

Anchor Hanover Group

Prior Bank House

Inspection report

74 Cherry Tree Road
Sheffield
South Yorkshire
S11 9AB

Website: www.anchor.org.uk

Date of inspection visit:
05 February 2020

Date of publication:
19 February 2020

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

About the service

Prior Bank House is a residential care home providing accommodation and personal care for to 32 people aged 65 and over at the time of the inspection. The is home is a converted Victorian house with a purpose-built extension to the rear.

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

People received person centred care and support based on their individual needs and preferences. Staff were aware of people's life histories and individual preferences. Staff knew how to minimise risks to people and followed good practice guidance as detailed within risk assessments. People were supported by sufficient numbers of staff who had undergone a robust recruitment process.

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.

Staff received an induction and on-going training to support them in their roles. People had access to services they required to maintain their health and staff supported them accordingly.

Medicines were managed safely, and people were protected from the risks associated with the spread of infection.

The service worked with a variety of health and social care professionals to help people achieve good outcomes and promote their wellbeing. There was a variety of activities on offer.

People were supported by a management team that looked to ensure people received person-centred care. The quality of care people received was audited and monitored by staff using effective quality assurance systems.

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 21 August 2015). There was also an inspection on 12 December 2017 however, the report following that inspection was withdrawn as there was an issue with some of the information that we gathered.

Why we inspected

This is a planned re-inspection because of the issue highlighted above.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Prior Bank 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.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Prior Bank 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.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We used information we had received through our ongoing monitoring of the service and feedback we received from the local authority. 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 14 people living at Prior Bank House to ask about their experience of the care provided. We spoke with six members of staff including, the area manager, registered manager, the deputy manager and three care workers. 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 records relating to the care people were receiving and the management of a care home. This included, the medicine systems, two care plans, training and supervision records, audits, records of servicing and maintenance and a sample of policies and procedures.

Is the service safe?

Our findings

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

At the inspection on 23 and 24 April 2015 this key question was rated as Good.

Assessing risk, safety monitoring and management

- People's care needs were risk assessed regularly or as their needs changed. Care and risk support plans informed staff how to provide care to reduce known risks. Staff told us they had enough time to keep up to date with changes to people's needs and risks.
- Staff used a range of evidence-based tools to assess and monitor people's risks, for example, malnutrition, falls, skin integrity and moving and handling.
- The health and safety of the building and equipment used to support people had been maintained. Planned fire evacuations were effective. One staff member said, "I would feel confident in an emergency, such as a fire as we do drills all the time."

Using medicines safely

- People were safely supported with their medicines by staff who had been appropriately trained.
- People had medicines administration records (MAR) in place where staff documented when people had taken their medicines. We saw the MAR were completed accurately when medicines were administered and there were no gaps in signatures.
- Protocol forms were available to be used to direct staff in what circumstances 'when required' medicines should be administered.

Staffing and recruitment

- There were enough staff on duty with the right skills and experience to look after people. People said staff acted quickly when they needed support and responded to call bells.
- Staff told us they worked together to ensure people's needs were met in a timely way. Staff comments included, "We work well as a team and know our residents needs very well" and "Sometimes we can be stretched, but we work well as a team."
- The provider carried out checks to ensure staff were suitable to work with people. These included checks of references and the Disclosure and Barring Service, a national agency that keeps records of criminal convictions.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse because staff knew how to recognise and report abuse. Staff were confident the registered manager would act quickly to keep people safe if they reported any concerns.
- People said they received care and support which made them feel safe. One person said, "I love it here, I feel safe and comfortable."

Preventing and controlling infection

- The service was clean throughout. Staff had access to equipment to minimise the risks of infection. One person told us, "The home is immaculate throughout."
- Staff received training and understood their responsibilities to follow infection control procedures to keep people safe from the risk of infection.

Learning lessons when things go wrong

- There was an open culture at the service which encouraged staff to report any concerns.
- There was a process that ensured when accidents and incidents occurred these were appropriately recorded, investigated and areas for improvement identified and acted on. The service followed good practice guidelines and had a post falls assessment tool that guided staff on the appropriate action to take and who to inform.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the inspection on 23 and 24 April 2015 this key question was rated as Good.

