

Avery Homes SH Limited

Spencer House Care Home

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

Spencer House Care Home is a residential care home providing personal and nursing care for up to 65 younger and older people, including people living with dementia, mental health and/or physical disabilities. There were 52 people receiving care at the time of the inspection

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

People were supported by staff who knew them well and had been safely recruited. Staff received training to ensure they had the skills to complete their roles.

People were protected from abuse. The provider had effective safeguarding and whistleblowing systems and policies in place and staff understood how to recognise signs of abuse and who to report to.

People told us they felt safe and that staff were "Kind, polite, respectful and caring." Relative's told us they were comfortable with the care given at Spencer House.

Risks had been assessed and strategies implemented to mitigate risks. Care plans detailed people's preferences as to how they liked their care to be delivered and included likes and dislikes, and how they wished the staff to communicate with them. People and relatives told us they were involved in their care planning. People had signed consent forms for information to be shared.

The environment appeared clean and infection prevention and control measures were in place. Staff wore appropriate personal protective equipment (PPE) and cleaning schedules were in place.

The registered manager completed regular audits to ensure lessons could be learnt and improvements made as needed and implemented some improvements immediately after inspection regarding medicines management.

People staff and relatives were all positive about the service and the registered manager. Complaints had been responded to and outcome communicated with all the relevant people as appropriate.

Staff felt supported and were able to feedback and give suggestions to the registered manager on the service. People felt included and updated on changes being made.

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 3 January 2018).

Why we inspected

We received concerns in relation to staff knowledge and safe care. 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.

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.

Spencer House Care Home

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

This inspection was completed by one inspector.

Service and service type

Spencer 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.

During the inspection

We spoke with four people who used the service and four relatives about their experience of the care provided. We spoke with eleven members of staff including registered manager, deputy manager, unit manager, training manager and care workers.

We reviewed a range of records. This included seven 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.

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 good. At this inspection this key question has remained the same. Good: This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to protect people from abuse. Unexplained injuries had been investigated and recorded appropriately.
- People were supported by staff who had received safeguarding training and understood how to recognise signs of abuse and who to report to. One staff member told us, "If I saw bruises, I would document, report, inform GP, take photograph for evidence and find out how it happened."
- People and their relative's told us they felt safe with staff and were comfortable with the care given at Spencer House. One person said, "I feel safe, as staff are never mean, I feel like part of the team."

Assessing risk, safety monitoring and management

- Risk assessments were completed and contained strategies to reduce potential harm from equipment, environment and healthcare. However, staff had not always consistently followed these strategies. For example, repositioning tasks had not always been completed within the specified timeframes to mitigate risks associated with pressure damage. However, we found no evidence of harm to people.
- Staff received training in risk assessments and moving and handling, records we looked at confirmed this. Staff understood the known risks to people.
- Fire safety checks were completed and Personal Emergency Evacuation Plans (PEEPs) were in place to support the evacuation of people using the service in the event of an emergency, these detailed the level of support people required. Staff had received training in fire safety.

Staffing and recruitment

- 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.
- People, staff and relatives told us they felt there was enough staff. A staff member told us "We always have enough staff, well-being staff can come off their roles, laundry staff can help with tea rounds etc. We always pull together." A person told us "There is enough staff, if I call, they come. They are very responsive."
- Staff received appropriate training and induction to ensure they had the relevant skills to support people appropriately.

Using medicines safely

- People were supported to take their medicines as prescribed by staff who had received training and understood what to do if a person refused their medication.

- Medicine administration record's (MAR) were completed accurately. However, when people were given 'as required' (PRN) medicines, staff had not always documented the reason for administering the medicine and the PRN protocol was not always in place. The registered manager implemented the protocols immediately to ensure staff had all the information required to administer PRN medicines.

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

- Systems and processes were in place to gain oversight of the service. Audits were completed for a range of checks including care plans, medication administration charts, staff records and daily notes. Action plans were completed and reviewed to ensure all documentation was up to date and reflected best practice.
- The registered manager was aware of their role and responsibilities about meeting CQC registration requirements including submitting statutory notifications about the occurrence of any key events or incidents involving people they supported. Notifications were submitted in a timely manner.
- All staff knew who they should talk to if they had any concerns or suggestions. The registered manager was available to staff, residents and relatives as required.
- Reviews of people's care needs were completed and involved the person and their relative as appropriate. Care plans and risk assessments were updated where needed.
- It is a legal requirement that the provider's latest CQC inspection report is displayed at the service where a rating has been given. This is so people, visitors and those seeking information about the service can be informed of our judgments. We found the provider had displayed their rating in the home.

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 clear about their responsibility to be open and transparent in line with their duty or candour responsibility. We saw evidence of duty of candour and outcome of complaints letters being completed.

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

- The provider had systems in place to take account of people's, relatives and staff opinions of the service. However, surveys had not been completed since 2019. Relatives told us they were regularly asked to feedback on the service in reviews and general meetings. A person told us, "Staff and the manager always ask me if I'm OK and if anything could be better."
- Staff meetings and supervisions were available for staff to share any feedback. Staff said they could make suggestions and raise concerns. One staff member told us, "The home manager is always approachable. I have no concerns about raising anything with them."
- Relative meetings were arranged and offered, to discuss any changes, updates, feedback or suggestions.

Continuous learning and improving care

- The registered manager had a number of quality assurance systems in place. Audits were in place which enabled the management team to monitor the service and drive improvements as required. Where improvements were identified actions were put in place to address any issues.

Working in partnership with others

- Staff worked closely with healthcare professionals such as speech and language therapists, GP's and dieticians.
- People were supported to access support. Referrals were made to the falls team and memory clinics as required.