

Care South

# Dorset House

## Inspection report

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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

Dorset House is a residential care home providing to provide personal care and support to up to 52 people. The service provides support to older people some of whom are living with dementia. At the time of our inspection there were 36 people living at the home.

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

People, their relatives and staff told us Dorset House was a safe place to be. People were supported by staff who were caring and responsive to their needs. Risks to people had been assessed and staff worked in safe ways to ensure risks were reduced or eliminated. Equipment was well maintained and general risks within the home were assessed, this included robust fire safety procedures.

Staff had training and a good awareness of safeguarding people. They told us how they check people are safe, what to look out for and who to report to if they had concerns. Everyone told us they felt confident the management team within Dorset House would address any concerns promptly and through the correct channels.

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. Where appropriate, people had received assessment of their mental capacity and the correct procedures had been followed where restrictions for people were in place. This meant that staff acted in accordance with the law to ensure people's rights were fully protected.

People received their medicines as prescribed and medicines were managed safely within the home. There were enough staff. Staffing numbers were closely monitored by the registered manager to ensure the needs of people could be met safely. Recruitment of staff was ongoing, the home was experiencing difficulties, as many other providers were, due to unplanned sickness and the national shortage of workers in the care sector.

Accidents and incidents were recorded and monitored. Monthly analysis meant the registered manager and the team were working to identify themes and trends to reduce accidents, such as falls within the home. Lessons learnt were shared with staff and across the provider's other homes.

A range of audits were carried out which all fed into an overall service improvement plan. The home actively sought feedback from people and their relatives about the care provided and used this to make improvements.

The home worked well with external health and social care professionals. Dorset House was known in the local community and had made links to support activities for people and fundraising.

Staff felt proud to work at Dorset House and were complimentary about their colleagues, they felt appreciated. People, their relatives and staff were positive about the management of the home and believed it was well led.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 14 February 2020).

#### Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

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 well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Dorset House

## 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 one inspector and a medicines inspector.

#### Service and service type

Dorset House 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. Dorset House 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

The inspection was unannounced.

#### What we did before the 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 with seven people who used the service and five relatives about their experience of the care provided. We spoke with, and received feedback from, 13 members of staff including the registered manager and the deputy manager. We made general observations of care and interactions between people and staff.

We reviewed a range of records. This included 10 people's care records and multiple medication records. We looked at four 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. At this inspection 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 their care and support needs. The home was proactive in their approach to managing risks. Risk assessments were reviewed monthly or in response to a change.
- People were supported to take risk within their lives. A relative said, "They [staff] encourage my relative [name] to make their own decision and be independent, in a safe way."
- Risk assessments were detailed; staff understood the risks and knew people well. Assessments were held on an electronic care planning system which meant they were accessible to staff. The registered manager told us assessments and care plans were being continually reviewed and improved.
- Risks to people's health and wellbeing were discussed daily within handovers and meetings. This meant staff were involved and knew the new risks for people. For example, if a person had fallen or was unwell.
- There were general risk assessments in place for the home and equipment checks were maintained. The registered manager and deputy manager were always out in the home which meant they could easily monitor the atmosphere and care quality.
- There was an open culture which supported to learning from accidents and incidents. Accidents were recorded and analysed, the outcomes were used to reduce the likelihood of the accident or incident happening again. Learning was shared within the home and by the registered manager who inputted information into the provider's monitoring system. There were opportunities to share and learn from events across the provider's other homes at registered manager meetings.

Systems and processes to safeguard people from the risk of abuse

- People, their relatives and staff told us Dorset House was a safe place to be. Some comments we received were: "I feel [name] is safe because they [staff] always know how they are and where they are", "I feel my loved one [name] is safe this is due to the staff, the surroundings, everything is going right for them", "I know my relative [name] is safe because the girls [staff] are there", "Absolutely, they are never left on their own, always somebody with them", "Yes, 100% safe", "They [staff] call us straight away, any change, or we request the GP, no question, on the phone the next day. Proactive and responsive, they are absolutely superb."
- There were clear communication channels for raising concerns within the home, the organisation and outside of the home. Posters displayed around the home reminded staff of the options available to them and who to report to.
- Staff had received training in safeguarding adults and children and were confident any concerns they raised would be taken seriously and actioned immediately. Safeguarding concerns were reviewed monthly, records showed all necessary actions had been taken.

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.
- The registered manager kept a DoLS register to monitor expiry dates, applications and conditions. They checked that conditions for people were met during daily meetings.

