

Mrs I M Kenny

Castle Grove Nursing Home

Inspection report

Castle Street
Bampton
Tiverton
Devon
EX16 9NS

Tel: 01398331317

Website: www.castle-grove.co.uk

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Ratings

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

Castle Grove is a detached Georgian, two storey property located in the Devon village of Bampton. It is within easy walking distance of local shops, restaurants, and the Church. People have access to a well-maintained garden. The service provides accommodation and nursing and personal care for up to 26 older and younger people. At the time of the inspection there were 21 older people living at the home.

The provider also provides personal care to people living in sheltered accommodation within the grounds of Castle Grove. At the time of the inspection nobody living in the self-contained apartments were receiving the regulated activity of personal care.

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

People looked comfortable and relaxed with the staff who supported them and felt safe. People were treated with kindness and respect by enough staff, who had been recruited safely and had the skills and required training to support their needs.

People lived in a home which was pleasant, welcoming, and well maintained. Risks were managed effectively for individuals and the environment.

Risks of infection to people was minimised because staff followed up to date infection control guidance and had access to personal protective equipment.

People's medicines were managed safely, and they received them as prescribed for them.

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 registered manager promoted and encouraged open communication amongst everyone who lived at the home. People and those important to them were involved in making decisions about their care and asked their opinions about the home. They said they were happy with the care and support they received and said they would recommend it to others.

The provider, registered manager and senior leadership team were constantly looking to make improvements where needed.

The provider recognised the importance of supporting and caring for their staff team and had a good staff retention. They were actively recruiting and used the services of consistent agency staff where their own staff could not fill any duty gaps.

Staff felt supported and valued by the provider and said staff morale was good.

The provider's governance systems were being embedded within the service to monitor quality and drive improvement.

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 8 February 2018).

Why we inspected.

This inspection was prompted by a review of the information we held about this service and the length of time since the last inspection.

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.

This was a focused inspection looking at safe and well-led key questions only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

The overall rating for the service has not changed from good based on the findings of this inspection.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Castle Grove 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 Health and Social Care Act 2008.

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

This inspection was undertaken by 1 inspector.

Castle Grove Nursing home is a 'care home' with nursing care. People in care homes receive accommodation, personal and nursing care as a single package under one contractual agreement dependent on their registration with us. 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 the inspection

We reviewed information we had received about the service. 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 with 13 people and 1 of their relatives. We also spoke with 13 staff including the registered manager, the lead nurse, office manager, quality assurance manager, senior care staff, care staff, activities co-ordinator, head housekeeper, housekeeping staff, laundry person, the cook and the maintenance person. We also spoke with the provider who was present throughout this inspection.

We also emailed the GPs who support people at the service to ask their views, we received a response from one of them.

We reviewed a range of records. This included people's care records and a sample of medicine records on the computerised systems. We looked at a variety of records relating to the management of the service, including training records, recruitment records, audits, staff meetings, quality assurance processes, various policies and procedures and the providers business plan.

During the inspection visits the management team sent us additional information about the service provided at Castle Grove Nursing Home.

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. At this inspection, the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People looked comfortable and relaxed with the staff who supported them. Everyone we spoke with said they felt safe at the home. Comments included, "Very safe, they are very good here" and "Everybody is very good to me, I feel safe."
- Risks of abuse to people were minimised because staff had received training in recognising and reporting abuse.
- Staff were confident that any issues raised with the registered manager and senior leadership team would be taken seriously and action would be taken to keep people safe. One staff member said, "I am confident it would not be tolerated."

Assessing risk, safety monitoring and management

- Care records contained risk assessments which identified individuals risks and what support was needed to reduce and manage those risks. This included helping people to manage their risk of falls and their risks related to skin integrity.
- Staff were aware of people's risks and the support they needed to remain safe. We observed staff supporting people to eat safely.
- Changes in people's risks were promptly identified and referrals to health care professionals were made to seek additional support in a timely manner. For example, people's weights were monitored closely, and appropriate action and referrals made if people had lost weight unexpectedly.
- Environmental risks to people were managed safely. Staff recorded maintenance issues on a white board which was reviewed by the maintenance person and repairs were undertaken promptly.
- A lot of work had been undertaken to ensure the home was safe from the risk of Legionella. This included storage tanks and dead legs (a section of piping that is no longer used, or rarely used) being removed. The maintenance person had completed a legionella awareness course and had a good understanding of monitoring the service. Water samples were sent off annually to be tested.
- Fire checks and drills were carried out and there was regular testing of fire and electrical equipment.
- External contractors undertook regular servicing and testing of moving and handling equipment and fire equipment. The fire service had recently undertaken a visit and identified a minor concern which the senior leadership team were acting upon.
- Personal Emergency Evacuation Plans (PEEPS) were in place, they were informative and gave staff clear guidance in evacuating people from the service.

