

WCN Care Stour Road Care Home Ltd

Stour Road Care Home

Inspection report

14 Stour Road
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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Stour Road Care Home is a residential care home registered to provide care and support for up to 20 people. The home is accessed over three floors by stairs or a lift, there were communal areas and a conservatory with level access to a secure garden. There were 20 people receiving care and support, some of whom were living with dementia.

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

Improvements had been made to personalised care since our last inspection. However, we have made a recommendation about activities and social engagement within the home, as improvements had not been embedded.

Care plans were detailed and contained relevant information about how to support a person in the ways they preferred. Information regarding specific health conditions were not person specific, we raised this with the registered manager and they immediately sought to rectify it. Staff knew people well and they encouraged people to live good lives.

Risk assessments were comprehensive and contained relevant information to support staff to keep people safe whilst living their lives. Risk assessments were clear and detailed, especially for those who needed support due to emotional distress. Staff knew people's risks well and were clear on how to raise concerns if they thought someone was at risk of harm or abuse. Staff were confident their concerns would be followed up and acted upon, they also knew who to contact outside of the home if needed.

People received their medicines as prescribed, staff who gave medicines were trained and had their competency assessed. Safe procedures were in place for ordering and storage. Robust recruitment processes meant people had the necessary skills and qualifications to provide care and support to people. The necessary checks had taken place to establish staff suitability. There were enough staff on duty, however, unplanned sickness and shortages of staff meant recruitment was ongoing.

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. The necessary authorisation to deprive a person of their liberty was in place and conditions within them met fully by the home. This meant they were acting in full compliance with the law, protecting people's rights.

Quality assurance and governance systems operated effectively. Audits and checks were undertaken and a multi-layered approach to management meant the service could continually learn and improve. The registered manager was respected and known for their open and transparent practice. The home had good links with external agencies and worked well with others.

Staff felt proud to work at Stour Road Care Home and we received positive feedback about the management of the home following changes within recent months. Staff felt appreciated and were involved in the home.

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 24 March 2021).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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, which will help inform when we next inspect.

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 responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Stour Road 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Stour Road Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Stour Road Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

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 sought feedback from the local authority and safeguarding teams. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this

information to plan our inspection.

During the inspection

We spoke and spent time with 10 people who used the service and asked them about living at Stour Road Care Home. We spoke with and received feedback from 14 members of staff including the provider, registered manager, home manager, support manager, care team leaders, care workers, maintenance operative and the chef. We received feedback from health and social care professionals who work with the home. 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 eight people's care records and eight medication records. We looked at five 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, 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

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

- People had risk assessments in place for all their care and support. There was a proactive approach to risk taking and people were supported to live their lives inside and outside the home.
- Positive plans were in place to support people at times of emotional distress. Guidance and training for staff not only supported people but maintained their rights and dignity.
- Staff knew people's risks well. Risks were discussed within daily handovers and updates shared on the electronic care planning system.
- Equipment checks were maintained and there were general risk assessments in place for the home. A continual programme of redecoration and refurbishment meant the home was maintained safely.
- Risk assessments were in place and checks maintained for fire safety. Each person had a plan in place to describe how they needed to be supported to evacuate the home in the event of an emergency.
- There was an open culture within the home to learn from accidents and incidents. Accidents were recorded and analysed, the outcomes were used to reduce the likelihood of the accident or incident happening again.

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

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Systems and processes to safeguard people from the risk of abuse

- Stour Road Care Home was a safe place to be. The registered manager and staff were consistent in the approach to protecting people from harm. One person told us, "Yes, I feel safe, I feel accepted to be me, people are kind, helpful." A health and social care professional told us, "This is now a safe, caring, happy care home."
- Staff received training in safeguarding people and told us how they would identify concerns and who they

would report them to both within the home and outside. Staff were confident their concerns would be followed up and taken seriously by the management team. A staff member told us, "If I was concerned about safeguarding, I would report this to the home manager [name] or registered manager [name]. If I had to report this outside the home I would contact the local authorities."

