

Mariposa Care Group Limited

St Luke's Care Home

Inspection report

Upper Carr Lane
Calverley
Pudsey
LS28 5PL

Tel: 01132563547

Date of inspection visit:

13 August 2020

18 August 2020

19 August 2020

20 August 2020

24 August 2020

25 August 2020

Date of publication:

21 September 2020

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Requires Improvement



Is the service well-led?

Good



Summary of findings

Overall summary

About the service

St Luke's Care Home provides nursing and personal care for a maximum of 34 older people. At the time of our inspection there were 21 people living at the service. The home provides single room accommodation with most rooms having en-suite facilities.

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

Overall, medicines were safely managed. However, we found improvements were needed. These included the administration of prescribed creams and more accurate recording around the use of prescribed thickening agents. We have recommended the service follows the NICE (National Institute for Health and Care Excellence) guidance, Managing Medicines in Care Homes. Published 14 March 2014.

People and their relatives told us they or their family members felt safe at the service. People were protected from abuse and avoidable harm. They were treated with respect and dignity. The provider maintained safe staffing levels to meet people's needs. Risks to people's health and safety were managed well, although some improvements on the completion of records to monitor people's fluid intake were required. Staff followed national guidelines to prevent the spread of infection and to make sure the home was clean.

People said the home was well-run. They said the registered manager and staff were approachable and kind. The provider and registered manager demonstrated their commitment to continuous improvement of the service. The registered manager and staff promoted and encouraged person centred care to ensure people were treated as individuals. Audits and monitoring procedures were used effectively to monitor the service and to make improvements. When accidents or incidents occurred, learning was identified to reduce the risk of them happening again.

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

This service was registered with us under this new provider on 26 March 2019, and this is the first inspection.

Why we inspected

This was a planned inspection in line with our inspection programme. We have made changes to the way we work due to COVID-19. This is to avoid putting pressure on services that are caring for people. We completed a focussed inspection. During this inspection we looked at two key areas, safe and well-led. We do not look at all the five key questions during a focussed inspection. Therefore, the service was not given an overall rating.

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?

Requires Improvement ●

The service was not always 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.

St Luke's 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.

Inspection team

The inspection was carried out by one 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.

Service and service type

St Luke's Care 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 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

We gave 24 hours' notice of the inspection. Due to the COVID-19 pandemic we wanted to review documentation remotely and also make arrangements to speak with people, relatives and staff by telephone after our site visit. This helped minimise the time we spent in face to face contact with the manager, staff and people who used the service.

Inspection activity started on 12 August 2020 and ended on 25 August 2020. We visited the service on 19 August 2020.

What we did before the inspection

We reviewed information we had received about the service since registration. We sought feedback from the local authority, local safeguarding team and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in

England. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke by telephone with three people who used the service and six relatives about their experience of the care provided. We spoke face to face with the regional manager, registered manager, clinical lead and a nurse. We spoke by telephone with four members of care staff. We spent time observing the care and support people received. We reviewed four people's medicines records.

After the inspection

We reviewed a range of records. We reviewed most of the documentation remotely by asking the registered manager to send us key information before and after our site visit. This included three people's care records. We looked at three staff records in relation to recruitment and reviewed the staff training overview. A variety of records relating to the management of the service, including audits, policies and procedures were also reviewed.

We continued to seek clarification by telephone from the registered manager to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Using medicines safely

- We identified improvements were needed when recording the administration of prescribed creams and thickening agents. There were not always clear directions about when creams should be used, and records did not confirm creams had been used as prescribed. One person had received more than the prescribed dose of their cream. The registered manager addressed this at the time of the visit and reported the error to the person's GP.
- Staff did not record the administration of every dose of thickening agent. However, the clinical lead confirmed thickening agent had been used as prescribed for people. They agreed to ensure appropriate records of this in future.
- There were arrangements in place for ordering, receiving and disposal of medicines. However, one of the disposal bins did not have a tamper proof lid. The clinical lead made immediate arrangements with the supplier to have this changed.
- Medicines were overall, stored safely and at the right temperature. Records showed a small number of occasions when the temperature recordings were overlooked.

We recommend the service follows the NICE (National Institute for Health and Care Excellence) guidance Managing Medicines in Care Homes Published 14 March 2014.

- Staff administering medicines had received training and had their competency assessed.
- People said they received their medicines on time. One person said, "They give me my meds in the evening; I can set my clock by it. They are very good."

Staffing and recruitment

- There were enough staff to meet people's needs. People and their relatives said they had no concerns about staffing levels. One person said, "The staff are there for me and are as prompt as they can be." A relative said, "They [staff] are very attentive"
- Staff provided some mixed feedback about staffing levels. They said they met people's needs but one staff member said they were occasionally stretched on nightshifts.
- The provider used a dependency tool to provide a guide as to the number of staff needed on each shift. This was reviewed in response to any changes in needs of people who used the service.
- Overall, staff were recruited safely, with all pre-employment checks completed before a new member of staff commenced work. One staff member's records indicated the provider had not followed their policy of gaining a reference from the last employer. The registered manager confirmed this had been an oversight.