Staffing and recruitment

- Staffing levels met the needs of the people who used the service. The lead nurse was ensuring the skill mix

was consistent across all the shifts. They looked at staff qualifications, experience and individual competencies. To ensure there were enough suitably qualified and experienced staff to keep people safe.

- The provider used a dependency tool to assess people's needs to ensure there were enough staff on duty to meet their needs.
- People had access to a range of social activities and stimulation. In addition to care and nursing staff the home employed an activity co-ordinator. This ensured people's social needs were met.
- As in many care services the provider was having difficulties recruiting staff. They were working to recruit new staff and worked with existing staff to ensure they were happy within their role. Some housekeeping staff at the service were trained to undertake care responsibilities and would support when needed.
- To ensure there were always adequate staff to meet people's needs the provider used the services of consistent agency staff. The registered manager ensured agency staff had the information and skills needed to support people safely. They told us in their PIR, 'Agency staff are given a thorough induction to the standards and expectations...we book those staff that are known to Castle Grove, to ensure consistency of standards and care.' After an agency staff member finished their shift, they were asked for feedback about how the shift had been and was there anything which the management team should be aware of.
- People said there were enough staff to meet their needs.
- Since our last inspection, the nurse call bell system at the home had been upgraded. Monthly audits of staff response times to call bells were completed to ensure people were responded to promptly.
- Staff were recruited safely. Staff had pre-employment checks to check their suitability before they started working with people. For example, Disclosure and Barring Service (DBS) checks and references from previous employers. These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager ensured new staff had a positive attitude and ethos and would fit in well with the team.
- Records were in place to ensure nursing staff were registered with the Nursing and Midwifery Council (NMC).

Using medicines safely

- People received their medicines safely from staff who had received medicines training and had their competency assessed to make sure they gave medicines safely.
- The provider had recently implemented a computerised medicine system. Staff recorded on electronic Medicines Administration Charts (MARs) when people's medicines were administered. These records showed people received their medicines in the way prescribed.
- The registered manager and lead nurse were working with staff and the provider of the computerised medicine system to ensure the new system was safe and effective. They regularly monitored the system to ensure it was safe and working well.
- Staff administering medicines wore a red tabard reminding people not to disturb them, to minimize the risk of making a medicine error.
- There were suitable arrangements for storage, recording and disposal of medicines, including those needing extra security.
- People received their prescribed creams in accordance with their needs. Care staff supported people to apply prescribed creams and lotions. The lead nurse was looking at ways the recording of the cream application on the computerised medicine system could be further improved. This would enable their effectiveness to be more closely monitored.
- Regular medicines audits were completed.

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely. Staff and people had agreed to

continue wearing masks during personal care.

- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. People lived in a home which was clean and hygienic. People praised the standards of cleanliness.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

- In line with current government guidance the home was open to visitors. There were no restrictions to movement around the home. During the pandemic to enable visiting within the governments guidance a garden pavilion had been built to facilitate visitors. To reduce the burden on staff of completing all the required checks and paperwork they had a designated staff member to oversee visitors and facilitate visits.
- People confirmed their families and friends had been able to visit.
- People were also supported to keep in touch with families and friends through video and telephone calls. The provider had upgraded their internet access by having superfast fibre broadband installed. This meant people had access to the internet across the whole home and had a telephone system with an answerphone in their rooms.

Learning lessons when things go wrong

- Accidents and incidents were managed appropriately. Records showed that appropriate actions were taken by staff following any accidents and advice was sought from other health professionals when needed.
- The registered manager reviewed the accident and incident reports to ensure staff had taken appropriate action.
- The provider, registered manager and senior leadership team were constantly looking to make improvements where needed. They responded very promptly to areas we discussed at the inspection.

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. At this inspection, the rating 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