- The registered manager and home manager were proactive, open and transparent when dealing with safeguarding concerns; making the necessary referrals and speaking with the person and those important to them.
- The registered manager felt confident in raising concerns and had built an open and transparent working relationship with the local authority safeguarding teams. This was the culture within the home. A health and social care professional told us, "I think the residents are happier because they feel safe."

Staffing and recruitment

- There were enough staff on duty. This was closely monitored by the home manager and registered manager. Unplanned sickness meant at times it had an impact on the day, staff told us they were supported at these times by the managers within the home.
- Recruitment was ongoing, the home was experiencing challenges, as many other providers were, due to the national shortage of workers in the care sector.
- The home had a robust recruitment procedure in place and checks the service made demonstrated staff had the necessary skills and knowledge to carry out their role.
- Staff files contained appropriate checks, such as references, health screening and a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as prescribed. The home had arrangements for the ordering, storage and disposal of medicines. Daily checks were made to ensure safe storage of medicines and safe temperatures were maintained. The registered manager told us that an air conditioner was being installed to ensure safe storage throughout warmer months.
- Staff responsible for giving medicines had been trained and had their competency assessed by a senior member of staff.
- Medicine Administration Records (MAR) had information about when a person took their medicines and were legible. Staff checked people's medicines with their MAR to ensure the correct medicine was given to the correct person at the right time. MAR were completed correctly, audited and actions taken when discrepancies were found.
- Where people were prescribed medicines they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.
- Medicines that required stricter controls by law were stored correctly in a separate cupboard and a stock record book was completed accurately.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections. A professional told us, "They have maintained a safe environment and followed COVID-19 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.
- Visitors to the service were supported in line with relevant guidance.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's needs were met through good organisation and delivery.

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

- Improvements had been made to activities within the home. However, further development was needed, we raised this with the registered manager who told us they were recruiting staff to improve their social activities within the home.

We recommend the provider develops their activity programme to ensure that meaningful social engagement is consistent throughout the service.

- Information was sought about people's interests and hobbies. The amount of information within plans varied. The home manager told us if they don't have information, they update plans as they get to know people. An example was where the home manager supported a person to decorate their room with items of personal interest.
- People were supported to use the spaces within the home and to be part of their local community. This included; walks, shopping, restaurants, visiting friends and pubs. The home had supported a person to maintain their health and wellbeing by accessing exercise at a local gym. A person told us, "It's great here, I am able to do my own thing and go out."

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; End of life care and support

- People had detailed plans in place for all aspects of the care and support. However, where information was given regarding specific health conditions this was not always personalised. We raised this with the registered manager, and they arranged a review of all plans and addressed the omission immediately.
- People's care plans explored their needs as well as their skills and abilities. Plans explained what the desired outcome was and how to support the person to achieve it. They were reviewed regularly and had input from health professionals and family where applicable.
- People were supported to maintain relationships with friends and loved ones. Staff supported people for visits, telephone and video calls. This had meant people settled into the home quicker and reduced episodes of emotional distress. A person told us, "Staff are really kind, wonderful."
- People had been given the opportunity to discuss their end of life needs and last wishes. This included speaking with people's relatives to help them to make their wishes known including any spiritual or cultural needs. The registered manager told us; it was often a difficult conversation to have with people, but they revisited it respectfully with people at times of review.
- The home had worked in partnership with healthcare professionals to ensure people received dignified and comfortable care at the end of life.

- The home had received compliments about the care they delivered during people's final days. We read: "I would like to give a heartfelt thanks to all your staff for this love and care to our loved one [name]. The updates and care leading up to their peaceful passing was also appreciated."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were detailed in their care plans. Plans were shared with external professionals when needed, this included how to effectively communicate with people at times of emotional distress.
- Staff supported people in ways they preferred and met their communication needs.