Staff support: induction, training, skills and experience

- People were supported by staff who were suitably trained and supported to carry out their role.
- Staff accessed a wide variety of training in key areas to enable them to provide effective care, which included training in health and safety related topics, and areas specific to meeting people's need.
- Staff we spoke with told us they received training on a regular basis and support from the management team was available to them. One staff member told us, "I think the training is good. Anchor do invest in the staff here."
- Staff received ongoing support and feedback about their work through supervision and appraisal, providing an opportunity for staff to discuss their training and development.

Supporting people to eat and drink enough to maintain a balanced diet

- The service supported people to maintain good nutrition and hydration.
- People had choice and access to sufficient food and drink throughout the day, food was well presented, and people told us they enjoyed it. Comments included, "The food is very good here" and "The meals get my approval."
- Where people were at risk of poor nutrition and dehydration, care plans detailed actions such as monitoring the persons food and fluid intake and liaising with other professionals.
- We found the lunch time meal was managed well and enough staff were able to support people who required help.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Assessments were comprehensive and reflective of the Equality Act, considering people's individual needs, which included their age and disability.
- We saw care staff recorded people's changing health conditions, and people we spoke to confirmed they were involved in the development of the service they received.

Supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- The service worked with other organisations to ensure they delivered joined-up care and support. People's healthcare needs were monitored, and action taken to address any changes in their health.
- People were supported to access routine medical support from healthcare professionals such as general practitioners. One professional told us, "This is a nice home, I never have concerns about my patients."
- People were supported by staff to attend healthcare appointments when required and they confirmed this when spoken with. Staff supported people in managing their health and wellbeing needs by

making appropriate referrals to specialist services.

Ensuring consent to care and treatment in line with law and guidance

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 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 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service was working within the principles of the MCA.
- We found the provider had a robust oversight of the DoLS that had been submitted and when they were due to expire. We found appropriate applications to the local authority meant that people's freedoms were not unlawfully restricted.
- Staff knew how the MCA and DoLS applied to their work. They asked people for their consent before they carried out any personal care and they offered people choices in all aspects of their lives. One member of staff said, "I believe we follow the MCA correctly. If people are restricted in any way this is recorded, assessed and a best interest will take place."

Adapting service, design, decoration to meet people's needs

- Prior Bank House is arranged over two floors, with a large communal lounge and a dining room on the ground floor. A quiet lounge was also located on the ground floor for people to use, if they wished to spend time in a quieter environment.
- People could access the homes courtyard, that was nicely presented with flower beds, ample seating and a newly installed summer house that would be used for events in the home.
- The home was accessible, homely and suitable for people's needs. Bathrooms could accommodate people who required support with moving and transferring to the bath.
- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. We confirmed this during the day and visiting people's rooms.
- There was dementia friendly signage around the home which helped support people who lived with dementia.
- We found people had been involved in the design and decoration of the service. For example, people were recently involved in choosing the colour scheme throughout the home.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the inspection on 23 and 24 April 2015 this key question was rated as Good.

Ensuring people are well treated and supported; respecting equality and diversity

- People were treated in a kind and caring way. People told us, "I like it here. The staff are all very kind" and "I have my favourite ones [care workers], but they all do a good job."
- We observed positive interactions between staff and people. For example, we observed one person who started to become anxious, received a timely response from a staff member. It was clear the staff member knew this person very well.
- People's records included details of life histories, religious beliefs and wishes and preferences. This enabled staff to use this information to provide personalised care.

Supporting people to express their views and be involved in making decisions about their care

- The service encouraged people to make choices about their day and care preferences. One person said, "I do have my independence and the staff respect that I like to stay in my room and they don't push their ideas on to me about mixing with others."
- People told us they were able to express their views and make decisions. However, we found care review records did not always show people were involved in their care planning. The registered manager confirmed this would be addressed going forward to ensure there was the right level of consistency with reviews.

