

Abbotts Court Limited

Abbotts Court Care Home

Inspection report

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County Durham
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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

About the service

Abbotts Court Care Home is a residential care home providing accommodation and personal care for up to 47 older people, some of whom were living with a dementia or mental health condition. The home is purpose-built and accommodation provided across three floors. 45 people were using the service when we inspected.

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

People were happy at the service and spoke positively about the care they received. Relatives praised staff for the support they provided.

Risks to people were effectively assessed and monitored. Medicines were managed safely. Staffing levels were monitored to ensure people were supported safely. People were safeguarded from abuse. Effective infection prevention and control systems were in place.

Staff received regular training, supervision and appraisal. People received effective support with eating and drinking. Staff worked well with external professionals to ensure people received the support they needed. 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 received personalised support based on their assessed needs and preferences. A range of activities took place and people were supported to maintain their relationships and interests. The provider had a complaints procedure in place.

The registered manager and provider maintained good governance systems. Feedback was regularly sought and acted on. People, relatives and staff spoke positively about the culture and values of the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 13 January 2020 and this is the first inspection.

The last rating for the service under the previous provider was good, published on 31 October 2017.

Why we inspected

The inspection was prompted in part due to concerns received about the number of falls and other incidents occurring at the service. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see

the safe and well-led sections of this full report.

Follow up

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 caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Abbotts 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 Health and Social Care Act 2008.

Inspection team

Two inspectors and an Expert by Experience carried out this inspection.

Service and service type

Abbotts Court Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Abbotts Court Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

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

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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to

make. We used all this information to plan our inspection.

During the inspection

We spoke with seven people and six relatives about their experience of the care provided. We reviewed a range of records. This included three people's care records and five medicine administration records. We spoke with 10 members of staff, including the registered manager, care and domestic staff.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- There had been a recent increase in the number of falls and other incidents impacting on people at the service. This had been identified by the registered manager and provider, and steps taken to see if improvements could be made to keep people safe. These included a monthly falls meeting to review how people were being supported.
- Risks to people were assessed, and steps taken to reduce the risk of them occurring. External professionals told us staff were quick to seek advice and support to keep people safe.
- Accidents and incidents were regularly reviewed to see if improvements to the service could be made. One person told us, "I feel very safe."
- The premises and equipment were monitored to ensure they were safe for people to use.
- Plans were in place to support people in emergency situations. These included regular checks of fire safety equipment and systems.

Staffing and recruitment

- Staffing levels were monitored to ensure people received safe support. One person told us, "There is a lot of staff floating around, that makes me feel safe."
- Staff told us sickness and holiday leave was covered to ensure there were always enough staff at the service. One member of staff said, "We're not rushing around, we have enough staff on."
- The provider's recruitment process reduced the risk of unsuitable staff being employed. These included reference and Disclosure and Barring Service checks (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from abuse. Staff received safeguarding training and said they would not hesitate to report any concerns they had.

Using medicines safely

- Systems were in place to ensure people received their medicines when needed. One person told us, "I take my tablets on a night-time. I always get them."
- Care records contained details of people's medicine support needs. Medicine administration records were completed without any errors or unexplained gaps.
- Medicines were safely and securely stored. Stock levels were monitored to ensure people always had access to the medicines they needed.

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.
- Visiting to the service was carried out in line with national guidance. During the inspection we saw relatives visiting people.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's support needs and preferences were assessed before they moved into the service to ensure appropriate care was available. These were kept under constant review, with people being involved in expressing their choices.

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

- Staff worked effectively with external professionals to ensure people received effective and timely care. One external professional told us, "[Staff] follow the advice promptly."
- People were supported to access a wide range of external professionals to maintain and promote their health and wellbeing.

Staff support: induction, training, skills and experience

- Newly recruited staff completed the provider's induction programme. This included meeting people and staff at the home and learning about policies and procedures.
- Staff received regular training to ensure they had the knowledge and skills needed for their role. One member of staff told us, "[The provider] are really hot with training. They do online and in-house training for things like moving and handling."
- Regular supervisions and appraisals took place to support staff in their roles. Staff we spoke with said these were useful meetings at which they could raise any issues they had.

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

- People were supported with eating and drinking. Care records contained information on people's dietary needs and preferences, and staff were knowledgeable about these.
- People spoke positively about meals at the service. Comments included, "If it's not what I fancy I can have anything I want, they'll just cook it for me" and, "The food is great. They'll make something else if I'm not happy with it though."

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

- The premises were adapted for the comfort and convenience of people living there. Rooms were customised to people's individual tastes.
- Renovation works were currently taking place at the service to expand the facilities available to people, including through building an onsite café. People had been involved in making decisions about this.

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.

- People were asked to consent to the support they received. Where they did not have capacity to do this best interest decisions were made and recorded.
- DoLS were appropriately applied for and monitored.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People spoke positively about staff and the support they received. Comments included, "The carers are great. They can't do enough for me" and, "All the staff are very nice. They take time for me."
- Relatives said people were well cared for and happy at the service. One relative said, "The staff have been fantastic. [Named person] has never said he doesn't like it, he says he loves it."
- Throughout the inspection we saw caring and kind interactions between people and staff, who had professional but friendly relationships.
- Staff clearly knew the people they were supporting well, and used this knowledge to have meaningful and uplifting conversations with them. One person told us, "The [staff] are great. They are local so we've always something to talk about."

Supporting people to express their views and be involved in making decisions about their care

- People were supported to express their views and make their voices heard. Feedback was sought through regular conversations with people and relatives, at meetings and using surveys.
- We saw that people were involved in decisions about what they wanted to do and how they wanted to be supported. People and relatives said staff provided the support people wanted.
- People were supported to access advocacy services where needed. Advocates help to ensure that people's views and preferences are heard.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. We saw staff were polite and respectful when offering support, and protected people's dignity. One relative told us, "[Named person] always looks comfortable when we visit."
- People and relatives said they were supported to be as independent as possible. We saw staff encouraging people to do as much as possible for themselves.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care was based on their assessed needs and preferences. Staff said care plans were regularly updated to ensure they contained the latest information on people. One member of staff said, "The care plans have all the information I need."
- People were involved in designing and reviewing their support to ensure it responded to their choices. When discussing care plan reviews one person told us, "Yes, I'm involved."
- Staff were updated on any incidents or changes when they came on shift to ensure they had the latest information on people's needs and preferences.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People were given information in the most accessible format for them. Staff were effective at communicating with people and helping them to express themselves.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to access activities they enjoyed. An activities co-ordinator planned and managed activities, which were regularly reviewed to ensure they reflected people's interests.
- People and relatives told us people were supported to maintain relationships of importance to them.

Improving care quality in response to complaints or concerns

- Systems were in place to investigate and respond to complaints. People and relatives told us they knew how to use the complaints process and would be confident to do so. One relative said, "I know who to speak to about complaints."

End of life care and support

- At the time of our inspection nobody was receiving end of life support. Systems were in place to provide this in a way that reflected people's preferences.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; 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

- People and relatives spoke positively about the support they received and said they achieved their desired outcomes. One relative said, "[Named person] is over the moon with it, can't fault it. There has been such a big difference in him."
- The provider and registered manager regularly updated people and relatives about any changes at the service. One relative told us, "If I had any concerns I go to the manager, she puts my mind at rest."
- Staff said they were proud to work at the service and praise its culture and values. One member of staff said, "It is a warm, inviting place. Staff are all like a big family, you see them and residents more than your own family."

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

- The registered manager and provider carried out a range of quality assurance audits to monitor and improve standards at the service. Where issues were identified action was taken to address them.
- The provider and registered manager had submitted required notifications to CQC in a timely manner.

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

- Feedback was sought and acted on. People and relatives confirmed they were involved and asked their views on the service. A relative told us, "They let you know any changes, and say you can call here 24 hours a day, 7 days a week."
- Staff said the registered manager and provider were approachable and sought their views. One member of staff said, "[The provider] comes around to have a chat and sees if we need anything."

Continuous learning and improving care; Working in partnership with others

- The service worked effectively with a wide range of external professionals to develop and improve people's care. One external professional told us, "We have very good professional relationships and communications."
- Staff received ongoing training to ensure they were aware of the latest learning and guidance.