

Chantry Court Care Ltd

Chantry Court

Inspection report

Chantry Lane
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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

Chantry Court is a 'retirement village' for older people which has a service to provide people with personal care when their needs for help increase. People could also choose a different provider to support them with personal care. At the time of the inspection 27 people were receiving personal care.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

People had their own flat with a front door they could lock. There were communal spaces such as a cinema, dining room and lounge area. There was also at least one member of staff available 24-hours a day to support people with any needs they had.

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

People felt safe living at Chantry Court. The provider had taken action to keep people safe and manage the risks they faced.

Staff had a good understanding of the support people needed. Staff were supporting people to do as much for themselves as possible.

People were supported to take any medicines safely and staff sought advice from health and social care services when necessary.

The provider had made changes in response to the COVID-19 pandemic and there were good infection prevention and control measures in place.

Staff received regular training and support. People felt staff had the right skills and knowledge to meet their needs.

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.

People were supported to maintain a good diet and access the health services they needed.

The provider had established good systems to monitor the quality of service provided and make improvements where needed.

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

The last rating for this service was requires improvement (published 17 January 2020). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out a comprehensive inspection of this service on 13 November 2019. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Effective and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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

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?

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.

Chantry Court

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 completed by one inspector.

Service and service type

Chantry Court provides a domiciliary care service to people who live in their own flat in a 'retirement village'.

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 announced. We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection. Inspection activity started on 11 August 2021 and ended on 24 August 2021. The site visit took place on 11 August 2021.

What we did before the inspection

We reviewed information we had received about the service since the last 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. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who live at Chantry Court, two relatives, the registered manager and four care staff. We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had failed to manage medicines safely. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People were supported to safely take the medicines they were prescribed. Some people were supported to manage their own medicines where it was safe to do so. Other people were supported by staff to take their medicines. The support people needed was regularly reviewed to ensure people were as independent as possible.
- Medicine administration records had been fully completed. These gave details of the medicines people had been supported to take.
- People and their relatives told us staff provided good support for them to take their medicines at the right time.
- The management team had developed systems for checking medicines records and storage to ensure it was safe. People were supported to store their medicines safely, including keeping it at the right temperature.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health, safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risk assessments were in place to support people to be as independent as possible. They balanced protecting people with supporting them to maintain their independence. Examples included support for people to manage the risks of skin breakdown, catheter care and mobility.
- Risk assessments and management plans had been reviewed and updated as people's needs changed. Plans had also been amended to reflect risks relating to COVID-19.
- Staff demonstrated a good understanding of these plans and the actions they needed to take to keep people safe. A relative commented, "I feel the staff manage risks for [my relative] well. They know his needs very well."

Staffing and recruitment

At our last inspection the provider had failed to ensure thorough recruitment checks were completed for staff working at the service. This was a breach of regulation 19 (Fit and Proper Persons Employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- Effective recruitment procedures ensured people were supported by staff with the appropriate experience and character. The provider had completed a criminal record check and obtained references from previous employers of new staff, before they started supporting people. Staff records contained all necessary information, including a full employment history and confirmation of their right to work in the UK.
- People said staff responded promptly if they used their emergency call bell, which they found reassuring. Comments included, "I had a few falls a while back and they were with me in no time".
- Most people told us staff were available to provide support when they needed it. One person said there had been some issues with staff absence that had caused some minor delays. The registered manager reported they were in the process of recruiting to staff vacancies.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Chantry Court.
- The service had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm. Staff had received training in safeguarding.
- Staff were confident the registered manager would take action to keep people safe if they raised any concerns. Staff were also aware how to raise concerns directly with other agencies if they needed to.

Preventing and controlling infection

- The service had introduced measures to prevent visitors from catching and spreading infections. Visitors to the site were screened for symptoms of COVID-19 and were provided with personal protective equipment (PPE) if needed.
- Staff had received training on infection prevention and control measures and how to use PPE safely.
- The provider had updated their infection prevention and control policy to reflect the COVID-19 pandemic and additional measures that had been introduced.

