

Angels (Stratton House) Ltd

# Angels (Stratton House) Limited

## Inspection report

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## Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	<b>Inspected but not rated</b>
Is the service well-led?	<b>Inspected but not rated</b>

# Summary of findings

## Overall summary

### About the service

Angels (Stratton House) Ltd is a nursing home and was providing personal and nursing care to 19 people aged 65 and over at the time of the inspection. The service can support up to 24 people. The building is a former domestic property and accommodation is laid out over two floors. Bedrooms can be found on both floors, most with en-suite facilities and people have shared access to one bathroom and one shower room. The ground floor provides two communal lounges and dining room, there is level access to front and back gardens. The manager's office is found on the first floor.

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

This was a targeted inspection to follow up Warning Notices we issued in relation to Regulations 12 (Safe Care and Treatment), 13 (Safeguarding) and 17 (Good Governance). The management team and provider had made improvements to the service and we found the Warning Notices had been met.

Improvements had been made to infection prevention and control practices, including improved monitoring and staff training. All staff had either completed, or were in the process of completing, safeguarding and Infection Prevention Control (IPC) training. People were at reduced risk of their skin deteriorating because skin care assessments were accurate and specialist mattresses, to prevent skin breakdown, were correctly set. The management team had worked with an external fire safety organisation to undertake a fire risk assessment.

Systems to monitor the quality of care provision in the service had been updated and new systems had been introduced. The provider was more involved with running the service and visited weekly. There was improved oversight of safeguarding.

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 and update. The last rating for this service was inadequate (published 15 July 2021) and there were multiple breaches of regulation.

We served three Warning Notices in relation to Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities), Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) and Regulation 13 (Safeguarding). At this inspection we found improvements had been made.

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notices we previously served in relation to Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) and Regulation 17 (Good governance) Regulations 2014 had been met and Regulation 13 (Safeguarding) of the Health and Social Care Act 2008 (Regulated Activities). The overall rating for the service

has not changed following this targeted inspection and remains inadequate.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Angels (Stratton House) Ltd on our website at [www.cqc.org.uk](http://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?**

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Angels (Stratton House) Limited

## **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.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notices in relation to Regulation 12 (Safe care and treatment), Regulation 13 (Safeguarding) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Inspection team

The inspection team was made up of two inspectors.

#### Service and service type

Angels (Stratton House) Ltd 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.

#### Notice of inspection

This inspection was unannounced.

#### 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 three members of staff including the home manager, care manager, and registered nurse. We reviewed a range of records. This included two people's care records, fire risk assessment and accident and incident records. A variety of records relating to the management of the service 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 inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about. The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- At our last inspection we found people were at risk of experiencing abuse that may go unnoticed, we issued a Warning Notice. At this inspection, we found improvements had been made.
- The service had engaged a new training provider. All staff had either completed their safeguarding training, or were in the process of completing their training with the new organisation. The management team said training was more in depth and supported staff to have a better understanding in key areas, including safeguarding.
- At our last inspection, we found people were at risk of experiencing abuse because unexplained bruising was not investigated. At this inspection, we did not find any occasions of unexplained bruising. When safeguarding concerns had been raised, the service had taken action, including alerting the local authority safeguarding team.

Assessing risk, safety monitoring and management

- At our last inspection, we found that ineffective skin care assessment and management, meant people were at risk of their skin integrity deteriorating. At this inspection, we found improvements had been made.
- Since our last inspection, all skin care assessments had been reviewed and updated to reflect peoples' current skin care needs. Assessments we reviewed were comprehensive and included guidance for staff about how to support people maintain their skin integrity.
- At our last inspection, we found specialist mattresses, used to prevent skin deteriorating, were not always set correctly. At this inspection, we found specialist mattresses were set correctly. The registered nurse we spoke with confirmed no-one in the service currently had a pressure ulcer.
- At our last inspection, we identified that not all staff had completed their IPC training. At this inspection, the training matrix showed staff had either completed their IPC training, or were in the process of completing their training.
- The management team had introduced an IPC staff checklist. The checklist was used to monitor staff compliance with IPC measures and PPE use. When incorrect practice was observed, staff were spoken with and correct practice was reinforced, for example removing unnecessary jewellery or wearing PPE correctly. Staff we observed wore their personal protective equipment (PPE) in line with published guidance.
- At our last inspection, we identified the provider had failed to undertake a fire risk assessment of the service. At this inspection, we found a fire risk assessment had been completed. The service was working with an external fire safety organisation to make required improvements identified in the assessment.

# 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.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service. At the last inspection this key question was rated as inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

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

- At our last inspection, we found governance systems were not always used effectively to identify concerns, errors and omissions. At this inspection we found improvements had been made.
- The management team had introduced new systems and processes to maintain oversight of safety and care provision in the service. For example, since our last inspection, staff recruitment files had been reviewed and checks with the Disclosure and Barring Service (DBS) had been redone. All information was stored in a compliance tool that was used to monitor staff files.
- To ensure peoples' care plans and records remained up to date and correct, the service had introduced 'resident of the day'. As part of this process, senior staff were responsible for reviewing peoples' care plans, associated risk assessments and making required changes.
- The provider had increased the frequency they were visiting the service. This now happened weekly, and the provider spoke with members of the management team daily. The provider had also attended a recent staff meeting.
- At our last inspection, we identified the provider and management team had failed to maintain oversight of safeguarding in the service. At this inspection, we found improvements had been made and safeguarding information was collected and stored in one location. The information was used to monitor safeguarding concerns across the service, allowing the provider to identify potential themes and take action to prevent a recurrence.