Respecting and promoting people's privacy, dignity and independence

- The privacy and dignity of people was respected and promoted by staff. People had privacy when they needed to talk about issues affecting them. Everyone had their own bedroom with an en-suite facility.
- The home encouraged people to mobilise around the home using mobility aids to prompt their well-being and independence.
- People had access to technology and WIFI in the home. This allowed people to maintain independence, with some people regularly contacting family and friends using face time and skype.
- People's records were accurate, complete and legible. These were securely stored and accessible to staff for updating.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the inspection on 23 and 24 April 2015 this key question was rated as Good.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Support plans provided a comprehensive guide as to people's needs, which took into account all aspects of their care, and provided a detailed account of their physical, mental, emotional and social needs.
- Many people living at the home had a diagnosis of some form of dementia or identified as having short term memory loss, while some were supported with mental health needs. The service ensured mental health and wellbeing care plans were in place to guide staff on how to support that individual.
- The staff team completed people's daily notes, which provided an overview of the care people had received and captured any changes in people's health and well-being.

Meeting people's communication needs:

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Each person's communication needs were assessed and used in care planning. Information would be available for people in their preferred format should they require it. We saw information for people and their relatives about this was displayed around the home.
- We saw there was signage around the home to help people identify specific areas such as the bathroom and dining room. There were also pictorial food menus available and cards people could use to show how they were feeling.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to avoid social isolation. People had the opportunity to participate in activities they enjoyed and experience interactive activities.
- The service shared an interactive projector with other Anchor homes. When this was used it provided a great stimulus for people, with many positive examples provided. The service also had interactive technology where a peddle machine was connected to the home's TV screen, this allowed people to peddle around locations via an online aviator. One person told us, "I love the peddle machine, its great fun and brings back memories."
- People also benefited with weekly Tia Chi sessions in the home weekly. The management team told us these sessions helped people improve their mobility and balance along with making them feel very relaxed.

End of life care and support

- There was no one receiving end of life care at the time of the inspection.

- People's end of life wishes had been captured. These included any advanced directives on medical interventions, any spiritual wishes and preferences on funeral arrangements.

Improving care quality in response to complaints or concerns

- Complaints had been appropriately managed in line with the provider's procedure. There had been only one recorded complaint, and this had been investigated thoroughly and an appropriate response given.

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 inspection on 23 and 24 April 2015 this key question was rated as Good.

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

- We saw records of completed audits, on a wide range of areas, including health and safety, the environment, care plans and medicines. Information gathered was used to ensure compliance with regulations and drive improvements, for example falls prevention work.
- There was good communication maintained between the registered manager and staff. There were clear lines of responsibility across the staff team.
- Staff felt respected, valued and supported and that they were fairly treated. One staff member told us, "This is a well-run home. I feel the [registered manager's name] is always approachable."

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

- People expressed confidence in the management team. One person told us, "I can always pop in and speak to the managers. They are good people."
- Staff were actively encouraged by management to raise any concerns in confidence. One staff member told us, "There is an open culture here. I would have no worries speaking to the managers if I had an issue."
- The manager was aware of the legal responsibility to notify us of incidents that occurred at the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Meetings involving staff were regularly held, providing an opportunity for staff to share information about the people they supported to improve people's care and support.
- The views of people were sought about the service during key worker sessions. People and their relatives could also share their views on carehome.co.uk. The service regularly monitored this website and the homes current rating was 9.8 out of 10. A recent comment included, "Thank you to every member of staff at Prior Bank, and for your lovely smiling faces when we visit Dad, you are always so friendly and welcoming to us too."

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; Continuous learning and improving care

- The provider had a communication network to help the service work in partnership with other professionals, including the district nursing service, physiotherapy, occupational therapy and local GP's.
- The registered manager understood their responsibilities in relation to the duty of candour regulation. They explained their policy for honesty and transparency following an incident. We saw that duty of candour records were kept as part of the complaints policy.

