personal care for up to 50 older people. At the time of our inspection 35 people were living at Buckland Court. At the last inspection in December 2015, we identified that the service was in breach of regulations relating to consent. At this inspection we found the provider had taken action to address this breach of the regulations.

This inspection took place on 7 June 2017 and was unannounced. We returned on 8 June 2017 to complete the inspection.

There was a registered manager in post at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People who use the service and their relatives were positive about the care they received and praised the quality of the staff and management. Comments from people included, "The staff are very nice, I get on well with them. They know what they're doing". One person when asked what made the service good replied, "It's the staff, they're excellent". We observed staff demonstrating a good understanding of people's needs and how to meet them.

People told us they felt safe when receiving care and were involved in developing and reviewing their care plans. Systems were in place to protect people from abuse and harm and staff knew how to use them. Comments from people included, "We're as safe as houses here – the staff are very good" and "I feel safe here. No one bothers me and the staff will help out if I need them".

Staff understood the needs of the people they were providing care for. People told us staff provided care with kindness and compassion.

Staff were appropriately trained and skilled. They received a thorough induction when they started working at the home. They demonstrated a good understanding of their role and responsibilities. Staff had completed training relevant to their role.

The service was responsive to people's needs and wishes. People had regular group and individual meetings to provide feedback about their care and there was an effective complaints procedure. One person told us, "I would speak to (the registered manager) if I had any concerns. She would sort it out".

The provider regularly assessed and monitored the quality of care provided at Buckland Court. Feedback was encouraged and was used to make improvements to the service.

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.

People who use the service said they felt safe when receiving support.

There were sufficient staff to meet people's needs safely. People felt safe because staff treated them well and responded promptly when they requested support.

Systems were in place to ensure people were protected from abuse. Risks people faced were assessed and action taken to manage the risks.

Is the service effective?

Good ●

The service was effective.

Staff had a good understanding of the Mental Capacity Act (2005) and there were systems in place to make decisions when people did not have capacity to consent.

Staff had suitable skills and received training to ensure they could meet the needs of the people they cared for.

People's health needs were assessed and staff supported people to stay healthy. Staff worked well with specialist nurses and GPs to ensure people's health needs were met.

Is the service caring?

Good ●

The service was caring.

People spoke positively about staff and the care they received. This was supported by what we observed.

Care was delivered in a way that took account of people's individual needs and in ways that maximised their independence.

Staff provided care in a way that maintained people's dignity and upheld their rights. People's privacy was protected and they were

treated with respect.

Is the service responsive?

Good ●

The service was responsive.

People were supported to make their views known about their care and support. People were involved in planning and reviewing their care.

Staff were supported to put person-centred values into practice in their day to day work.

People told us they knew how to raise any concerns or complaints and were confident that they would be taken seriously.

Is the service well-led?

Good ●

The service was well led.

There was a strong leadership team who promoted the values of the service. There were clear reporting lines from the service through to senior management level.

Systems were in place to review incidents and audit performance, to help identify any themes, trends or lessons to be learned. Quality assurance systems involved people who use the service, their representatives and staff and were used to improve the quality of the service.

OSJCT Buckland Court

Detailed 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 to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 7 June 2017 and was unannounced. We returned on 8 June 2017 to complete the inspection.

The inspection was completed by one inspector. Before the inspection we reviewed previous inspection reports and all other information we had received about the service, including notifications. Notifications are information about specific important events the service is legally required to send to us.

During the visit we spoke with the registered manager, 10 people who use the service, six care staff and the area manager of the provider. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We spent time observing the way staff interacted with people who use the service and looked at the records relating to support and decision making for five people. We also looked at records about the management of the service. Following the inspection we received feedback from a mental health practitioner who had contact with the service.

Is the service safe?

Our findings

At the last inspection in December 2015 we found that people received support in a safe way. We found these standards had been maintained during this inspection.

People said they felt safe living at Buckland Court. Comments included "I feel safe here – I have no qualms", "We're as safe as houses here – the staff are very good" and "I feel safe here. No one bothers me and the staff will help out if I need them". We observed people interacting with staff in a confident and friendly way. People appeared relaxed in the company of staff and did not hesitate to attract their attention if they needed assistance. Staff intervened promptly if people needed assistance to stay safe, including support to move safely around the home and support with managing disputes between people.

Staff had the knowledge and confidence to identify safeguarding concerns and act on them to protect people. They had access to information and guidance about safeguarding to help them identify abuse and respond appropriately if it occurred. Staff told us they had received safeguarding training and we confirmed this from training records. Staff were aware of different types of abuse people may experience and the action they needed to take if they suspected abuse was happening. They said they would report abuse if they were concerned and were confident the registered manager or senior staff in the organisation would listen to them and act on their concerns. Staff were aware of the option to take concerns to agencies outside the service if they felt they were not being dealt with. We saw the home had reported issues and worked openly with the safeguarding team where any concerns had been raised. The registered manager had records of all issues addressed through the safeguarding procedures and tracked them to ensure any actions were completed in a timely way.

