

Morris Care Limited

Isle Court Nursing Home

Inspection report

Isle Lane
Bicton
Shrewsbury
Shropshire
SY3 8DY

Date of inspection visit:
19 November 2020

Date of publication:
09 December 2020

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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 well-led?	Good ●

Summary of findings

Overall summary

About the service

Isle Court Nursing Home is a residential care home that was providing personal and nursing care to 57 people aged 65 and over at the time of the inspection. The service can support up to 80 people across four separate units (known as households). One of the units specialises in providing care to people living with dementia.

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

People felt safe with the staff who supported them. People were supported by adequate numbers of staff who had been recruited safely. The provider's systems protected people from the risk of abuse. People were protected from the risks associated with the control and spread of infection. There were safe systems for the management and administration of people's prescribed medicines. People received their medicines when they needed them from staff who were trained and competent.

People were supported by a staff team who were trained and competent in their role. 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 lived in a comfortable and well-maintained environment. People were able to personalise their bedrooms. People were provided with meals and drinks which took into account their needs and preferences. People saw healthcare professionals when they needed. Before moving to the home people were assessed to ensure their needs and preferences could be met.

People were supported by staff who were kind, caring and considerate. People were treated with respect and their right to privacy was upheld. People could choose how and where to spend their day. Staff understood and respected people's right to confidentiality.

There were effective systems in place to monitor and improve the quality of the service people received. People's views were valued and responded to. The provider worked in partnership with other professionals to ensure people received a service which met their needs and preferences. People were cared for by a staff team who were well supported in their role.

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

Rating at last inspection

The last rating for this service was requires improvement (published 4 June 2019).

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 15 and 16 April 2019 where 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 in relation to staffing and good 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, effective, caring and well-led.

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.

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 Isle Court Nursing Home 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

Is the service effective?

Good ●

The service was effective

Is the service caring?

Good ●

The service was caring

Is the service well-led?

Good ●

The service was well-led

Isle Court Nursing 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 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 carried out by three inspectors.

Service and service type

Isle Court Nursing 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.

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.

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 and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 five people who used the service about their experience of the care provided. We spoke with 13 members of staff including the registered manager, deputy manager, quality manager, bursar, registered nurses, senior care workers, care workers, domestic and activity 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 talk with us.

We reviewed a range of records. This included six 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, including policies and procedures 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.

Staffing and recruitment

At our last inspection the provider had failed to ensure there were sufficient staff deployed to meet people's needs in a timely manner. 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.

- There was a good staff presence and we saw staff responded quickly to any requests for assistance.
- Staff told us staffing levels had improved. One member of staff said, "There are always enough staff."
- Since the last inspection systems had been introduced to monitor call bell response times to ensure people received assistance in a timely manner.
- The provider followed safe recruitment procedures and made sure only staff who were suitable to work with people were employed.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at the home and with the staff who supported them. One person told us, "I feel safe because the staff know how to help me."
- Staff had been trained to recognise and report abuse and those spoken with knew the action to take to ensure people were safe.

Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- Care plans and risk assessments had been regularly reviewed to ensure they remained up to date and reflective of people's needs.
- Equipment used by people was safe and well-maintained. Moving and handling equipment and the passenger lift had been serviced by an external contractor.
- Risks associated with electrical safety, legionella and environmental risks had been assessed and considered. Regular checks were carried out to ensure the home remained safe for people.
- Staff had received up to date training in fire safety.
- Each person had a personal emergency evacuation plan which detailed the level of support required to evacuate them safely in the event of an emergency.

Using medicines safely

- People were supported to take their medicines by staff who were trained and competent to carry out the task.
- Medication administration records (MAR) provided information about people's prescribed medicines, the dose and time the medicines should be administered.
- Medicines were securely stored at temperatures within the manufacturer's guidance.
- There was a record of all medicines entering the home and those destroyed which meant there was a clear audit trail of medicines held at the home.

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.

Learning lessons when things go wrong

- Records of any accidents or incidents were maintained and reviewed when they occurred. This helped to identify any trends.
- Where things went wrong, the registered manager was keen to explore the reasons and to take steps to reduce the risk of it happening again.
- There was a culture of learning from accidents and incidents which was shared with staff.

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.

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 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. 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 and whether any restrictions on people's liberty had been authorised.

At our last inspection we recommended the provider reviewed their processes to ensure people's assessed needs were reviewed by all relevant parties and the appropriate consent is sought. The provider had made improvements.

- Staff had been trained and had a good understanding of the MCA. Where there were concerns about a person's capacity to consent to their care and treatment assessments of their capacity and discussions had taken place to ensure decisions made were appropriate and, in the person's, best interests.
- The registered manager had made appropriate DoLS applications for people who required this level of protection to keep them safe and meet their needs.
- Staff sought people's consent before assisting them with a task and understood the importance of ensuring people's rights were respected.

Staff support: induction, training, skills and experience

At our last inspection we recommended the provider reviews their processes to ensure all staff received adequate supervision to support them in their role. The provider had made improvements.

- Staff told us they were well supported and received regular supervisions where they could discuss their role. A member of staff said, "I always get regular supervisions."
- People were supported by staff who were trained and competent to support them.