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

- Risks to people's health and safety were assessed and managed. A range of risk assessments were in place which covered areas such as skin integrity, mobility and falls prevention. These were clear and gave staff specific instructions on how to support people safely. However, we saw staff did not always accurately complete records of fluid intake. The registered manager took immediate action to put systems in place to prevent this happening in the future.
- Staff had a very good understanding and knowledge of the needs of the people they supported. We were assured risk assessments were followed to keep people safe. Staff could describe the actions taken to prevent harm occurring.
- Regular checks were undertaken on the fire alarm system and firefighting equipment in the service.
- Incidents and accidents were recorded and reviewed by the registered manager. A summary of all accidents and incidents was used to identify any trends and ensure action was taken to prevent re-occurrence. For example, the introduction of falls sensor equipment. These systems were effective and showed only a small number of accidents had occurred.

Preventing and controlling infection

- Overall, there were effective systems in place to reduce the risk and spread of infection. Staff and the management team had a good understanding of the required COVID-19 infection control guidance and said there was enough personal protective equipment (PPE) in stock. On a small number of occasions, we observed the correct guidance regarding the handling of PPE was not followed. We discussed this with the registered manager who said they would rectify this.
- The provider had introduced guidance and ensured staff completed training on infection prevention control and safe working practices during the COVID-19 pandemic. Staff were able to describe the correct circumstances for wearing their PPE. However, some of the policies and procedures had not been fully updated to reflect the latest government guidance. The registered manager arranged meetings with the provider to review and update these.
- The environment was clean and there were no malodours. All the staff worked hard to maintain cleaning standards in the service. The registered manager completed regular audits on the cleanliness of the service. A person told us, "It's happiness here. I have my own room which is clean and tidy."

Systems and processes to safeguard people from the risk of abuse

- We received many positive comments about the quality of care people received. People spoke of feeling safe and of good relationships with the staff and management team. One person said, "I am perfectly happy and cared for. They are kind and good and I cannot fault them." A relative told us, "I feel [family member] is safe."
- Relatives spoke of how their family members had been kept safe during the COVID-19 pandemic; and of current strict visiting procedures to ensure this continued.
- Staff interactions were positive and kind. People were given care and support at a pace that suited them. People were protected from the risk of abuse. Staff were trained in safeguarding and understood how to identify abuse and report concerns.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; 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 provider and management team continually monitored the standard of service and acted where improvements could be made. There was a programme of audits and checks focused on different aspects of the service. This included care records, medicines, and cleanliness.
- The registered manager was aware of the duty of candour and their legal responsibility to be open and honest. They sent us notifications in relation to significant events that had occurred in the service.
- People who used the service and relatives spoke highly of the registered manager, staff and management of the service. One relative said, "When I have spoken with the manager, she is approachable." Another relative said, "They have been very on it. [Family member] came in January 2020 and it has been good; no worries or concerns at all and they treat [family member] like I would."

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

- The registered manager understood people's needs as individuals. They were committed to providing good quality care and promoted a person-centred culture. They had ensured there was a good variety of activity for people, that was tailored to meet people's needs during the current COVID-19 pandemic. A relative said, "The team kept morale good in lockdown. We saw the videos on Facebook; clapping for carers, extra effort of dressing up and decorating the lounge. The staff helped (name) with exercises as the physio couldn't go in."
- The registered manager demonstrated an honest and positive approach. They made Improvements to the service when these were identified. They were open to making changes in response to issues we identified, such as those related to medicines records.
- There were plans to introduce an electronic care recording system so staff could record the support they had given in real time.
- Staff spoke about their work and the service with passion and enthusiasm. They said they had confidence in and felt well-supported by the registered manager. Staff frequently told us they 'loved' their job and communication and teamwork were excellent. One member of staff said, "I feel like I am part of a big family here with the residents and staff."

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

- The provider and registered manager sought feedback to help maintain and improve standards at the service. Surveys were undertaken which indicated a high degree of satisfaction with the service.
- The registered manager ensured regular care planning meetings with relatives and people who used the service. These had been paused during the COVID-19 pandemic. However, the registered manager was now planning to resume these by telephone or video calls. A relative told us, "I often have a quick word on the phone and spoken with [staff's name] and they have kept me informed. They are very professional and caring."
- The provider asked staff for their views through meetings and individual staff supervision meetings. Staff told us they felt confident to make any suggestions or raise new ideas.
- The registered manager and staff worked effectively with partner agencies. This included commissioners from the local authority and health professionals. A health professional told us, "I have regular weekly contact with St. Luke's and often through the week also. I have found them to be very caring and very responsive to patient's needs. They have a steady workforce which helps, and the management there is efficient, caring and effective."