

# Community Integrated Care

# St Catherines Care Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?	Good 
Is the service responsive?	Good 
Is the service well-led?	Good 

# Summary of findings

## Overall summary

### About the service

St Catherine's is a care home providing personal and nursing care for up to 40 people across two units, with one specialising in providing care to people living with dementia. At the time of the inspection there were 33 people using the service.

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

People received care and support which was person-centred, safe and was delivered by a competent staff team who knew them well. Systems were in place to protect people from the risk of abuse. People felt safe. Medicines were managed and administered safely. Effective measures were in place to prevent and control the spread of infection.

Each person had an individualised care plan which provided staff with guidance about their needs, wishes, likes and dislikes. The impact of the COVID-19 pandemic on visiting arrangements had been managed by the implementation of window visits, telephone and video calls. The registered manager was pro-actively planning for visiting arrangements as the weather becomes colder. Policies and procedures were in place to handle and respond to complaints. People and relatives told us they felt able to speak up if they had any concerns.

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.

Effective systems were in place to assess and monitor the quality of the service. There was a strong team spirit amongst staff and feedback was unanimously positive about the difference the new registered manager had made since their arrival. The service had established strong links with partner agencies.

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 requires improvement (02/09/2019) and there were multiple breaches of regulation. 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 an unannounced inspection of this service on 10/06/2020 and 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, staffing, dignity and governance.

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, Responsive 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 remained the same. 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 St Catherine's Care Home 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# St Catherines 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 prevention and control 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 three inspectors and a specialist advisor. The specialist advisor was a nurse.

#### Service and service type

St Catherine's Care Home 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

We gave a short period notice of the inspection. Due to the impact of the COVID-19 pandemic we were mindful of the amount of time inspectors were on site. Therefore, records and documentation were requested before the site visit and reviewed remotely.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection and sought feedback from the local authority. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also reviewed the latest Healthwatch report. Healthwatch is an independent consumer champion that gathers

and represents views of the public about health and social care services in England. We used all of this information to plan our inspection.

#### During the inspection

We spoke with seven people who used the service and contacted three relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, unit managers and care staff. 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 speak with us.

We reviewed a range of records. This included multiple care and medication records. We looked at two staff recruitment files and a variety of records relating to the management of the service.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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.

### Staffing and recruitment

At our last inspection we found that the registered provider was in breach of regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014. This was because sufficient numbers of staff were not always deployed to meet people's needs. At this inspection we found that improvements had been made and the registered provider was no longer in breach of these regulations.

- Staffing levels and skill mix were determined by the use of dependency tools, supported by the registered manager's knowledge of the service and people's needs. During the inspection we observed there were sufficient skilled staff to meet people's needs.
- A permanent staff team had been developed thereby reducing the level of agency staff needed. The registered manager said, "I am very proud of the staff team we are creating."
- Staff told us staffing had improved significantly, they said, "There's been a massive improvement, we've got our own staff and not relying heavily on agency"; "Staffing is really good, we work really well together as a team" and "The unit leads have made a difference, it's a lot better than it ever has been."
- People told us that staff came quickly when they needed them. One person said; "The girls [staff] come very fast when I use the call bell."
- Safe recruitment procedures were followed to ensure that suitable staff were employed.

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

At our last inspection the provider had failed to maintain robust record keeping which placed people at risk of receiving ineffective care and support to meet their needs. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection improvements had been made at this inspection and the provider was no longer in breach of regulation 17.

- Risks relating to people's care and support needs were assessed with measures in place to mitigate. Risk assessments were kept under regular review.
- Accidents and incidents were recorded and monitored. There was oversight at registered manager and provider level ensuring measures were implemented to prevent reoccurrence where necessary and learning was captured.
- The registered manager and staff were alert and receptive to opportunities for learning where systems could be improved.

### Systems and processes to safeguard people from the risk of abuse

- People felt safe living at St Catherine's. We were told; "It's very nice here, and I'm happy"; "I feel quite safe"

and "I feel safe and cared for here."

- Systems, policies and procedures were in place to protect people from the risk of abuse. Staff understood their responsibilities and the steps to take should abuse occur.
- Staff felt able to raise any concerns and that they would be dealt with appropriately. They told us; "I wouldn't hesitate"; "I feel able to raise anything, I don't feel you can shy away from that" and "I've got total confidence, and it's a long time since I've said that."

#### Using medicines safely

- Medicines were managed and administered safely by trained and competent staff.
- Clear protocols were in place for medicines which were prescribed to be taken as and when required.
- When people received their medicines covertly (hidden) appropriate procedures were followed to maintain safety and to ensure that people's rights were protected.

#### Preventing and controlling infection

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 coronavirus and other infection outbreaks effectively.

- Strong and effective systems were in place to control and manage the spread of infection. The registered manager and staff had handled the impact of the COVID-19 pandemic well.
- 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's infection prevention and control policy was up to date.



# Is the service responsive?

## Our findings

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

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 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

At our last inspection we found the registered provider was in breach of regulations 9 and 10 of the Health and Social Care Act (Regulated Activities) Regulations 2014. This was because care was not always delivered in a person-centred way and people were not treated with dignity and respect. At this inspection we found that improvements had been made and the registered provider was no longer in breach of these regulations.

