

Embrace (UK) Limited

# Guy's Court Nursing Home

## Inspection report

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## 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

Guy's Court provides nursing and personal care to older people and people with dementia. It is a three storey purpose built home, with a passenger lift to all floors. There is a separate dementia unit. Registered for 37 people.

At the last inspection the service was rated 'Good'. At this inspection we found the service remained 'Good'.

The registered manager had procedures in place to minimise the potential risk of abuse or unsafe care. Staff spoken with were able to identify the different types of abuse and had received training in safeguarding adults. We confirmed this by talking with staff and looking at training records.

Staff had been recruited safely, appropriately trained and supported. This was confirmed by records looked at and discussions with staff the management team and people who lived at the home. They had the skills, knowledge and experience required to support people with their care and social needs. Staffing levels were observed to be sufficient to meet the needs of people who lived at the home. The management team monitored and regularly assessed staffing levels to ensure sufficient care and nursing staff were available to provide support people needed.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. Care records showed they were reviewed and any changes were recorded.

We looked around the building and found it had been maintained, was clean and hygienic and a safe place for people to live. We found equipment had been serviced and maintained as required

Medicines had been checked on receipt into the home, given as prescribed and stored and disposed of correctly. We looked at medication administration records of people who lived at Guys Court and found them to be correct and up to date.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

We observed lunch served which was a relaxed social occasion for people. There were aids to help people be as independent as they could. During the morning period the chef spoke to everyone before lunch to ask what they wanted for lunch to ensure people got what they wanted. Comments were positive about the quality of food and included, "All home made food fabulous" Also, "The food is great plenty of choice."

Relatives and people who lived at the home told us staff and the management team had a caring manner and kind attitude to support people. Comments from people who lived at the home included, "The staff make me feel I'm at home here. They are very friendly and we like to have a laugh together."

Following the recommendation from the previous inspection in March 2015 action had been taken to address the issues. Care records had now been reviewed and updated since the previous inspection when we recommended any treatment or support identified must be recorded and carried through as planned. A staff member said, "We ensure any concerns or action taken in relation to a persons health is followed through."

People who lived at Guys Court and relatives /friends knew how to raise a concern or to make a complaint. The complaints procedure was available and people said they were encouraged to raise concerns.

The registered manager used a variety of methods to assess and monitor the quality of care at Guys Court and told us they were supported by the organisation. These included regular audits of medication, care plans. Also and staff and 'resident' meetings to seek the views of people about the quality of care being provided took place on a regular basis. Any suggestions to improve the service were acted upon.

## 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 remains good.

### Is the service effective?

Good ●

The service remains good.

### Is the service caring?

Good ●

The service remains good.

### Is the service responsive?

Good ●

The service was responsive.

Care records were more personalised to people's individual requirements. We observed staff had a good understanding of how to respond to people's changing needs.

There was a programme of activities in place to ensure people were stimulated and occupied.

The management team and staff worked closely with people to act on any comments straight away before they became a concern or complaint.

### Is the service well-led?

Good ●

The service remains good.

# Guy's Court Nursing Home

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection visit took place on the 04 April 2017 which was unannounced.

The inspection team consisted of an adult social care inspector and an expert by experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert-by-experience had a nursing care background.

Before our inspection visit we reviewed the information we held on Guys Court. This included notifications we had received from the service about incidents that affect the health, safety and welfare of people who lived at the home. We also reviewed the Provider Information Record (PIR) we received prior to our inspection. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This provided us with information and numerical data about the operation of the service

We spoke with a range of people about the home including 11 people who lived at the home, eight staff members, four relatives and the registered manager. We also looked at care records of two people who lived at the home, training and recruitment records of staff members and records relating to the management of the service. In addition we checked the building to ensure it was clean, hygienic and a safe place for people to live.

Prior to our inspection visit we contacted the commissioning department at Lancashire County Council, Lancashire Clinical Commissioning Groups (CCG), and Healthwatch Lancashire. Healthwatch Lancashire is an independent consumer champion for health and social care. This helped us to gain a balanced overview of what people experienced living at Guys Court.

# Is the service safe?

## Our findings

We spoke with people who lived at the home and relatives who all said they had confidence in staff and the registered manager to keep people safe. Staff told us their aim was to help people feel secure, relaxed and safe at Guys Court. One relative said, "I leave here with sound mind knowing [relative] is cared for and safe." A person who lived at the home said, "Yes the staff are always around and I sleep well so I do feel safe."

The registered manager had procedures in place to minimise the potential risk of abuse or unsafe care. Records we looked at and staff spoken with confirmed they had received safeguarding vulnerable adults training. The staff members we spoke with understood what types of abuse and examples of poor care people might experience. One staff member said, "I know the safeguarding procedures."

