

Stonehaven (Healthcare) Ltd

St Petroc's Care 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 well-led?

Good ●

Summary of findings

Overall summary

About the service

St Petrocs Care Home is a residential care home providing personal care to up to 30 people. The service provides residential care to older people who may have a physical disability. At the time of our inspection there were 24 people using the service.

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

Risks were identified, assessed and recorded. Care plans were completed for each person and contained details of the person's needs and preferences.

There were sufficient staff to support people. The service was fully staffed with no vacancies. The service was not using any agency staff at the time of this inspection. Recruitment procedures were robust.

People told us they felt safe with staff. There were systems to help protect people from abuse and to investigate any allegations, incidents or accidents.

People were supported by staff who had been appropriately trained to carry out their role. Staff told us they felt well supported.

People's care and support needs were assessed before they started using the service. People received support to maintain good health and were supported to maintain a balanced diet, where this was part of their plan of care.

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.

Staff understood the importance of respecting people's diverse needs and promoting independence.

Mental capacity assessments had been carried out where it was indicated. Deprivation of Liberty Safeguards (DoLS) authorisations had been applied for appropriately. The registered manager did not have effective recorded oversight of the two authorisations in place at the time of this inspection. However, we were assured immediate action would be taken to address this and were provided with evidence of this the day after the inspection visit.

There were robust auditing or monitoring processes in place at the time of this inspection. The provider had implemented effective quality assurance systems to monitor the quality and safety of the care provided.

Staff were able to access the management team whenever they needed any assistance or guidance. Staff comments included, "I feel happy and well supported here, we get regular supervision and the manager is

always around if we need anything," "Morale is good, we all get along, it is better now we have more staff" and "I have just arrived from India, I have done all my training and am very happy here."

People told us they liked living at St Petroc's and that the staff were caring and responded when they called. Comments included, "Just had a wash and clean up, they have made me very comfortable," "They (Staff) always look after me well" and "I have no concerns."

Visiting healthcare professionals told us, "We come here regularly, there are always staff around to speak with. They report any concerns to us quickly. I have been asked to check on someone today as the carer has noticed something. We have no concerns" and "They are responsive and good at letting us know if someone is unwell."

People were regularly asked for their views by the management team at meetings and through surveys. People were provided with information on how to raise any concerns they may have.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection:

The last rating for this service was good (published 2 March 2020).

Why we inspected

We received concerns in relation to medicines management, communication, slow staff response to people's changing needs and staff moving and handling practices. As a result, we undertook a focused inspection to review the key questions of safe, effective and well-led only.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe, effective and well led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has not changed following this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for St Petroc's on our website at www.cqc.org.uk

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.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

St Petroc's Care Home

Detailed findings

Background to this inspection

Inspection team

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 and a member of the medicines team.

Service and service type

St Petroc's is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and we looked at both during this inspection.

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

Before the inspection, we reviewed information we held about the service and the provider which included any statutory notifications sent to the CQC. A notification is information about important events which the service is required to send us by law. We used the information the provider sent us in the provider information return. 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 of this information to plan our inspection.

During the inspection we reviewed six people's care plans and risk assessments. 19 people's medicine records were reviewed. We looked at three staff files in relation to recruitment. We reviewed staff training and supervision. We also reviewed other records relating to the management of the service, including complaints received. We met with the registered manager, a community nurse, 10 people and five staff during the inspection. Following the inspection, we received feedback from three healthcare professionals.

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.

Systems and processes to safeguard people from the risk from abuse

- There were safeguarding processes in place and the service had made appropriate referrals to the local authority where required.
- People told us they felt safe with the staff that supported them.
- Staff knew how to recognise abuse and protect people from it. Staff had received training in how to keep people safe.

Assessing risk, safety monitoring and management

- Some people required specific equipment to protect their skin from pressure damage. Pressure relieving mattresses were in place for people who had been assessed as needing them. There was a process in place to help ensure they were set correctly for the person using them.
- Risks associated with people's care needs were identified, assessed and recorded. This provided staff with the information needed to support people safely.
- Experienced staff had a good knowledge of the people they supported. They were aware of risks associated with people's care, how to monitor them and what action to take to reduce risks. For example, a person living with a long term condition, who was at high risk of falls, was encouraged to walk around the service, with their mobility aid.
- We observed staff moving and handling people throughout the inspection. We had no concerns and were unable to uphold the concerns raised about moving and handling practices.

Staffing and recruitment

- Recruitment practices were robust. Staff files showed the relevant checks had been completed including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The service had sufficient numbers of staff to meet people's needs. The service was not using any agency staff at the time of this inspection. The service had recently employed staff from abroad and supported them to settle in this country.
- People commented, "Just had a wash and clean up, they have made me very comfortable," "They (Staff) always look after me well," "I have an alarm (pendant) around my neck if I need help I press it and they (staff) come quickly" and "I have no concerns."

Using medicines safely

- Medicines were stored and managed safely. Staff kept appropriate records of medicines ordered, received, administered and returned for disposal. Staff followed a medicines policy and medicines errors were reported.
- Some people managed their own medicines where this was safe for them to do so. When staff administered medicines, they received training and had their competency checked to make sure their practice remained safe.
- Some people were prescribed medicines to be taken when required. Staff knew people well and administered these appropriately. However, people's care plans did not contain information to help them make consistent decisions and to evaluate the effectiveness of when required medicines were used.
- We were unable to uphold the concerns raised about medicines management.

We recommend the provider should ensure that people's care plans contain information for staff to deliver consistent medicines support.

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.

The service was supporting visits from families and friends. Systems were in place using current COVID-19 guidance to support these visits. Including testing and use of PPE.

Learning lessons when things go wrong

- There were processes in place to ensure that accidents and incidents were recorded, actioned, and analysed to help reduce any re-occurrence.
- The registered manager told us they had reflected on the COVID-19 pandemic and recent outbreaks at the service and reflected on the importance of the service and staff being as resilient as possible. They told us, "We needed everyone's hands on shift when so many staff were sick with COVID-19, it was amazing what we achieved when everyone pulled together, they learnt new skills and stepped up to do what was needed."
- There was a strong focus on ensuring all care and support provided by staff was always recorded. As this helped with investigating and responding to any concerns raised.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. At this inspection we have rated this key question good.

Ensuring consent to care and treatment in line with law and guidance

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

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- At our last inspection we made a recommendation that the provider ensured that, when people with capacity to do so, have agreed to any restriction that agreement is clearly documented. At this inspection we found no one, with capacity, was experiencing any restrictions.
- People were involved in decisions about their care and treatment and staff supported them to have maximum control of their lives. Where appropriate capacity assessments had been carried out.
- People told us staff consulted them and asked for their consent before providing care and support.
- Staff received training in the MCA. Records were kept showing where people had appointed Lasting Power of Attorneys (LPA)
- Where appropriate people who required specific restrictions, to keep them safe, had had applications made to the local authority for these restrictions to be authorised. Two DoLS authorisations were in place at the time of this inspection. However, the registered manager did not have an effective recording system to provide them with oversight of any authorisations that were in place and when they would require a review. We were assured at the inspection that immediate action would be taken and received confirmation, the day after the inspection, that a process was now in place.

Adapting service, design, decoration to meet people's needs

- At our last inspection we made a recommendation that the provider considered the effect of the environment on people's emotional well-being. At this inspection, we found that action had been taken to improve the environment.

- People's bedrooms were bright and airy with space to move around and use any aids required. Some people had personalised their rooms with familiar objects and pictures.
- Moving and handling equipment was appropriately stored. Corridors and exits were free from clutter and there was improved written and pictorial signage to support people who were living with dementia to orientate to their surroundings.
- One person who enjoyed sitting by a window looking outside in to the grounds told us, "It is so beautiful here. The pond is lovely to sit and watch and to listen to the fountain."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before people moved into St Petroc's, to ensure their needs could be met by the service. Each person had a care plan which clearly recorded their needs and how they were to be met, including the involvement of any external healthcare professionals.
- The assessment also considered people's protected characteristics as part of the Equalities Act 2010, including any disabilities. St Petroc's is a listed building. The layout of some areas of the service was not suitable for people with mobility issues or cognitive impairment. The registered manager told us they would only take people who were suitable for some rooms due to this.
- Electronic care records showed that regular reviews took place to ensure people's changing care needs were met. Alerts which came up on hand held devices, prompted staff to help ensure any specific interventions that were required were provided in a timely manner.

Staff support, training, skills and experience

- Staff received supervision and appraisals from the management team.
- Staff completed training in a range of different subjects to ensure they had the right skills, knowledge and experience to deliver effective care.
- New staff received an induction which included training and a period of working alongside a more experienced staff member before they started working on their own.
- Staff comments included, "I feel happy and well supported here, we get regular supervision and the manager is always around if we need anything," "Morale is good, we all get along, it is better now we have more staff" and "I have just arrived from India, I have done all my training and am very happy here."

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported with their dietary needs where this was part of their plan of care.
- People's preferences, likes, dislikes, and dietary requirements were recorded in their care plan. Experienced staff knew people's needs well. People's comments included, "The food is ok," "I don't eat meat and so they give me something different, it's always good" and "I can choose what I eat."
- Kitchen staff were fully aware of people's dietary needs and preferences. They told us, "I do the meals from scratch. I know what people like and what food some cannot eat. We have one or two people who need their food in a smoother consistency. Another person likes to have a plate guard to help them eat independently. I go and speak to all the people to ensure they like their meals."
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required. People had their weight regularly monitored.

Staff working with other agencies to provide consistent, effective, timely care

- St Petroc's worked with a range of health and social care professionals to meet people's specific needs.
- Staff ensured people's health care needs were being met and if they had any concerns regarding a person's health then this was communicated with the relevant professional. Staff told us, "We have systems in place to help us pass information between shifts" and "I think we communicate well amongst us."
- One person told us, "I have an appointment tomorrow, they will come and see me."

- Visiting healthcare professionals told us, "We come here regularly, there are always staff around to speak with. They report any concerns to us quickly. I have been asked to check on someone today as the carer has noticed something. We have no concerns" and "They are responsive and good at letting us know if someone is unwell." We were not able to uphold concerns raised regarding poor communication.

Supporting people to live healthier lives, access healthcare services and support

- People were supported with their dietary needs where this was part of their plan of care.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required.
- Experienced staff knew people's needs well and were effective in the monitoring of any specific healthcare needs such as diabetes and Parkinson's disease.
- There were clear records which evidenced people were seen by external healthcare professionals when required.

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.

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

- People and visiting healthcare professionals were complimentary about the service provided at St Petroc's.
- The culture of the service was open and transparent. Information requested during the inspection was efficiently provided in a clear format.
- The provider and the registered manager were committed to providing the best care to people. We were unable to uphold the concerns raised about the management of the service.
- There were effective systems in place to promote the healing of any areas of broken or damaged skin that was identified. The community nurses provided any nursing care that was required.

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 duty of candour requirements and ensured information was shared with the relevant people when concerns were identified.
- Where some issues were identified by inspectors during the inspection, they were immediately addressed. For example, putting in place a process whereby the registered manager would have accurate oversight of any DoLS authorisations in place.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service had a registered manager at this time.
- The audit and monitoring processes which were currently in place were robust. There was a programme of regular audits which were carried out and shared with the provider. There was good support from the provider to the registered manager.
- The registered manager used opportunities to learn from reflecting on past events, concerns or complaints to further improve the service.

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

- People had been asked for their views on the service. People's feedback was still being collected. People were able to attend residents meetings to discuss aspects of the running of the service such as the food,

activities provision and planning outings in the minibus.

- Staff told us that they felt valued and supported by the management team. They told us they enjoyed working at the service. Staff comments included, "I am happy here" and "The manager is very supportive."

Working in partnership with others

- The service had established good working relationships with health and social care professionals and commissioners of care to ensure good outcomes for people.

Continuous learning and improving care

- The registered manager met with the provider regularly to review all aspects of the service. There was a current service improvement plan in place to further improve St Petroc's.
- The service was working to improve the way care was recorded. A new electronic care planning system had been recently implemented and the staff and registered manager were still learning all aspects of the system at the time of this inspection.
- Audits were completed by the registered manager and the provider. The audits were robust and the findings were linked to action plans, staff meetings and supervision to further improve the service provided to people.