

Majorspan Limited

Tudor Court Care Home

Inspection report

18-20 Midvale Road Paignton TQ4 5BD

Tel: 01803558374

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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

Tudor Court is a residential care home providing personal and nursing care to 18 people aged 65 and over at the time of the inspection. The service can support up to 29 people.

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

Medicines processes and systems were in place and people received their medications as prescribed. However, medicines in a liquid or cream form had not been dated once opened. This meant that staff could not be assured that the medicine was safe and effective to use. We made a recommendation about this.

The environment was clean and staff followed infection control procedures in line with national guidance for reducing the spread of Covid-19.

People and their relatives told us they had no concerns about the quality of care at Tudor Court and felt that people living there were safe. Staff had a good understanding of safeguarding processes to keep people safe and knew how to report concerns.

Risks to people's health and well-being had been assessed and monitored to ensure they were kept safe. Regular checks of the environment, including equipment, fire and water safety, were completed to ensure it was safe for people to live in and complied with the relevant standards.

We observed the service had enough staff to meet people's needs. We saw people were attended to in a timely manner and staff were not rushed. Some staff reported to us that they were sometimes short staffed and relied heavily on agency staff, they felt they could not always give the care to people that they wanted to. However, this had improved recently and the registered manager told us they were actively trying to recruit staff.

The provider followed safe recruitment practices and ensured people were protected against the employment of unsuitable staff.

People's relatives told us the registered manager, management team and staff were supportive and approachable. The registered manager told us they engaged with people and their relatives on an ongoing basis.

The registered manager carried out regular checks on the quality and safety of the service and understood their regulatory responsibilities.

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 28 January 2020).

Why we inspected

We undertook this focused inspection to check and review risks associated with information gathered from our monitoring activity. We undertook a focused inspection to review the key questions of safe, and well-led only. We found no evidence during this inspection that people were at risk of harm. Please see the safe and well led section of this focused report.

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 until we return to visit as per our reinspection 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



Tudor Court 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. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

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

The inspection was carried out by two inspectors, an assistant 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.

Tudor Court 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

This inspection was unannounced and started on 9 December 2021.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with information about their service, what they do well, and improvements they plan to make. This information

helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and the Expert by Experience spoke with eight relatives about their experience of the care provided. We spoke with the registered manager, deputy managers and three members of staff. We reviewed a range of records. This included six people's care records and multiple medication records. We looked at three 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 and quality assurance records.



Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines processes and systems were in place and people received their medications as prescribed.
- Only staff who had been trained and competency checked were permitted to give medicines to people.
- We observed staff give medicines to people. Staff were polite, gained consent and signed for each medicine after giving it on the medicine administration record (MAR).
- There were clear guidelines in place describing when PRN or 'as required' medicines should be given and these were accompanied by details about why they were administered.
- Medicines in a liquid or cream form had not been dated once opened. This meant that staff could not be assured that the medicine was safe and effective to use.

We recommend the provider review their medicines administration processes to ensure best practice guidance is followed in relation to medicated creams and liquids.

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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

We have also signposted the provider to resources to develop their approach.

Systems and processes to safeguard people from the risk of abuse

• People and their relatives told us they had no concerns about the quality of care at Tudor Court and felt that people living there were safe. Comments included, "I feel safe", "I have no worries about safety at the home at all. They are a good bunch of girls" and "I have no worries about safety. My relative chose residential care for themselves and is happy and content."

- Staff had a good understanding of safeguarding processes to keep people safe and knew how to report concerns. One told us, "If I witnessed anything I would go and report it to management and if nothing was done, I would phone the safeguarding team. We have just had the information put up in the staff room with the safeguarding number on it."
- Systems were in place to protect people from the risk of harm or abuse. Safeguarding incidents were identified and reported appropriately including to the local authority and CQC. The service kept records of safeguarding incidents including actions taken and who had been notified about these.

Assessing risk, safety monitoring and management

- Systems were in place which ensured potential risks to people's safety and welfare were assessed and managed by staff, in a person-centred way.
- People had assessments for areas of risk including nutrition, falls, tissue viability and moving and handling. Care staff reviewed these assessments regularly to keep people safe.
- Systems and processes where in place to check the environment was safe for people. Regular checks of the environment, including equipment, fire and water safety, were completed to ensure it was safe and complied with the relevant standards.

Staffing and recruitment

- People's relatives told us there were generally enough staff available to care for people. One relative told us, "We have never seen any problems around shortages of staff when we visit Tudor Court." Another relative felt that staffing issues were dealt with well, they commented, "When there was increased pressure on staff numbers the new manager, was on top of the problem quite quickly."
- Some staff reported to us that they were sometimes short staffed and relied heavily on agency staff which meant they felt they could not always give the care to people that they wanted to. However, one staff member told us, that the last two- or three-months staffing numbers had improved. We spoke with the registered manager about this and they told us they were actively trying to recruit permanent staff.
- During the inspection we observed the service had enough staff to meet people's needs. We saw people were attended to in a timely manner and staff were not rushed.
- The registered manager regularly reviewed staffing levels and adapted them to people's changing needs. The registered manager told us they were using regular agency staff when needed and that recruitment was on-going.
- The provider followed safe recruitment practices and ensured people were protected against the employment of unsuitable staff. Appropriate recruitment checks were carried out as standard practice.

Learning lessons when things go wrong

- Accidents and incidents were managed appropriately.
- The registered manager reviewed all accidents and incidents and completed an analysis to make changes to people's care and support where required.
- The registered manager shared any learning from accidents and incidents with staff through handovers and staff meetings.



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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The service had an open, inclusive culture that helped staff achieve good outcomes for people.
- People's relatives told us the registered manager, management team and staff were supportive and approachable. Comments included, "They have a nice team, with a relaxed atmosphere", "I feel I have a very open, honest and frank relationship with the manager, who is passionate and has a very good management style" and "I think they are getting their act together under the new manager and they are improving some things that needed improving, which means the routines are working better which wasn't always the case before [registered manager's name] took over."
- Most of the staff we spoke with told us the registered manager was approachable and available should they need to raise any concerns. One staff member said, "[Registered manager's name] is a nice man. I do not find any issues and he has said 'if you need to talk to me about anything then come and see me'." However, one staff member thought that the registered manager could be more visual in the service and interact with people more and another staff member told us communication could be improved and staffing issues were affecting staff morale. We fed these comments back to the registered manager.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Since the last inspection in January 2020 the service had undergone a change in day-to-day management. The new registered manager started at the service in May 2021.
- The registered manager, supported by two deputy managers and the provider, showed a strong commitment to improving the quality of care by ensuring good governance at the service.
- The registered manager had introduced and strengthened the providers existing governance systems, tools and processes in place to assess the safety and quality of the service and identify areas for improvement. For example, they introduced electronic care planning that allowed the management team to monitor care in real time and complete audits on care records, medicines administration and infection control more accurately. One staff member told us about their views of the electronic care planning system, they said, "I am still learning the electronic system. I would say this is better as the technology is easier and all the information (about people) is there."
- Staff we spoke with were clear about their roles. One staff member told us, "The staff are friendly, and the seniors help us (care staff)."

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

• Notifications about specific events had been sent in line with legal obligations. The registered manager was aware of their legal responsibilities under the duty of candour.

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

- People's relatives told us information from the service was variable. One relative said, "I always have to go to them to seek answers to my questions, and you have to talk to the senior carer or manager to get a proper answer because there is no newsletter or anything to tell you as a family member what is going on generally and what people get up to." However, another relative found that communication had improved, they said, "The new manager, has instigated an increase in the frequency and types of communication between the care home and the family, which also includes sending us copies of the care package so we can be involved in planning my relative's care and note how their needs are changing over time."
- The registered manager told us they engaged with people and their relatives on an ongoing basis. For example, they contacted people's relatives when the service moved to the electronic care planning system to get their input and ensure they were completed accurately.
- The registered manager was in the process of re-writing the feedback survey to ensure that the information gathered would be of value and help to improve care. The registered manager told us they hoped to send these out to relatives and people in the new year.
- Regular staff meetings took place to ensure information was shared and expected standards were clear.
- Staff were also given opportunities to feedback and discuss their performance and training needs through regular supervision. The registered manager told us they had an open-door policy and encouraged staff to discuss any concerns with them, the management team or the provider.

Working in partnership with others

• The service worked effectively in partnership with relevant health and social care professionals, to ensure people's needs were met.