Learning lessons when things go wrong

- Systems were in place for staff to report accidents and incidents. Staff were aware of these and their responsibilities to report such events. Action was taken to reduce the risk of similar incidents happening again.
- Accidents and incidents were reviewed by the management team to ensure appropriate actions had been taken.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At our last inspection the provider had failed to ensure staff received training relevant to their role. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- People and their relatives told us staff had the right skills and knowledge to do their job. Comments included, "They know what they're doing" and "The quality of care is very good. I trust them to provide the right care."
- Most staff said they received good training, which gave them the skills they needed to do their job. Some staff felt there was too much on-line training, although did say they had the opportunity to discuss the training with senior staff. The registered manager had a record of all training staff had completed and when refresher courses were due.
- New staff spent time shadowing experienced staff members and learning how the service's systems operated as part of their induction.
- Staff had regular meetings with their line manager to receive support and guidance. Staff said they felt well supported.

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

At our last inspection we recommended the provider considered current guidance on consent and acted to update their practice. The provider had made improvements.

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 Act 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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People were supported by staff who knew the principles of the MCA and worked in line with them.
- People's rights to make their own decisions were respected and people were in control of their support. Comments from people included, "Staff gain consent before providing care."
- Where people lacked capacity to consent to specific decisions, staff had recorded details of assessments that had been completed. Staff followed the best interest decision making principles and involved people's legal representatives where appropriate.

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

- People's needs were assessed when they first started to receive care and then regularly reviewed. There were clear records of the assessments and any updates.
- Care plans set out how people's assessed needs should be met, with clear guidance for staff on how to do this.
- People and their relatives said the services worked well with them to meet their changing needs. Comments included, "They have reviewed all the care I needed since coming home from hospital and helped me make changes to my flat." A relative told us, "They are pro-active at reviewing [my relative's] care needs before there is a problem."

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

- People were able to take meals in the communal dining room where food was prepared for them. During the COVID-19 pandemic the dining room had been closed, but meals were delivered to people who wanted them in their flats.
- People were positive about the quality of food provided.
- Each flat had a kitchen, so people could be independent with their food preparation. Care plans contained details of any specific dietary needs and the support people needed.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People told us they were able to see their doctor and other health professionals when needed. Records demonstrated staff referred people to health professionals in a timely manner.
- Staff had recorded the outcome of appointments in people's records, including any advice or guidance. Information had been used to review and update care plans where needed.

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 requires improvement. At this inspection this key question has now improved to 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

At our last inspection the provider had failed to ensure there were effective quality assurance systems in place. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- There was a registered manager in post, who had provided consistent leadership of the service.
- The provider had effective quality assurance systems in place. These included, reviews of support records and plans, medicine records, staff records and quality satisfaction surveys. The provider had completed a mock inspection of the service to ensure their action plan following the last inspection was on track, identified good practice and highlighted any shortfalls.
- The results of the various quality assurance checks were used to plan improvements to the service. Actions were regularly reviewed to ensure they had been completed.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 had promoted a person-centred approach in the service. This was evidenced through the content of staff meetings, support sessions for staff and the training staff received.
- Staff reported the registered manager was focused on ensuring people received a good service. Comments included "She is always looking at ways in which we can improve the care we are providing" and "Always does her best to meet [people's] needs."
- The registered manager had a good understanding of their responsibilities under the duty of candour.

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

- The service involved people, their families, friends and others effectively in a meaningful way. The registered manager responded to issues raised and let people know what action they had taken.
- People said they had regular contact with the registered manager and could discuss any issues about the service. People were confident action would be taken to resolve any issues.
- People were supported to be active members of their community where this was important to them.

- The provider was a member of relevant industry associations. The registered manager had kept up to date in relation to changes in legislation and good practice guidance.