

Southend Borough Council

Priory House

Inspection report

Prittlewell Chase
Westcliff On Sea
Essex
SS0 0SR

Tel: 01702344145

Date of inspection visit:
08 May 2017
11 May 2017

Date of publication:
01 June 2017

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

Priory House is a residential care home for up to 28 adults some of whom may be living with dementia. The service provides 20 permanent beds, two respite (short break) beds and six rehabilitation beds (for up to two weeks after discharge from hospital). When we inspected there were 24 people living in the service of which two were on respite and five were there for rehabilitation.

At the last inspection, the service was rated good and at this inspection we found the service remains good.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People received a safe service and were protected from the risk of harm. There were enough staff that had been safely recruited to help keep people safe and to meet their needs. People received their medication as prescribed.

People were cared for by supported, experienced and trained staff. The service ensured that people had the support they needed to have as much choice and control over their lives in the least restrictive way possible. People received sufficient food and drink to meet their needs and preferences and their healthcare needs were met.

Staff knew the people they cared for well and were kind, caring and compassionate in their approach. People were encouraged and supported to remain as independent as possible. Staff ensured that people were treated with dignity and respect and their privacy was maintained at all times.

People were fully involved in the assessment and care planning process. Their care plans had been regularly reviewed to reflect their changing needs. People were encouraged and supported to participate in a range of activities to suit their individual interests. Complaints were dealt with appropriately in a timely way.

People were positive about the quality of the service. The registered manager and staff were committed to providing people with good quality person centred care that met their needs and preferences. There were systems in place to monitor the quality of the service and to drive improvements. The service met all relevant fundamental standards.

Further information is in the detailed findings below.

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Good ●

The service remains good.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Good ●

The service remains good.

Priory House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 8 and 11 May 2017 and was unannounced. 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.

We reviewed information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

During the inspection we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with 11 people, four of their relatives, the registered manager, two team leaders, one visiting professional, one health and social care professional and nine members of staff. We reviewed four people's care files, four staff recruitment and support files, training records and quality assurance information.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse, harm and risks to people's safety as at the previous inspection and the rating continues to be good.

People told us they felt safe living at the service, one person told us, "I've got to say that I feel very safe living here." A visiting relative said, "We're so pleased my relative is in here as we know that they are safe. It is so nice to feel that way when we leave." Staff showed a good understanding of how to protect people from the risk of harm and described how to keep them safe. There were clear policies, procedures and guidelines for staff to refer to when needed and safeguarding issues had been dealt with appropriately. There were risk assessments and management plans in place to minimise any risks to people's health, safety and welfare.

There were sufficient numbers of skilled and experienced staff to meet people's assessed needs. Staff told us, and the duty rotas confirmed that there were enough of them to care for people safely. There was a robust recruitment process where all appropriate checks were carried out before staff started work at the service.

People told us that they received their medication in good time and that staff never rushed them. We carried out a random check of the medication system and observed a medication round. We found that the system was generally in good order, however there was an unexplained gap on one of the MAR (medication administration record) sheets and an incorrect coding had been used. All other records had been clearly completed and we saw that medication was administered appropriately. Staff had been trained and had their competence to administer medication regularly assessed. People received their medication as prescribed.

Is the service effective?

Our findings

At this inspection we found staff had the same level of skills, experience and support as they did at the previous inspection and the rating continues to be good.

People were cared for by staff who felt supported and valued. Staff told us, and the records confirmed that they had received supervision. In addition to individual supervision staff had regular peer meetings such as for team leaders, night care staff and domestic staff. One staff member said, "We do have regular meetings where we discuss any issues and I can talk to the team leaders or manager at any time." Other staff told us they felt supported.

Staff had the knowledge and skills to care for people effectively. People told us they felt that they were well looked after by trained staff. One person said, "The staff are very efficient at what they do." Another person told us, "I get great support from lovely staff who know what they are doing." Staff told us, and the records confirmed that they had received a range of training that was appropriate for their role which had been regularly updated. They said they had been encouraged and supported to attain a qualification in care. People were cared for by well trained staff.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. Staff had received training in MCA and DoLS and had a good understanding of how to support people in making decisions. One staff member said, "We only make decisions in people's best interests when they are unable to make them for themselves." Where necessary appropriate DoLS applications had been made to the local authority and there were authorisations in place where needed.

People were supported to have sufficient to eat and drink and to maintain a balanced diet. The lunchtime experience was a pleasant one. The tables were nicely laid out with condiments and we observed friendly banter between residents and staff throughout the mealtime. One person said, "It's like a five star hotel here. The food is excellent, it's all cooked fresh and there is plenty of choice." Another person told us, "I can't remember what I asked for but whatever it is it'll be nice as it always is." Where people needed help with their meal staff supported them in a sensitive and respectful way. People's dietary intake had been recorded and their weight was monitored, where required, to ensure that they had enough food and drink to keep them healthy.