- Castle Grove Nursing Home is a family run home which has been owned and run by the same family for nearly 40 years. The provider remains actively involved but has delegated responsibilities to the registered manager, a family member who undertakes day-to-day oversight of the home.
- The registered manager had made changes to the management oversight at the home. They told us in the provider information return (PIR), 'We have been successful in attracting new high-quality staff, particularly nurses, to provide more consistent leadership and training. These appointments led to the formation of a Senior Leadership Team (SLT), which ensures strategic direction is clear, apparent and communicated to all staff. The SLT meets regularly, taking a holistic approach to clinical decisions and determining clear communication...'
- The registered manager and senior leadership team had clear lines of accountability and responsibility and staff were clear about their roles. This included a new quality assurance manager, who undertook regular audits and supported the registered manager.
- The senior leadership team meet formally each week to discuss people's changing needs, areas for improvement, new admissions and planned events. These meetings were documented so they can be referred to when required.
- The provider's governance systems were being embedded within the service to monitor quality and drive improvement. A program of audits was carried out and any required actions were set out and who needed to undertake them. Areas looked at included, accidents and incidents, medicines, care plans, fire safety, health and safety, nutrition and hydration, a dignity audit and infection control.
- The registered manager or a designated staff member undertook a daily walk around. They spoke with people, relatives and staff and observed the staff levels and care being provided to ensure people's needs were being met.
- The provider remained visible at the home and accessible to people. This included a weekly sherry gathering at the home before Sunday lunch. This meant people could share their views and the provider could be assured people were happy at Castle Grove.
- The senior leadership team worked collaboratively with other care services. The local GP undertook a weekly doctor round at the home. They told us, "I think they have a great team who care well for their patients."
- In January 2023, the service was inspected by an environmental health officer to assess food hygiene and safety. The service scored the highest rating of five, which confirmed good standards and record keeping in relation to food hygiene had been maintained.

- The provider had displayed the previous CQC inspection rating in the main entrance of the home and on the provider's website.

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

- The registered manager promoted and encouraged open communication amongst everyone who lived at the home. There were good relationships between people, relatives and staff. People said they felt informed and were happy at the home. One person commented, "Very happy here, a splendid nursing home, nurses are very kind, and carers are very good." Another said, "Very happy, as you can be."
- The provider ensured people and their relatives were asked their views about the home. They asked people and their relatives to undertake a survey. The last residents survey, where 15 people had responded, had been mainly positive. The results of this survey recorded that 100% of people said they were treated with respect. Where minor concerns had been mentioned action had been taken to address these. For example, not everyone knew about the complaints policy. The registered manager said people had a copy when they first came to the home, and they were re-issuing copies to people, so they had clear guidance.
- The senior leadership team recognised the importance of a happy well-informed team. They were continuously looking at ways they could improve the communication within the home. They had numerous ways of keeping staff informed from, a handover at the beginning of their duty, staff meetings, supervisions and newsletters.
- Staff had completed a staff survey in 2022. This had received mixed feedback from the 17 staff who had completed it but was on the whole positive. The mixed feedback partially reflected new systems at the home, which like any change had caused some disruption and unease. Staff confirmed things had started to settle recently.
- The provider used a 'resident of the day (ROD)' system which meant each day staff would prioritise one person at the home. They would review their records and discuss their care needs. Each morning after the handover the chef and head housekeeper joined the meeting to discuss the ROD and what they needed to do. This included speaking with the person about the cleanliness of their room and the chef discussing food and drink choices and any concerns.
- Staff were happy in their jobs and felt supported in their roles. They were passionate about the home being a warm and friendly environment for people to live in. One member of staff said, "This is an enjoyable place to work, very friendly." Another said, "There is a family feel here."
- The provider valued their staff teams and had an in-home awards scheme, called the GEM award. This was designed to honour and reward staff who shine in what they do and contribute to people's care every day. Staff were nominated by people, families and staff.

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

- People were happy with the care and support they received at the home and said they would recommend it to others.
- A relative spoken with said they were happy with the care their family member received.
- Staff said there had been a lot of changes over the past year which had caused some anxiety. They confirmed things were becoming more stable and the staff morale and teamwork were good. One staff member said, "Everything is starting to settle, staff are starting to relax. I feel confident in the nurses they all know what they are doing."

Continuous learning and improving care; Working in partnership with others

- The registered manager and staff were committed in connecting the home with the local community. For example, there are strong links with the local school and church. School children visited the home regularly,

had performed a carol concert and had written pen pal letters to people. The local vicar regularly visited the home to take holy communion and individual visits to people.

- Last year the home hosted a jubilee celebration and the week of our inspection they were planning a coronation celebration. The provider told us they would be resuming their annual fete this year and they planned a big celebration in 2024 to celebrate Castle Grove Nursing homes 40th year.
- The provider remains registered with the 'Cinnamon Trust' which is a national charity with a register of pet friendly care homes happy to accept people with pets. One person at the service had brought in their cat, who appeared well cared for.
- People lived in a home where staff worked with other professionals to make sure their needs were met. As well as a weekly GP round, people were referred to other health care specialist as required. For example, speech and language team, tissue viability and occupational health teams. The registered manager told us in the provider information return (PIR), 'We have a very good relationship with the hospitals to ensure residents are supported with both in-and out-patient referrals. This includes supporting hospital discharges to ensure smooth admission to our service.' The senior leadership team had developed a post hospital discharge feedback form. This recorded if people had arrived safely, in a dignified manner and respectfully.
- The registered manager was always looking for ways to improve care. They were actively involved in local care forums for adult social care providers to improve the experience of people who live in, work in, or engage with care homes.

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. This is their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm.