

## St Brendans Residential Home

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### Inspection report

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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

St Brendan's is a residential care home providing personal care to 26 people aged 65 and over at the time of the inspection. The service can support up to 26 people.

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

People said they liked living at the home and they enjoyed the company of the staff who supported them. We saw that people were relaxed and chatty with the staff and the registered manager. There was a friendly atmosphere at the home with people enjoying each-others company.

People were safe at St Brendans. People had clear risk assessments and plans in place which identified their needs and told staff how to respond to these, in order to promote people's safety. Staff were mindful about what potential harm or abuse could look like. They understood their responsibilities in responding to any concerns identified. Various safety checks were completed on a regular basis to ensure the building and equipment used was safe.

People's health needs were monitored closely. Action was taken quickly by staff and the registered manager when people were unwell or showed signs they could be unwell. The registered manager ensured referrals were made to other health professionals to meet people's changing needs.

People said, and they looked like they enjoyed the food. Processes were in place to respond when some people started to become an unhealthy weight.

Staff said they were supported by their colleagues and the registered manager. Training was provided which reflected people's needs. The registered manager completed checks to see if the training had been effective.

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.

Staff were supportive and thoughtful towards people at the home. People's privacy and dignity was promoted. Staff spent time with people and responded when they looked like they needed some help. There were activities and events taking place throughout the week. Staff were also mindful of those who spent a lot of time in their bedrooms. Staff spent time with these people too.

There was a positive culture at the home. Staff were open and friendly. The registered manager was very present in the day to day running of the home. The provider was also very involved with the home. Both the registered manager and the provider were open to change and suggestions.

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

The last rating for this service was Good (published 19 August 2017)

#### Why we inspected

This was a planned inspection based on the previous rating.

#### 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 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.

# St Brendans Residential 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.

#### Inspection team

The inspection was carried out by one inspector, an assistant inspector, and an inspection manager.

#### Service and service type

St Brendan's 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 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 spoke with the local authority to gain their views and their assessment of the service. We also asked Healthwatch for their views, but they had not visited the service. Healthwatch is an independent consumer champion that gathers and represents the 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

Most people were unable to communicate with us in detail about their experiences, so we completed many observations throughout the day. We spoke with four people and one person's relative. We also spoke with the chef, two care staff, the registered manager, the provider, and a visiting district nurse. We looked at four care records in detail. We checked two staff recruitment checks and personnel records. Medicine records and a variety of safety checks completed, such as fire safety records, were also viewed.

# 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 good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person said, "Oh yes [I feel safe]."
- The registered manager and staff had a good understanding about what potential abuse could look like. They told us what action they had taken when they had identified potential neglect relating to a person who was being cared for by another service, before they moved to St Brendans.
- Staff were clear they must report their concerns to the registered manager straight away.

Assessing risk, safety monitoring and management

- People had risk assessments in place. These records clearly highlighted to staff what risks people faced. The registered manager had a good oversight of these risks.
- The registered manager had a process of recording and monitoring incidents and accidents. Good information was recorded here which included the actions taken. People did not have repeat incidents and falls.
- Various safety checks relating to the building and any equipment used were being completed.

Staffing and recruitment

- Staff were recruited in a safe way.
- There were sufficient staff to meet people's needs.

Using medicines safely

- Medicines were stored in a safe way. We completed a check of people's medicines and found the medicines tallied with the medicine administration records for these medicines.
- Staff were trained and their competency to administer medicines safely was assessed and checked by the registered manager.

Preventing and controlling infection

- The home was clean and had a pleasant aroma to it.
- Staff wore protective clothing when assisting people with their meals.

Learning lessons when things go wrong

- The registered manager told us what action they had taken, when events did not go to plan, to try and prevent this from happening again. For example, in one instance additional training was arranged for the staff team.

# 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 good. At this inspection this key question has remained the same. 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 needs were holistically assessed before they moved into the home, by the registered manager.

Staff support: induction, training, skills and experience

- One relative told us, "I think the care is very good, and staff are easy to talk with."
- Staff said they felt supported during their induction and were ready to start working more independently after this time.
- Staff received training specific to people's needs. The registered manager arranged training quickly when people's needs changed or when staff said they wanted to improve their understanding in areas of their work.
- The registered manager checked staff were competent and were putting their training into practice.