Risk assessments were in place to support people to be as independent as possible, balancing protecting people with supporting them to maintain their freedom. Assessments included details about how to support people to minimise the risk of falls, maintain suitable nutrition and support needed in the event of an emergency such as a fire. People had been involved throughout the process where possible to assess and plan the support needed to manage the risks. Staff demonstrated a good understanding of people's need and the actions they needed to take to keep them safe.

Effective recruitment procedures ensured people were supported by staff with the appropriate experience and character. This included completing Disclosure and Barring Service (DBS) checks and contacting previous employers about the applicant's past performance and behaviour. A DBS check allows employers to check whether the applicant has any convictions or whether they have been barred from working with vulnerable people. We checked the records of two recently recruited staff and found the organisation's procedures were being followed and staff had been thoroughly checked before starting work. The registered manager said they had recruited new staff following a values based process. This focused on recruiting people with the values and skills they wanted, rather than looking at their specific experience in care homes.

Sufficient staff were available to support people. People told us there were enough staff available to provide support for them when they needed it. We observed staff responding promptly to requests for assistance

and the call bells. Staff told us they were able to provide the care and support people needed.

Medicines held by the home were securely stored and people were supported to take the medicines they had been prescribed. A medicines administration record had been fully completed. This gave details of the medicines people had been supported to take, a record of any medicines people had refused and the reasons for this. There was a record of all medicines received into the home and disposed of. Where people were prescribed 'as required' medicines, there were protocols in place detailing when they should be administered. Records demonstrated these protocols had been followed when people needed these medicines.

Is the service effective?

Our findings

At the last comprehensive inspection in December 2015 we identified that the service was not meeting Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the systems for gaining and recording consent from people were not always followed. The registered manager wrote to us to set out the action they would take to address the shortfalls following the inspection. At this inspection we found that action had been taken to improve the way people's consent was recorded and the provider was meeting the requirements of the regulation.

Staff demonstrated a good understanding of the principles of the Mental Capacity Act 2005 (MCA). The 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 Act 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 legally authorised under the MCA. 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 MCA. The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS).

Mental capacity assessments had been carried out to determine whether people had the capacity to make certain decisions. For example there were assessments in relation to people's capacity to make decisions relating to management of health conditions and whether to live at Buckland Court. Where people did not have capacity to make decisions, best interest decisions had been made following involvement of the person and others involved in their care, including their family, advocates, staff at the service, social workers and health professionals. The registered manager had submitted DoLS applications for people where appropriate and was waiting for them to be assessed by the local authority. There was a record of all DoLS applications that had been made, which were kept under regular review to ensure they were supporting people in the least restrictive way possible.

Staff told us they received regular training to give them the skills to meet people's needs. Staff told us the training they attended was useful and was relevant to their role in the home. The registered manager had a record of all training staff had completed and when refresher training was due, which was used to plan the training programme. Staff were supported to undertake formal national qualifications in health and social care. The registered manager said she wanted to focus on more in depth dementia care training, to build on the knowledge and skills of the staff team. The provider also employed an Admiral Nurses to provide specialist dementia support. The registered manager said the Admiral Nurses were used to provide bespoke training and development to help staff develop strategies to meet people's specific needs.

People told us staff understood their needs and provided the support they needed, with comments including, "The staff are very nice, I get on well with them. They know what they're doing". One person when asked what made the service good replied, "It's the staff, they're excellent". We observed staff demonstrating a good understanding of people's needs and how to meet them. Staff demonstrated good communication skills and an understanding of people's individual likes and dislikes.

Staff had regular meetings with their line manager to receive support and guidance about their work and to discuss training and development needs. We saw these supervision sessions were recorded and the registered manager had scheduled regular one to one meetings for all staff throughout the year. Staff said they received good support and were also able to raise concerns outside of the formal supervision process. Comments from staff included, "I have regular supervision and feel well supported. The team works well to support each other", "They always listen to us" and "There's always someone to talk to. I've had the support I need".

People told us they enjoyed the food provided by the home and were able to choose meals they liked. Comments included, "The food is very good" and "Some meals are better than others, but there's nothing I don't like. The puddings are very good". Lunchtimes were a relaxed and social occasion. People were offered a choice of meals, which were well presented. During the meal people chatted and laughed and staff joined in with discussions that were taking place.

People said they were able to see health professionals where necessary, such as their GP, specialist nurse or speech and language therapist. People's care plans described the support they needed to manage their health needs. There was clear information about monitoring for signs of deterioration in their conditions, details of support needed and health staff to be contacted. The mental health practitioner we received feedback from said staff knew people well and worked with their team to implement any advice that was given.

Is the service caring?

Our findings

At the last inspection in December 2015 we found that people received support in a caring way. We found these standards had been maintained during this inspection.

People told us they were treated well and staff were caring. Comments included, "The staff are very kind and treat me well" and "The care staff are lovely". We observed staff interacting with people in a friendly and respectful way. Staff respected people's choices and privacy and responded to requests for support. We observed staff responding to people in a caring and respectful way. For example, staff took time to help people straighten their clothing and check with people whether they needed any assistance. Staff were friendly and spoke about people in a respectful way.