Care plans of people who lived at the home had risk assessments completed to identify the potential risk of accidents and harm to staff and people in their care. The risk assessments we saw provided instructions for staff members when delivering their support and what nursing input was required.

We found staff had been recruited according to their procedure and had all required checks in place prior to commencing work. Staff had the skills, knowledge and experience needed to support people with their care and social needs. We found staff commenced their induction programme and completed training appropriate to their position. One staff member said, "The induction training was very good and gave me confidence."

The management team monitored and regularly assessed staffing levels to ensure sufficient care and nursing staff were available to provide support people needed. This was completed through a dependency tool which calculated the number of staff required to meet people's needs at Guys Court.

We looked at how medicines were recorded and administered. Medicines had been checked on receipt into the home, given as prescribed and stored and disposed of correctly. We looked at medication administration records of people who lived at Guys Court. This was during the lunchtime medication round with a nurse. Records showed medication had been signed for. We checked this against individual medication packs which confirmed all administered medication could be accounted for. This meant people had received their medication as prescribed and at the right time.

Our observations confirmed the premises was clean, tidy and looked after. One staff member said, "It is kept clean we have good people looking after the cleanliness and maintenance of the building." We observed staff making appropriate use of personal protective equipment such as disposable gloves and aprons. Hand sanitising gel and hand washing facilities were available around the building and were in operation. These were observed being used by staff undertaking their duties. This meant staff were protected from potential infection when delivering personal care and undertaking cleaning duties.

We looked at documentation and found equipment had been serviced and maintained as required. For example records confirmed gas appliances and electrical equipment complied with statutory requirements

and were safe for use.

# Is the service effective?

## Our findings

Our observations during the inspection visit and discussions with people such as staff and relatives confirmed people who lived at Guys Court received effective care. This was due to the training programme staff accessed and the understanding of the needs of people who lived at the home. One person who lived at the home said, "When I came in from the Vic (hospital) I couldn't walk. [Manager] has encouraged me to walk with a frame I came in using a hoist." Also a relative said, "They are professional and they know what they are doing they appear well trained and confident which is what I like."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

The registered manager and staff demonstrated an understanding of the legislation as laid down by the MCA and the associated DoLS. Discussion with the registered manager confirmed she understood when an application should be made and how to submit one. We did not observe people being restricted or deprived of their liberty during our inspection.

The cooks had a list of people's meal requirements and this was changed when necessary. This included each person's likes and dislikes, fortified diets and allergens. This meant the cook was fully informed about people's nutritional support and how best to protect them from the risks of malnutrition. Staff recorded in care records each person's food and fluid likes and dislikes. This ensured people were provided preferred meals in order to increase their nutritional intake. People were weighed regularly and more frequently if loss or increase was noted.

We observed lunch served which was a relaxed social occasion for people. Assistance was given if people needed it but it was not overpowering assistance. There were aids to help people be as independent as they could. The chef spoke with everyone before lunch to ask what they wanted for their meal. He also came into the dining room to see whether everybody was enjoying their food. Comments were positive about the quality of food and included, "All home made food fabulous" Also, "The food is great plenty of choice."

Staff records we looked at showed staff received regular supervision to support them in their work. Supervision was a one-to-one support meeting between individual staff and the management team to review their role and responsibilities and discuss any issues. The supervision meetings assisted staff to explore training needs and develop their skills. One staff member said, "Yes supervision is a good forum to discuss matters with [registered manager]." Another staff member said, "The training is truly first class anything that you feel would help the residents is supported by the management team."

Care records of people who lived at the home contained documentation of professional healthcare and other external agencies involved in the care of people. Healthcare appointments had been recorded. Staff documented the reason for visits/appointments and actions taken as a result of any outcomes or treatment needed.



We looked around the building and grounds and found they were appropriate for the care and support provided. People who lived at the home had access to the grounds which were enclosed and safe for people to use. The registered manager told us more work was planned to make the outside area more useable for people who lived at the home.

## Is the service caring?

### Our findings

People who lived at Guys Court and relatives told us they experienced high standards of care and support. Relatives and people who lived at the home told us staff and the management team had a caring manner and kind attitude to support people. For example comments from people who lived at the home included, "The staff make me feel I'm at home here. They are very friendly and we like to have a laugh together." Also, "The staff are very kind to me." A relative added, "They treat residents like kings and queens." I feel I'm part of a family here. The manager and staff have helped me when I've been down in mood and a bit upset about [relative] behaviour."

We observed examples of staff being kind and compassionate towards people who lived at the home. For instance one person was getting upset and a staff member spotted this and sat with them for a while, holding their hand and talking with them softly. They did this in a quiet area until they felt better. We spoke with the staff member who said, "[Resident] gets upset from time to time and a little TLC (tender loving care) goes a long way. The manager encourages us to take time out for people which is what I like."

