

The Orders Of St. John Care Trust

OSJCT Hungerford House

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

Hungerford House is a care home providing accommodation and personal care to 39 people at the time of the inspection. The service can support up to 48 people. People live in three areas of the building, one of which specialises in providing care to people living with dementia.

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

People were safeguarded from the risk of abuse and received safe care and treatment. There were enough staff to meet people's needs. Risk assessments and care plans were thorough, up to date and provided staff with enough detail to support people safely. Medicines were managed safely, and staff worked with health and social care professionals to help people maintain their health and well-being. The environment was clean and good infection control procedures were followed.

The service had a registered manager in place who was supported by the provider. Quality assurance processes were in place to monitor the service and made improvements where needed. Staff and relatives told us that the registered manager was approachable, and staff were confident that action would be taken if they raised concerns.

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 good (published 6 November 2018).

Why we inspected

We received concerns in relation to the management of falls and incidents between people in the home. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them.

Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained as good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

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 OSJCT Hungerford House 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 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.

OSJCT Hungerford House

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 team consisted of 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

Hungerford House 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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they

plan to make. We took this into account when we inspected the service and made the judgements in this report. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and nine relatives about their experience of the care provided. We spoke with 17 members of staff including the registered manager, area manager, care workers, domestic and maintenance staff and the chef. 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 reviewed a range of records. This included 10 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 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 and quality assurance records. We spoke with two professionals who regularly visit 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.

Using medicines safely

At our last inspection we recommended the provider monitors their medicines management systems, to ensure that improvements were sustained. The provider had maintained these improvements.

- People's medicines were appropriately managed. Medicines were safely received, stored, administered and destroyed. Clear protocols were in place for the use of 'as required' medicines.
- Staff had received training to administer medicines and their competencies for this task were reviewed. We observed the safe administration of medicines.

Staffing and recruitment

At our last inspection we recommended the provider implemented a system that ensured the registered manager had access to an overview of each staff member's recruitment file. The provider had made improvements.

- Staff had been recruited safely. The provider completed pre employment checks such as references and Disclosure and Barring Service (DBS) checks. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.
- Relatives told us people were well cared for by staff. Comments included, "Staff are very friendly and kind," "[Person] always says how good the staff are" and "They're [staff] so kind and patient, if you ask anything they will do their utmost to do it for you."
- One person said, "They're [staff] brilliant, they work as a team and do it together."
- Staff received appropriate training and induction to ensure they had the relevant skills to support people appropriately.

Systems and processes to safeguard people from the risk of abuse

- Policies and procedures were in place to safeguard people from abuse. Staff had received training about safeguarding adults. They were knowledgeable about types of abuse and knew that they needed to report all allegations and suspicions of abuse without delay.
- Staff interacted and engaged with people very well, using people's familiar methods of communication. They were encouraging, supportive and respectful towards people
- Relatives told us that they thought people were safe. A relative told us, "we know that [person] is safe and being looked after." Another said "[Person] speaks very highly of them [provider] and loves the staff there. [Person] would tell me otherwise."

- The registered manager understood their responsibilities in investigating and reporting safeguarding concerns. Records of previous safeguarding investigations reflected that appropriate action had been taken in response to concerns about people's safety.

Assessing risk, safety monitoring and management

- Risks associated with people's care and support were identified and well managed to keep people safe
- The environment and equipment were safe and well maintained. During the inspection the service was improving the safety of the building by completing recommended fire safety measures.
- People had a personal emergency evacuation plan in place which recorded their needs and gave guidance on how to evacuate people in an emergency.

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 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 recorded including actions taken. This was reviewed by the registered manager to identify trends or patterns and to ensure lessons were learnt.

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 good. At this inspection this key question has now remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Relatives confirmed people experienced good outcomes. Comments included, "[My relative] looks very healthy and clean, she's improved since being at Hungerford House" and "[My relative] has gained weight, they cut her hair and keep her looking nice."
- Staff feedback was positive about the management team and the changes made since the registered manager joined the service. All staff told us the registered manager was approachable. One member of staff said, "If you've got a problem she will listen and sort it out". Another said, "[The registered manager] has implemented really good changes. Firm but fair and staff have taken well to this."

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 manager was aware of their responsibility to act in an open and transparent way when things went wrong.
- The registered manager understood the duty of candour and was always quick to speak to relatives if there were incidents at the home or if people's care needs changed. A relative told us, "They always ring me if there is anything wrong."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was a clear management structure in place, and all staff understood their role and responsibilities in supporting people to live at Hungerford House.
- Audits were in place for a variety of areas, such as medicines, daily records, care plans and the cleanliness and infection control measures in the home.
- The registered manager was well supported by a regional manager who visited regularly and monitored the quality of care.
- An action plan was in place to ensure the service continually looked at how it could be improved and whom was accountable with clear timescales.
- Accidents and incidents, such as falls were monitored. Trends were observed, looking at how often they occurred and who was involved.

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

- The provider promoted an open and inclusive culture which sought the views of people living in the care home, their relatives and staff. Several relatives told us they attended a video call about the service. One relative said, "They're open and honest on what's going on."
- Regular staff meetings were held which enabled the registered manager to continuously monitor and improve people's experiences of the care and support provided. One staff member said, "You feel your concerns are listened to and addressed."
- The registered manager operated an open-door policy so people, staff and relatives could speak with them when they needed to.

Working in partnership with others

- The registered manager was aware of the local facilities, clubs and organisations in the area, and as they reopened would continue to support people in building links with the local community.
- We received positive feedback from partner professionals about the way the service cared for and supported people.