

The Salvation Army Social Work Trust

Youell Court

Inspection report

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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:

Youell Court provides accommodation and personal care for up to 40 older people. At the time of our visit 35 people lived at the home. Accommodation is provided in a purpose-built home across three floors. One floor provides specialist care to people who live with dementia.

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

People felt safe and received their care and support from staff who understood their responsibilities to protect people from the risk of harm. The management of medicines and risks associated with people's care and the environment had improved. This demonstrated lessons had been learnt. Staff were recruited safely and there were sufficient staff available at the times people needed them. The prevention and control of infections were managed in line with government guidance and the provider procedures.

Improved management oversight ensured checks of the quality and safety of the service were effective. People and relatives were very satisfied with the service provided and the way the home was managed. The provider and registered manager understood their regulatory responsibilities. Staff felt supported by the registered manager who had developed an open and inclusive culture within the home and led by example. Partnerships working and feedback from people, relatives and staff was used to further enhance people's experiences of the service provided.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update:

The last rating for this service was requires improvement (published 10 May 2019).

Why we inspected

This was a planned inspection based on the previous rating. We looked at the key questions of safe and well led. Ratings from our previous comprehensive inspection for those key questions we did not look at were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Youell Court on our website at www.cqc.org.uk.

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.

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 •
Is the service well-led? The service was well-led.	Good •



Youell Court

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 was conducted by three inspectors.

Service and service type

Youell Court 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 announced. We gave very short notice from the car park when we arrived to check the homes COVID-19 status before entering.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who work with the service. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and four relatives about their experience of the care provided. We spoke with six members of staff including the area manager, the registered manager, the head of care, a team leader, care workers and the laundry assistant. 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.

After the inspection

We continued to seek clarification from the registered manager 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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- At our previous inspection we found risk of harm to people was not always well managed. During this visit improvements had been made. Risks associated with people's care had been assessed and regularly reviewed. Up to date risk management plans informed staff how to provide safe care.
- Relatives were confident staff understood how to provide safe care. One relative explained how the number of falls their family member had experienced had significantly reduced since they had moved into Youell Court.
- Staff followed risk management plans to keep people safe. For example, we saw staff used the correct equipment to assist people with reduced mobility to transfer and move around their home safely.
- The management and staff team completed checks to ensure the environment and the equipment they used was safe.

Using medicines safely; Learning lessons when things go wrong

- Previously, some prescribed creams had not been managed in line with the providers policy and best practice guidelines. At this inspection effective action had been taken to improve the safety of medicines. Opening dates had been recorded to ensure the creams in use remained in date and effective and body maps informed staff where on the person's skin the cream should be applied.
- People received their medicines as prescribed from trained staff. Staff competence was regularly assessed to ensure they continued to manage and administer medicines safely. When concerns had been identified staff had completed further training before they resumed medicine administration.
- The registered manager had reviewed, revised and monitored the improvements made to medicine practices within the home. They told us, "Things are working well. We are always learning. We have to reflect and have open and honest conversation to move forward."
- The registered manager completed a monthly analysis of accidents and incidents, including falls. Records showed where needed action was taken to reduce the risk of reoccurrence.

Staffing and recruitment

- People and relatives told us staff were available when needed. One relative said, "From what I have seen staff are very attentive." We saw staff had time to sit and chat with people. People clearly benefited from these positive interactions.
- Staff confirmed there were enough staff on duty during each shift to meet people's assessed needs.
- The registered manager reviewed people's needs and adjusted staffing levels to reflect any changes in these needs.
- Staff were recruited safely in line with the providers procedure to ensure staffs suitability to work with

vulnerable people.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. One person told us they were 'happy' at Youell Court and described the staff as 'lovely and willing to help'. Relatives were confident their family members were safe.
- Staff had received safeguarding training and understood their responsibilities to report any concerns to their managers.
- The registered manager had referred safeguarding concerns to the local authority and CQC as required to ensure the concerns were investigated. Records confirmed this.

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.



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 now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Since our last inspection management oversite and monitoring of the service had improved. Audits completed by the provider and registered manager, including care records and medicines identified areas for improvement, actions required to achieve this and the date the actions had been completed.
- People and relatives were encouraged to provide feedback about the service through informal chats, meetings and structured questionnaires. Feedback was used to drive improvement. For example, steak knives had been purchased in response to a request made at a recent residents' meeting.
- Staff received support and guidance through regular individual and team meetings. Meetings also created the opportunity for staff to share ideas for improvement. One staff member told us the registered manager was open to ideas from the team and described them as very approachable and supportive.
- The provider and registered manager understood their regulatory responsibilities. Notifications about important events at the home had been submitted to us (CQC) and the latest CQC rating was on display in the home and on the providers website, as required by the regulations.

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

- People and relatives were very satisfied with the service provided and spoke highly about the registered manager and staff team. One relative described how the registered managers support and advice had assisted them to complete the pre-admission paperwork for their family member.
- Discussions with the registered manager demonstrated their passion and commitment to ensuring the service provided was personalised and of a high standard. The registered manager told us their daily aim was, "To know we have made a difference, no one [person] has been missed out on having a normal happy day... and feels safe."
- The provider's policies and procedures promoted inclusion and diversity and reflected protected characteristics as defined by the Equalities Act 2010.
- There was a positive culture based on the providers values of 'boldness, respect, passion, integrity, accountability and compassion'. These values were reflected during our conversations with the registered manager and staff members. Staff told us the registered manager led by example.

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; Working in

partnership with others

- The registered manager understood their responsibility to be open and honest when things had gone wrong. Learning had been used and shared with staff, to prevent reoccurrence.
- Records showed the registered manager and staff team worked closely with a range of health and social care professionals involved in people's care.
- The provider, registered manager and staff team were committed to continual improvement. During our discussions with staff members an opportunity to further enhance a change in practice was highlighted. The provider responded very positively to this feedback. Following our inspection, we were informed the provider was seeking staff members views about how best to make this change.