Is the service caring?

Our findings

At this inspection we found that people were still cared for by kind, caring and compassionate staff and the rating continues to be good.

Staff provided people with a supportive and caring place to live. Throughout our visits people consistently told us they were treated with kindness and we saw compassionate, caring staff interaction. One person said, "There is brilliant staff here. It is not only good here, it is lovely as well. " Other people told us staff were, "All lovely ladies." And, "Exceptional staff, everything is great." We observed kind, caring interaction where staff took the time to speak with people asking them if all was well and comforting them when needed.

People and their relatives were actively involved in making decisions about their care and support. Relatives told us they were kept fully involved. One relative told us, "The staff are so nice and welcoming and they keep us involved in my relative's care. Nothing is too much trouble for them; they treat us nicely and look after my relative very well." People's care plans provided good information about their likes and dislikes and described how they wanted to be cared for. People had the privacy they needed and staff made sure they had gained consent before entering people's rooms. People's independence was encouraged and supported. People who were staying in the home for rehabilitation told us that they had occupational therapists supporting them to regain their independence. We saw people being supported to move around the service independently and heard staff offering them encouragement to do so.

People were supported and encouraged to maintain relationships with their families. We spoke with visitors throughout our visits and they told us that they were always welcomed and that staff were friendly and kind. Where people did not have family members to support them, they had access to advocacy services. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.

Is the service responsive?

Our findings

At this inspection we found that people still received personalised, responsive care that met their individual needs and the rating continues to be good.

People's needs had been fully assessed and their care plans had been developed from the process. People and their relatives told us they were kept fully involved and that the staff were very efficient at keeping them informed of any changes. The care plans viewed described people's likes and dislikes and provided staff with a brief history to inform them about the person's family life and background. However, some of the care plans did not contain the date they had been written so it was difficult to determine if they were current. We tested staff's knowledge of the people they cared for and they clearly knew people really well and people told us staff cared for them in the way they preferred. We saw staff chatting with people throughout our visits and it was clear that they understood each individual's needs and preferences.

Many activities took place on a daily basis. People told us there was always something going on. The activities records showed who had participated in what and there were photographs of people enjoying their chosen activity. People often accessed the local community. One person said, "I went up to the pub with a staff member and had half a pint of beer. It was great to watch the football up there." A visiting professional told us, "This is a lovely home. The staff are brilliant in the way that they speak to everybody and care for people. It's a really social home, no problems here." There was an activities room with a vast array of games and craft materials and we saw there were drawings that one person had done earlier in the day. People told us there was plenty to do and we saw that staff engaged with them in a game of cards and a quiz. Although there were no dedicated activities co-ordinators people experienced regular varied activities that suited their individual needs.

People were confident that their complaints and concerns would be dealt with swiftly. The registered manager told us they monitored complaints and looked for any themes or trends. They said they learnt from them and made improvements where necessary and the records showed that complaints had been fully investigated and dealt with appropriately.

Is the service well-led?

Our findings

At this inspection we found that the service still provided people with a well led good quality service and the rating continues to be good.

There was a registered manager in post. The service promoted a positive person-centred culture where all aspects of care were centred round individual's needs. Staff shared the registered manager's vision to provide people with good quality care. There was an open and inclusive culture where people, their relatives and staff could raise any issue with the registered manager. People told us they knew the registered manager well and that they often walked around the home and spent time talking with them. Many of the staff had worked at the service for a long time. One staff member said, "The registered manager has been very supportive to me and I am so thankful to them." Another staff member told us, "I love working here. We all chip in and make sure people do what they like to do. It's nice here." Two visiting relatives told us they were very happy with the care their relative received. One of them said, "This home is 100%. I give it 10 out of 10. My relative has settled in really well and we've no worries. It's great. It is such a relief to know that they are being looked after so well."

The service was rated highly by other professionals. For example one healthcare professional provided the following feedback after a recent meeting. 'Priory House is a wonderful home and it is a pleasure to be there'. They complimented the staff and said that all of the people living in the home were happy and only had good things to say about the staff. Another healthcare professional told us that people received good quality care from the registered manager and staff.

There was an effective quality monitoring system in place. The registered manager had carried out regular checks including for the care plans, health and safety, staff files and the medication system. In addition to the registered manager's checks the provider had carried out regular monthly audits on the service's systems and processes up until December 2016. Areas for improvement had been identified and action plans put in place to address any shortfalls. Although this had lapsed recently the registered manager told us that the provider had carried out a monthly check since the inspection and confirmed that the minor issues mentioned earlier in this report had been rectified.

People's personal records had been stored safely in locked offices when not in use but they were readily accessible to staff, when needed. The registered manager had access to up to date information and shared this with staff to ensure that they had the knowledge to keep people safe and provide a good quality service.