Improving care quality in response to complaints or concerns

- People and their relatives knew how to make a complaint and who to speak to if they had any concerns. There was confidence that the registered manager would address any issues of concern.
- Information on how to make a complaint or raise a concern was displayed within the home. People were comfortable speaking with staff. The provider offered a variety of ways to make a complaint, this included a QR code which was an easy access to raise a concern, leave comment and feedback.
- The provider had a complaints policy and procedure in place. Records showed that complaints had been dealt with in line with the policy.

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 our last inspection we rated this key question good. The rating for this key question has remained 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; Continuous learning and improving care

- Quality assurance systems in place were robust and effective in managing the risks to the quality of the service. There was an electronic system in place which meant the registered manager had oversight of the home. The home manager was responsible for completing various checks within the home and inputting the information into the system.
- A range of audits were undertaken to enable the registered manager and provider to ensure all areas of the home operated safely. These were the responsibility of the home manager and included; personal care, fluids, nutrition, equipment and managers audits. Each audit had clear action plans which had been followed up and completed. This meant the home was continually learning. Outcomes, where appropriate, were shared in staff meetings and handovers.
- Staff understood their role within the home and had clear responsibilities. Job descriptions were in place, staff were clear on the expectations of the home manager and registered manager.
- The registered manager was passionate in their vision for the home. Leadership within the home demonstrated they were building a positive culture based on the values.

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

- The home manager actively engaged staff in decisions and feedback about the home. They worked closely with the registered manager to create a positive culture and atmosphere. Staff told us they felt included.
- Staff were proud to work at Stour Road Care Home, their comments included: "The home is looking nice and well-kept and it is clear that we love our residents", "I've been able to build relationships and help individuals in all different aspects of their care", "I feel the residents get the support and attention they need to fulfil their day to day life", "I feel supported and encouraged by the management team and all the staff. It was the best decision of my life to start working at Stour Road Care Home."
- People, professionals and staff were complimentary about the management of the home. Some comments were: "The registered manager [name] has turned this care home around. The home manager [name] has also become a breath of fresh air and made environment changes for a better ambiance", "The registered manager [name] really understood our situation right from the very beginning of the process and assured us that Stour Road Care Home would be perfect for my loved one [name] and it was. Would also like to say how fantastic the home manager [name] is, so calm, compassionate, patient and kind", "The registered manager [name] is able to solve problems quickly and give us help when in need."

- Staff morale had improved in recent months and staff felt appreciated. A member of staff said, "I feel very appreciated in my job role especially by the residents who say thank you after each time providing assistance to them. I feel appreciated by the managers and also by the staff we always try our best to make the home a nice happy comfortable home for the residents to live in."
- The registered manager told us they had worked hard to establish the management within the home and to take staff along on the journey. A member of staff told us, "Management in the home is very supportive, the registered manager [name] is very good, very approachable if I have an issue or I believe there's something we could improve on."

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 understood the requirements of the duty of candour, that is, their duty to be honest, open and apologise for any accident or incident that had caused or placed a person at risk of harm.
- The registered manager and home manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, serious incidents and injuries. This is a legal requirement.

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

- The registered manager and staff had made efforts to engage positively with their local community and key organisations to improve outcomes for people living at the home.
- The home worked collaboratively with external organisations viewing them as partners in care for people. An example of this was, the registered manager had been asked to be involved in a pilot scheme related to dementia care with the local Clinical Commissioning Group.
- The registered manager and home manager held various meetings in order for all voices to be heard. Records showed the monthly management meeting allowed all heads of departments to update the registered manager and for them to agree actions to carry forward.
- Improvements had been made in joined up working and those efforts noted, with one professional commenting, "I felt that the home feels like a completely different place with a positive atmosphere, great approach and attitude from staff and the improved environment."
- The home undertook satisfaction surveys for people. The most recent survey showed positive results. The registered manager, home manager and staff encouraged feedback from all sources in order to develop the home and to acknowledge their progress.