- All care plans had been re-written and were individualised and person-centred, clearly detailing people's needs and support requirements. People told us they knew they had a care plan. One person said they had seen and been involved in their care plan, whilst another couldn't recall if they had seen it, but knew they had one and were happy with their care.
- People spoke positively about the care they received. We were told, "The staff look after me well"; "They [staff] are very, very good, they do their best all the time" and "Staff spend time talking to me."
- Improved care planning, along with the development of a permanent staff team, had supported continuity and person-centred care, delivered by staff who knew people well. The registered manager and staff were knowledgeable about people's needs, likes and dislikes. One person told us, "I've got to know the girls [staff] that look after me."
- Staff spoke with pride about the care they provided. They told us "Care is more person-centred, not how it was before. It's exactly what they want now, not to make it easier for staff"; "We didn't have time to take care of them before. Now we can give the care I always thought it should be" and "It's person-centred [the care], it's not the same for everyone, it's very individual."
- People had choice and control over their daily lives, choosing when to get up, go to bed, what to wear and what to do.
- At mealtimes people were offered choice and were supported by staff in a caring and dignified manner. Staff commented "It's much smoother now" and "People are getting their meals, food is not being left to go cold and they are not rushed to eat their meals." Our observations supported those comments.

Improving care quality in response to complaints or concerns

At our last inspection we recommended the provider seek advice and guidance from a reputable source, about the management and learning from complaints. The provider had made improvements.

- People and relatives felt able to raise concerns and that they would be dealt with. One person told us "I could tell them if I wasn't happy."

- Policies and procedures were in place to handle and respond to comments, complaints and compliments. We saw that complaints received had been appropriately managed and responded to and that learning was captured.
- Several compliments had been received about the care received including; 'To everyone who showed me kindness during my stay with you a huge thank you' and 'You are all amazing. You should all be proud of yourselves for doing such a fantastic job.'

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

- The COVID-19 pandemic had impacted on visiting arrangements. However, a programme of window visits had been implemented along with telephone and video call arrangements. One person told us, "Staff bring the phone to me when my relatives call."
- The registered manager had considered how visiting arrangements would need to change in preparation for the colder weather. Measures were currently being discussed and risk assessed before implementation.
- Activities within the service were supported by an activities co-ordinator and care staff. A wide range of activities had taken place, including a 'postcards of kindness' initiative which had resulted in St Catherine's receiving postcards from all over the country with some people becoming pen-pals.
- One person told us "Staff take me in the garden when the weather is nice. I planted bulbs in the garden a few days ago."

End of life care and support

- People's future wishes were discussed and recorded with involvement of family members where appropriate.
- At the time of the inspection there was no-one receiving end of life care. However, the registered manager told us about the importance she and the staff placed on providing dignified and responsive end of life care in line with the person's expressed wishes.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed as part of the initial assessment process and were incorporated into care planning.
- Some documentation was available in an 'easy read' format. The registered manager was working towards further improvements in the development of pictorial menus.

# 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 the last inspection we found the registered provider did not have effective systems to assess, monitor and improve the quality of the service. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities Regulations 2014. At this inspection we found that improvements had been made and the registered provider was no longer in breach of this regulation.

- Effective quality assurance systems were in place to assess and monitor the quality of the service both at registered manager and provider level.
- The registered manager and staff were clear about their roles and responsibilities. Comments included, "There is someone I can fall back on, before I was on my own juggling. I have learnt so much in the last 12 months" and "Everyone knows what they are doing now. Looking back it has improved massively."
- People, relatives and staff commented positively about the difference the new manager had made to St Catherine's. We were told "Staff were unhappy before [Name] came to us, we kind of felt we were left to it. Now we can go to [Name] if we need any help and she will help us"; "You need someone with backbone. It's lovely now" and "You can really see the progress she has made. She has done such a good job."
- The CQC had been notified about events which had occurred within the service and the rating from the last inspection was displayed as legally required.
- The registered manager was clear about her focus for continuous learning and improvement which included the environment and 'fine-tuning' documentation.

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

- During the last inspection we made a recommendation about seeking advice and guidance from a reputable source in relation to management and learning from complaints at this inspection we found that improvements had been made. We also made a recommendation regarding management of Deprivation of Liberty Safeguards (DoLS). Although we did not inspect the Effective domain, we found that effective systems were now in place.
- The registered manager and staff were open and responsive to feedback from the inspection team.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff spoke positively about the atmosphere within St Catherine's, how changes had improved staff

morale and the care delivered. Comments included, "If there is an issue, you can go to her [Name]. She definitely has the respect of the staff"; "It's a different place, it's a pleasure to work here and I never thought I'd say that again" and "It's so lovely to be part of it. I'm so glad I stayed around."

- The registered manager felt supported in her role, was clear about her vision for St Catherine's and the experience people who lived there should have. She said, "We make sure it's the right place for the person and they get the right treatment. It's important that their time with us, however long, is enjoyed and that they feel, safe, happy and secure."

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

- Families were kept up to date with information about their home and their relative, and response to COVID-19 via email, telephone calls and webinars presented by the managing director.
- Surveys were carried out to seek people's, relatives' and staff's views with results displayed on a 'you said, we did' basis within the home demonstrating that views had been listened to and acted upon.

Working in partnership with others

- The registered manager had successfully developed relationships with external agencies which supported staff knowledge and the improvements made within the service.