Information about advocacy services was on display in the reception area for people and their relatives if this was required. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

We spoke with staff about protecting and respecting people's human rights. One staff member said, "There is training that is provided about equality and diversity as well as human rights so we are well aware." We observed there was a sensitive and caring approach by staff and an awareness of the Equality Act 2010.

Staff were aware of how to treat people with respect and dignity we saw examples of this during our visit. Staff knocked on people's bedroom doors before entering. We also found in care records staff had identified people's preferred term of address and staff were aware of what people wanted to be known as. One relative said, "Staff are respectful and kind when dealing with my relative. They always try to make them comfortable. I'm made welcome here. Staff always have a smile for me when I arrive." A person who lived at the home said, "You can't fault the staff. They are very kind and respectful. They keep my room private and knock before they come in."

People's end of life wishes had been recorded so staff were aware of these. We saw people had been supported to remain in the home where possible as they headed towards end of life care. This allowed people to remain comfortable in their familiar, homely surroundings, supported by familiar staff.

## Is the service responsive?

### Our findings

People who lived at the home told us they received a person centred service that was responsive to their needs. For example relatives and people who lived at the home told us the care they or their relatives received was focussed on them as individuals. One relative we spoke with said, "They do treat people as a person in their own right that is what we like." A person who lived at the home said, "I do tell them how I like things to be and they listen and respect my feelings."

Care records had been reviewed and updated since the previous inspection when we recommended any treatment or support identified must be recorded and carried through. For example any person who suffered weight loss had a plan of care for treatment and relevant support to help the person gain weight. One staff member said, "We ensure any concerns or action taken in relation to a persons health is followed through." We looked at care records of people who had social and nursing needs to see if their plan of care had been assessed and consistently met. We found they had been developed where possible with each person and their family. Care records included what support they required, any treatment from other health professionals and any nursing input. A relative said, "We went through things together with [relative], staff and ourselves it was a very good process."

Care plans were person centred and developed around the individual and were signed by them where applicable. Activities were recorded for families and friends to review and relatives were encouraged to add comments and ideas.

We talked with people who lived at the home about social events and activities that went on at Guys Court. There was a specific activities staff member that arranged one to one social events, group events and visits out in the community. One person who lived at the home said, "We have quizzes and bingo about 2pm. We had a singer last week in the afternoon." Another said, "I mostly join in with the activities. I have a dance with the manager."

The staff and management team have introduced a '24 hour snack bar'. This is so people who get up at night or any time fancy a snack such as crisps, chocolate or a drink have access to it. One relative said, "What a good idea it is good for the residents and any relatives or visit."

We found there was a complaints procedure in place which described the investigation process and responses people could expect if they made a complaint. The complaints procedure was displayed around the home, in their literature given out to people and in people's bedrooms.

We spoke with people who lived at the home and relatives about the complaints process. People told us they knew how to make a complaint and who to speak to if they had any issues. A relative said, "At this time never had to complain but know who to talk with."

Contact details for external organisations including social services and the Care Quality Commission (CQC) had been provided should people wish to refer their concerns to those organisations. This demonstrated

there was a procedure in place, which staff were aware of to enable complaints to be addressed.

## Is the service well-led?

### Our findings

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We found the service had lines of responsibility and accountability with a management team in place that included registered nurses. The management team were experienced and aware of the needs of the people they supported. One of the management team said, "We have a settled manager and we are well organised to provide the care and nursing care people require."

The registered manager had procedures in place to monitor the quality of service provided. Regular audits had been completed. These included checking the environment, medication, and nutrition and infection control. They had a designated 'infection control person' who provided the registered manager with regular audits. The registered manager told us this was working well and ensured the risk of infection was kept low. Regular checks were also made to ensure water temperatures were safe in line with health and safety guidelines. We confirmed this by records and discussion with the registered manager. The registered manager had a 'walk around' audit that was carried out weekly. For example this was to check cleanliness of kitchen areas, ensure clinical waste was stored correctly and check aprons and gloves were available for staff.

We looked at minutes of staff and 'resident' meetings held on a regular basis. We found suggestions and ideas at these meetings had been agreed and implemented in the routines of the home. For example a recent resident meeting suggested more trips out. The management team and staff had reacted by planning trips in the summer months more often. In addition a staff meeting suggestion was to have a 'fruit round' in the afternoon for the benefit of people who lived at the home. This was fresh fruit and little nibbles being offered mid-afternoon to everyone. One staff member said, "This has gone down very well." One person who lived at the home said, "I do like the fruit round what a good idea."

Guys Court management team worked in partnership with other health and social care professionals to make sure they were following current practice, providing a quality service and people in their care were safe. These included social services, healthcare professionals including General Practitioners and the Nursing and midwifery council (NMC). The service also worked closely with Independent Mental Capacity Advocates (IMCAs). IMCAs represent people subject to a DoLS authorisation where there is no one independent of the service. For example this could be a relative or friend.