

Stapely Jewish Care Home Limited

Stapely Residential and Nursing Home

Inspection report

North Mossley Hill Road
Mossley Hill
Liverpool
Merseyside
L18 8BR

Tel: 01517243260

Website: www.liverpooljewish.com

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Stapeley Residential and Nursing Home is a residential care home providing personal and nursing care for up to 97 people of Jewish and non-Jewish faith. The service is provided over three large houses, all of which are connected. Two houses provided residential personal care and one house provided nursing care. At the time of this inspection 45 people were using the service.

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

Aspects of governance and oversight of the environment needed improving. The provider took immediate actions to carry out updated repairs and refurbishment.

Suitable numbers of staff were provided. The manager advised she would review how she manages and calculates staffing numbers so she can share this information with everyone at the service.

Staff were aware of the procedures to follow to prevent and control the spread of infection and received specific guidance about the COVID-19 pandemic. We signposted the manager to further guidance to ensure equipment was replaced and safely maintained. Risks associated with individual's needs were assessed and regularly reviewed with measures in place to mitigate risks.

People were happy with the care and support they received. People had access to services and facilities that met their cultural needs.

People received their medicines from trained and competent staff. People were protected from abuse and the risk of abuse. People and their family members told us that the service was safe.

Safe recruitment practices were in place to help ensure that only suitable staff were employed at the service.

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.(report published 17 Feb 2020.)

Why we inspected

This was a planned focused inspection based on the previous rating. It was undertaken in part to check whether the manager had applied for registration with CQC.

This report only covers our findings in relation to the Key Questions Safe and Well-led.

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. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Stapely Residential and Nursing Home on our website at www.cqc.org.uk.

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

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 well-led?

The service was not always well-led.
Details are in our well-led findings below.

Requires Improvement ●

Stapely Residential and Nursing 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.

Inspection team

The inspection was carried out by one Inspector.

Service and service type

Stapely Residential and Nursing 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 did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This was an unannounced inspection.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we request providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed information we had received about the service since the last inspection. We used all of this information to plan our inspection.

During the inspection

During the inspection we spoke with four people who lived at the service and three relatives about their experience of the care provided. We also spoke with three members of staff, the nominated individual and manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records, including care record, medicine records, staff files, a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek information from the provider to clarify further evidence reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- The service was clean and tidy, but some areas were in need of maintenance and repair. Aids and equipment needed monitoring to ensure effective cleaning. Following the inspection, the provider confirmed the purchase of new commodes and refurbishment of communal bathrooms and shower room.
- Systems were in place to prevent and control the spread of infection. Procedures considered the specific risks presented by the COVID-19 pandemic.
- Staff had access to plentiful supplies of appropriate PPE and were aware of current requirements.
- People, visitors and staff were consistently monitored for signs and symptoms of COVID-19. with regular checks taken for evidence of negative COVID-19 test results.

During the inspection we signposted the manager to resources to develop their approach to infection protection and control. The provider responded immediately during and after the inspection and provided assurances improvements had been made including the purchase of new equipment.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Some safety checks needed updating and improved oversight to ensure safe management of fire risk assessments and management of trip hazards.
- Following the inspection the provider took immediate actions and confirmed new floors had been provided on the ground floor and safety checks had been updated with new contractors.
- Relatives confirmed they felt their loved ones were safe and well cared for.
- Accidents and incidents were recorded with managerial oversight to identify themes and trends, capture learning and to prevent reoccurrence. Staff were aware of the procedures to follow to keep people safe.

Staffing and recruitment

- Safe recruitment procedures were followed.
- Staff told us they felt staffing levels were sufficient to meet people's needs.
- Some people told us they did not always know when staff were coming on duty. The manager advised she would review how she manages staffing levels and look at sharing information with people to better inform them of the staffing levels in place.

Systems and processes to safeguard people from the risk of abuse

- Policies and procedures were in place to protect people from the risk of abuse. Staff had received training, understood their responsibilities, and felt able to report abuse should the need arise.
- People told us they felt safe with the staff who supported them.

Using medicines safely

- Medications were well managed. The storage of medicines was safe and trained staff carried out regular audits and checks to ensure safe processes were in place.
- Records of the administration of people's regular medicines were accurate and complete.

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 remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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

- Quality assurance procedures were not always effective in supporting a well-managed service. Some aspects of managing staffing levels, risk assessments, the environment, refurbishment and repair needed further review to show effective timescales in maintaining the building and facilities.
- The provider took prompt actions during the inspection to repair and decorate parts of the environment which was going through a major refurbishment programme. The service has had a cinema built inside the building which is almost complete.
- The manager had applied to CQC for their registration.
- Care plan audits provided regular reviews to ensure records were kept up to date.

Working in partnership with others, How the provider understands and acts on their duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The manager was aware of their responsibilities and statutory notifications had been submitted to the Care Quality Commission (CQC) as required. They advised they were still learning their role and identified one notification that needed to be submitted, which they did following the inspection.
- The manager was open and transparent in her approach and kept all authorities updated when incidents that affected people's health and welfare had taken place.
- Staff sought advice and worked in partnership with others such as health care professionals to ensure the best possible support for people.

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

- People and relatives were positive about the culture of the service and staff supporting them. We were told, "The staff have been lovely, they have been very helpful, they kept me up to date and were very good" and "Very happy with the service especially as it's been difficult under the pandemic but I have managed to visit [my relative]. The staff have been amazing, they can't do enough, very caring and kind they really go out of their way to help, [My relative] is ok and well cared for, they have everything they need."
- Staff told us they felt supported and valued by the manager, they were very positive about the service.

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

- Staff had the opportunity to discuss the running of the service at staff meetings and felt listened to.
- Relatives told us they were kept informed of their loved one's wellbeing.