- Before staff began working with people, they completed an induction programme which gave them the basic skills and training they needed.
- The registered manager monitored staff skills and training to ensure they remained competent and that they received refresher training when needed. A member of staff said, "I've had lots of training and it's all up to date."

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

- People were assessed before they used the service to ensure their needs and preferences could be met.
- People and their relatives, where appropriate, were involved in the assessment and review of their needs.
- Assessments of people's diverse needs, such as religious preferences and sexuality were discussed prior to using the service.
- Assessments were used to formulate a plan of care. This provided staff with the information they needed to meet the person's needs and preferences.

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

- People were provided with food and drink which met their needs and preferences.
- People were offered drinks and snacks throughout the day.
- Snack boxes and fortified milkshakes had been introduced to help people maintain a healthy weight.
- Care plans detailed people's needs and preferences and where there were concerns about a person's intake or weight, these were monitored.

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

- Staff worked closely with other professionals to ensure people's health care needs were met.
- Records showed people saw a range of healthcare professionals. These included visiting GP's, district nurses, specialist healthcare professionals, chiropodists and opticians.
- We heard about one person who was supported to attend speech therapy sessions through a video link with their speech therapist. A staff member told us, "I have seen such a change in [name of person] and of the improvements in their speech."
- Where there were concerns about a person's health or well-being, we saw that referrals to appropriate healthcare professionals were made without delay.

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

- People lived in a comfortable and well-maintained environment.
- Décor and furnishings helped to promote a homely feel and there were communal areas where people could choose to spend their time.
- Each person had their own bedroom which they could personalise in accordance with their tastes and preferences.
- Grab rails and ramps helped people to maintain a level of independence when mobilising around the home.

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.

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 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

- At our last inspection we received mixed views from people about the way they were supported. Many felt staff did not have enough time to spend with them.
- At this inspection improvements were found, and we observed staff spending quality time with people. One person said, "All the staff are jolly, and I can have a joke and sing-along with them. They have got to know me well over the weeks I have been here, and they know what is important to me."
- We observed many acts of genuine kindness and consideration during our visit. We observed a member of staff offering gentle reassurance and praise to a person who was mobilising.
- Staff spoke to people in a kind and respectful manner and they regularly checked people were happy and content.
- Staff had worked hard during the pandemic to ensure people had safe contact with their loved ones. Up until the day before the inspection, this was largely through video calls. The service had created a safe visiting room where people could meet with their friends and family whilst reducing the risk of the spread of infection.
- The home has received numerous thank you cards from people's relatives. One commented. "Thank you all for the wonderful work you are doing."

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

- Throughout our visit we heard staff asking people what they wanted to do. We observed people moving freely around their home, choosing what they wanted to do and where they wanted to spend their time.
- There were 'wishing trees' for people to express some of the things they would like to do. One person had said they would like to go on a picnic, another wanted to go for a drive. A member of staff explained all wishes would be considered when the current situation allowed.

Respecting and promoting people's privacy, dignity and independence

- People looked clean and well-attired. A member of staff discretely assisted one person to straighten their clothing in a respectful manner.
- People were supported with their personal care needs in the privacy of their own bedrooms.
- Each person had a care plan which was tailored to their needs, abilities and preferences. There was information for staff about how to assist people to maintain a level of independence.
- Staff understood and respected people's rights to confidentiality. People's records were stored securely, and staff discussed people's needs in private areas where they could not be overheard.

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.

Continuous learning and improving care

At our last inspection the provider had failed to ensure that systems were in place to effectively assess, monitor and improve the service. 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 were a number of audits and checks in place to monitor safety and all aspects of the service provided. Records showed these had been effective in identifying any areas for improvement.
- Where improvements were required, action had been taken to address these and to prevent them from happening again.

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

- There was a clear staffing structure in place and the staff we spoke with were clear about their role and responsibilities.
- Staff training, skills and competence were regularly monitored through observations of their practice and regular refresher training.
- Staff were able to discuss their role through regular supervisions and annual appraisals.
- Staff were aware of the whistleblowing procedure and said they would use this if the need arose.
- In accordance with their legal responsibilities, the registered manager had informed us about significant events which occurred at the home within required timescales.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People received a service which was tailored to meet their needs and preferences and they were supported by a staff team who took time to get to know them.
- People's views were valued and responded to. People were involved in planning and reviewing the care they received and were able to provide feedback through regular surveys.
- There was a supportive culture of openness and transparency. Staff felt valued and motivated to do their

work. Staff considered that the teamwork in the home was good. A member of staff said, "All the staff are so friendly and the atmosphere here is wonderful. The teamwork is really good."

- There were regular meetings for staff where their views were encouraged. Staff told us they felt valued and their views were respected. A member of staff said, "[Name of registered manager] is amazing. If you need anything, they are there for you."
- There were policies in place to ensure people's protected characteristics were considered and understood by staff.

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 provider promoted an ethos of openness and transparency which had been adopted by the staff team.
- There was learning where things went wrong and open discussions with people and their relatives.

Working in partnership with others

- The provider worked in partnership with other professionals and organisations to achieve good outcomes for people. These included health and social care professionals, hospitals, and commissioners.