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

- People appeared to enjoy their food and had food and drinks which they liked. One relative said, "[Name of relative] has a posh coffee (frothy) which they like." Choices were given at each meal time.
- There was a system to monitor and react when people became an unhealthy weight.
- Some people needed specialist diets because they were at risk of choking. Referrals to a specialist food team had been made. Staff knew how to support these people. Although, we found one of the chef's knowledge in this area needed improving. The registered manager had already started to address this. During the inspection the provider told us about plans they had made to support this member of staff.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked well together, and the registered manager told us how they sought advice and input from outside agencies to help them and staff to meet people's needs.

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

- A redecoration programme was underway with some work completed, to make the environment dementia friendly. The provider told us about other work to be completed this year to update and improve the décor of the lounge.

Supporting people to live healthier lives, access healthcare services and support

- The registered manager was very knowledgeable about people's health needs. When people had shown signs of not being well, appropriate action had been taken to get them the health care they needed.



- We were told about people whose physical and mental health needs had improved sometime after they had moved to St Brendans.

#### 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 conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff knew the importance of offering people choices. We saw staff doing this throughout their work.
- People had up to date capacity assessments in place, with best interest decisions. These were explored and documented. The conditions of a person's DoLS was being adhered to.
- People were supported to move about freely inside and outside 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 good. At this inspection this key question has now remained the same. 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 told us staff treated them well and in a respectful way. One person said, "Staff are friendly."
- We saw staff and people interacting in a friendly and kind way. One person had fallen asleep in an uncomfortable position. We heard a staff member tell a colleague they would get a pillow for this person. A short time later they appeared with a pillow and helped this person to sit in a more comfortable position.

Respecting and promoting people's privacy, dignity and independence

- A relative told us how staff encouraged their relative to stand up independently and how staff walked with them up and down the corridor.
- We saw staff knocking on people's doors before they entered.
- Staff were seen to ask people in quiet and discreet ways if they wanted to use the bathroom. We saw staff discreetly regularly checking if people needed to use the bathroom throughout the day.
- Staff told us how they promoted people's independence with aspects of their daily care. For example, in supporting people with what they wanted to wear, eat and drink.

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

- The registered manager and provider showed us various questionnaires people had completed about aspects of the service. We could see people had been consulted with the changes being made to the environment.
- People's records of their reviews of their care did not always show how they had been consulted with. The registered manager told us this aspect of people's records would be improved upon.

# 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 good. At this inspection this key question has now remained the same. 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 had care assessments which outlined their needs, backgrounds, interests and preferences of how they wanted to live their day to day life.
- The registered manager completed people's reviews of their care which they said people were directly involved in. We found this was not well evidenced, nor had they shown how they had explored meeting some people's particular interests. The registered manager responded well to this feedback and told us they would address these issues.

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 had communication plans in place which were unique to them. Staff spoke with some people in their language of origin. We were told staff were training other staff to use key words in these languages. We also saw staff communicating with people in a clear and sensitive way throughout the day.

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

- There were planned activities and events which regularly took place at the home. People told us they were happy with the social element of the home. We saw staff chatting to people.
- We saw some of these activities taking place during the inspection. These were buoyant and upbeat which involved everyone in the room.
- For one person who spent all their time in their room we were told how staff ensured they had social contact. Staff spent planned quality time with this person to make their day interesting.

Improving care quality in response to complaints or concerns

- There was a complaints process in place. The registered manager told us they had not received any complaints.

End of life care and support

- People had end of life plans in place. The registered manager told us they were going to start revising these plans to build upon their wishes and wants at this time.
- Staff had received training in end of life care.

# 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 good. At this inspection this key question has now remained the same. 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 said they liked the staff and the home, "Overall I like living here, nice bedrooms and staff always say goodbye when they leave [finish their shift]."
- There was a positive culture at the home. Staff were open, friendly, and knew about people's needs and preferences.
- There was a friendly inclusive atmosphere to the home. A person had been taken to hospital the day before. People and staff shared their concerns with each other about this person. Staff reassured people and people spoke about looking forward to this person returning to the home.
- The registered manager responded proactively when improvements had been suggested. Lessons were learnt when things did not go to plan or shortfalls in staff's understanding or knowledge were identified by the registered manager.

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

- The registered manager and staff knew their roles clearly. Staff were responsive and caring to people. The registered manager also had a detailed knowledge of the people the home supported. They told us how they advocated for people to improve their well-being and physical health.

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

- People were involved in the development of the environment.
- People's views were sought about key aspects of their care in questionnaires and meetings. Actions were taken to respond to people's suggestions.

Continuous learning and improving care; Working in partnership with others

- The registered manager and provider had a development plan for the service. The registered manager and staff responded well to people's changing needs. The registered manager was open to the suggestions we made during the inspection.
- Other organisations and groups from the local area visited the service and were encouraged to do so by the registered manager.