In addition to responding to people's requests for support, staff spent time chatting with people and interacting socially. People appeared comfortable in the company of staff and had developed positive relationships with them. Staff ensured they spoke with people who chose to stay in their room or sit alone in one of the quiet areas of the home. This helped to ensure that people did not become socially isolated.

Staff had recorded important information about people, for example, personal history, plans for the future and important relationships. People's preferences regarding their daily support were recorded. Staff demonstrated a good understanding of what was important to people and how they liked their support to be provided, for example people's preferences for the way staff supported them with their personal care needs. This information was used to ensure people received support in their preferred way.

People were supported to contribute to decisions about their care and were involved wherever possible. People and their relatives had individual meetings with staff to review how their care was going and whether any changes were needed. Details of these reviews and any actions were recorded in people's care plans. People told us staff consulted them about their care plans and their preferences. There were also regular residents' meetings, which were used to receive feedback about the service and make decisions about activities in the home. There was an 'amenity fund' for people to access. Records showed this money was only used following consultation with people and agreement of what it should be spent on.

Staff received training to ensure they understood the values of the organisation and how to respect people's privacy, dignity and rights. This formed part of the core skills expected from staff and was mandatory training for everyone working in the service. People told us staff put this training into practice and treated them with respect.

Is the service responsive?

Our findings

At the last inspection in December 2015 we found that people received support in a responsive way. We found these standards had been maintained during this inspection.

People had a care plan which was personal to them. The plans included information on maintaining health, daily routines and goals to maintain skills and maximise independence. Care plans set out what people's needs were and how they wanted them to be met. The plans included a one page profile, in which people and those who know them well had set out details of what is important to them and how they want care to be provided. This gave staff access to information which enabled them to provide support in line with people's individual wishes and preferences. The plans were regularly reviewed with people and we saw changes had been made following people's feedback. Staff demonstrated a good understanding of people's needs and how they should be met. Staff said the plans were updated promptly as people's needs changed and they were informed of any changed through the handover process.

People told us they were able to keep in contact with friends and relatives and most said they could take part in activities they enjoyed. There was a programme of planned activities, which included trips out, arts and crafts activities, visiting entertainers and religious services. The programme was designed with input from people who use the service. A group of three people we spoke with said they would like more activities to be organised. They went on to tell us a new activities co-ordinator had started work in the home and as working with them to plan a new programme of activities. We observed staff providing company and interaction with people in their rooms and quiet areas of the home throughout the visit.

People were confident any concerns or complaints they raised would be responded to and action would be taken to address their issue. People told us they knew how to complain and would speak to staff if there was anything they were not happy about. Comments included, "I would speak to (the registered manager) if I had any concerns. She would sort it out" and "I could speak to any of the staff if I had a complaint". The service had a complaints procedure, which was provided to people when they moved in.

Complaints were regularly monitored, to assess whether there were any trends emerging and whether suitable action had been taken to resolve them. Staff were aware of the complaints procedure and how they would address any issues people raised in line with it. Complaints received had been investigated and a response provided to the complainant. In addition to the record of formal complaints, the registered manager had a 'grumbles' book. This was used to record lower level concerns that people had expressed and what action had been taken to resolve them. These systems showed the service was responsive to feedback from people about their experiences.

Is the service well-led?

Our findings

At the last inspection in December 2015 we found that the service was well-led. We found these standards had been maintained during this inspection.

There was a registered manager in post at Buckland Court who had moved to the service since the last inspection. The registered manager was available throughout the inspection. In addition to the registered manager, the management team included an area operations manager. The post of deputy manager was vacant and the provider was in the process of recruiting a new one at the time of the inspection.

Staff had clearly defined roles and understood their responsibilities in ensuring the service met people's needs. There was a clear leadership structure and staff told us the registered manager gave them good support and direction. Comments from staff included, "The management understand the job and they will help. They are approachable and have a good understanding of what is going on" and "There are conversations (with the registered manager). We are involved, we're listened to and we feel valued".

There was a quality assurance process which focused on a different aspect of service delivery each month, including an assessment of the service by the area operations manager. In addition to these reviews by operational staff, the organisation had a central quality team, who completed comprehensive audits of the service.

Information from the audits and reviews was used to develop an action plan to address any shortfalls and to promote best practice through the service. The development plan was reviewed and updated as part of the registered manager's supervision sessions. This ensured actions were being implemented where necessary. The registered manager shared the development plan with us. The plan included actions relating to implementing best practice issues relating to the care of people living with dementia and engaging with local community groups to increase community participation.

There were regular staff meetings, which were used to keep staff up to date and to reinforce the values of the organisation and how they expected staff to work. Staff also reported that they were encouraged to raise any difficulties and the registered manager worked with them to find solutions.

The views of people who use the service were sought through group and individual meetings. Surveys were also completed regularly to gain people's views and enabled them to provide information anonymously if they wanted to. The registered manager had also introduced social events as an opportunity to meet people and their relatives in a more informal way. These had included a cheese and wine evening and a cream tea.