#### Staffing and recruitment

- There were enough staff on duty. People and their relatives told us staff were available when they needed them. The registered manager told us staff helped each other. A member of staff told us, "In addition, we have a good bunch of regular agency staff who know the home well."
- Staff told us staffing levels were mostly good and recruitment was ongoing. However, due to short notice and unplanned absence staffing levels were affected at times. This was due in part to the national shortage of care workers in health and social care services.
- The provider worked to attract the right staff to their services. Staff told us the home and provider encouraged development within the company. Many of the staff working at Dorset House had done so for many years.
- 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

- Staff recorded on an electronic system when they gave medicines. These records showed that people were given their medicines correctly in the way prescribed for them. This included the application of named creams or external products.
- Where medicines were prescribed 'when required', there were clear person-centred plans to guide staff when each person might need a dose of these medicines.
- There were suitable arrangements for ordering, storage, recording and disposal of medicines, including those needing cold storage or extra security.
- Staff received training and had competency checks to make sure they gave medicines in a safe way.
- Regular medicine audits were completed, and any incidents reported and investigated. Any necessary actions were put in place and recorded to help improve medicines safety.

#### 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.
- Visitors to the home were arranged safely and in line with guidance and good practice.

# 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 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 were robust and effective in managing the risks to the quality of the service. The provider had an electronic system which meant they had oversight of the home.
- A range of audits were undertaken to enable the registered manager and provider to ensure all areas of the home operated safely. These included; care plans, wound care, nutrition and quality. Each audit had clear action plans which had been followed up by the registered manager. This meant the home and provider were continually learning. Outcomes, where appropriate, were shared in staff meetings and handovers.
- The provider had oversight of the home. Quality and compliance audits were carried out regularly and this ensured the home was safe and working to the agreed standards.
- Staff understood their role and had clear responsibilities. Staff had job descriptions and told us they were clear on the expectations of the registered manager and the home.
- The registered manager was passionate in their vision for the home. Supported by the deputy manager they told us, "We have made many changes and improvements, but it's not just us, the whole team have made the changes."

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

- The registered manager told us they actively engaged staff in decisions about the home. There was a positive culture in the home, staff told us they felt included. They told us how important it was to move forwards as a team, together, for the good of people living at Dorset House. A member of staff told us, "Any changes are explained and suggestions for improvements are encouraged." Another said, "It doesn't feel like management and care staff, it feels like we are all working together for the best interest of the residents."
- The registered manager and deputy manager were open and inclusive in their approach to ensuring people and staff were happy at the home. People, their relatives and staff told us, the registered manager was approachable, and they were visible around the home. One relative told us, "Dorset House is a real home, not just a care home."
- Staff were proud to work at Dorset House, their comments included: "Being part of our resident's lives, especially in their twilight years, is something that I find inspiring, and I am so proud to call Dorset House my place of work", "I enjoy helping people and Dorset house is known to the local community. When I say that I work there, people tend to be impressed", "I do feel proud to work for Dorset House. I know that when I do my job that I make someone's day a little brighter a friendly chat, the activities that are set up and, the smile

we get from residents, the gratitude that is given not only from residents but the family members themselves."

- People, their relatives, professionals and staff were complimentary about the management of Dorset House. Some of their comments included: "The registered manager [name] in particular is a very good people person and is very good at their job", "Management team are fantastic, could not recommend them enough", "Deputy manager [name] is always willing to help and guide me when needed", "The registered manager [name] is an excellent team lead", "Dorset House management is good as staff are kept well informed", "The registered manager [name] has had a huge positive impact since joining the home."
- Staff felt appreciated and the provider had recognition schemes in place, such as, 'Employee of the month'. One staff member told us, "We also have reward's each month on a raffle draw system where a few employees from each section of the workforce receive a voucher. All team members receive one of these over the months."

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. They told us the circumstances in which they would make notifications and referrals to external agencies and showed us records where they had done this.
- The registered manager told us they have an 'open door' and staff told us they could approach them about any matter they wished.

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

- Dorset House is situated in a residential area in Poole. The registered manager and staff had made efforts to engage positively with their local community and members of the public. The home had made good links within the local area including community groups, churches, shops and schools. A member of staff told us, "I enjoy sharing our wonderful home with the community and allowing them to visit us and sometimes join or provide activities."
- People were offered the opportunity to be involved in the home by attending a monthly meeting. Records showed a variety of topics for discussion with actions followed up. Relatives told us they were kept updated and involved.
- The home undertook satisfaction surveys for people. The most recent survey showed positive results. The registered manager and staff encouraged people and their relatives to complete online reviews of the home, we saw these were positive with many scoring, five stars.
- Dorset House worked and communicated well with health and social care professionals to support people. One health professional told us about the standard of their partnership with Dorset House and said, "They trust me, and I trust them. Together we deliver an effective service to our residents at Dorset House using best practice at all times."