

The Oasis Care Home Limited

The Oasis

Inspection report

90-92 Plymstock Road
Plymouth
Devon
PL9 7PJ

Tel: 01752403256

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Oasis is a residential care home providing personal and nursing care to 30 people aged 65 and over at the time of the inspection. The service can support up to 35 people.

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

There were effective systems in place for the management of medicines which meant they were no longer in breach of regulations.

Medication Administration Records (MAR) showed people received their medicines as prescribed and these records were completed accurately. Guidance was in place for staff to follow when people were prescribed medicines to be administered on an 'as required' [PRN] basis. Staff had been trained to administer medicines and had been assessed as competent to do so safely.

Quality assurance and governance systems had been embedded into practice and were used effectively to drive improvements within the service. People, relatives and staff told us they felt the service was well led. There was a positive culture in the service where staff worked together towards the best outcomes for people.

People and their relatives told us they were safe living at The Oasis and there were appropriate systems in place to protect people from the risk of abuse.

Care plans and risk assessments provided staff with the information they needed to manage risk and keep people safe.

The premises were clean and tidy. Infection prevention and control measures and practices were in place to keep people safe and prevent the spread of infections. Staff had received infection control training. They had access to sufficient stocks of personal protective equipment (PPE).

The service followed safe recruitment practices and people were cared for by sufficient numbers of staff to ensure that people's care needs were met.

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 16 August 2019).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in

breach of regulations.

Why we inspected

The inspection was requested by the provider as they were concerned their current rating was having an impact on their business.

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 and Well-led which contain those requirements.

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 COVID-19 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 The Oasis 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.

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.

The Oasis

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

This inspection was carried out by one inspector.

Service and service type

The Oasis 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.

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 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 used all of this information to plan our inspection.

During the inspection

We spoke with nine people who used the service. We spent time observing care to help us understand the experience of people who could not talk with us. We spoke with nine members of staff including the cook, both care manager's, quality assurance and compliance lead and the registered manager. We reviewed a range of records. These included multiple medicines records and three people's care plans. We looked at three staff files in relation to recruitment. We looked at a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We sought feedback from six relatives. We looked at training data and a variety of quality assurance records. We spoke with a health professional who regularly visited the service. 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.

Using medicines safely

At our last inspection the provider had failed to ensure systems were in place and robust enough to demonstrate medicine safety was effectively managed. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made in relation to medicines management.

- There were safe systems in place for the management of medicines and people received their medicines when they needed them.
- Medicines were stored and disposed of safely. Staff monitored the fridge and the room temperature where medicines were kept, ensuring medicines were stored within safe temperature ranges.
- Medication Administration Records (MAR) showed people received their medicines as prescribed and these records were completed accurately. Where additions or amendments had been made to MARs, this was managed safely.
- There were effective systems in place to ensure prescribed topical creams were managed safely and applied as required.
- For people who were prescribed medicines to be administered on an 'as required' [PRN] basis, guidance was in place to help staff understand when to give specific medicines and what dose.
- Staff had been trained to administer medicines and had been assessed as competent to do so safely.
- Audits of medicines records and stock levels was undertaken by senior staff member to ensure appropriate action would be taken if there were issues identified, such as missing signatures.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us people were safe living at The Oasis. Comments included, "The staff make me feel safe" and "I feel very safe and confident here." A relative told us, "I've got confidence in them and they let me know if anything goes wrong."
- Appropriate systems were in place and were followed to protect people from the risk of abuse. When safeguarding concerns had been identified staff and the registered manager had acted promptly and appropriately to ensure the person's safety.
- Staff had completed training in safeguarding adults and were aware of the action they should take if they identified a safeguarding concern. Staff told us they would not hesitate reporting concerns to the registered manager or to the local authority safeguarding team.

Assessing risk, safety monitoring and management

- Risks to people's safety had been assessed and plans were in place to minimise risk when risk had been

identified. People's care records included assessments of specific risks posed to them, such as risk of falls and risks arising from moving and handling, pressure areas and nutritional needs.

- Care plans and risk assessments provided staff with the information they needed to manage risk and guidance for staff about how to support people to reduce the risk of avoidable harm. For example, where people lacked the ability to mobilise independently, care plans explained the equipment and the number of staff needed to assist the person.
- Staff completed monitoring charts for people at risk in relation to their food or fluid intake and protecting people's skin. Records showed that staff followed measures described in the risk assessment. For example, people at risk of skin damage received regular assistance to be repositioned.
- Risk assessments were reviewed each month or more frequently if a person's needs changed. This supported staff to take appropriate action to reduce risks to people as risk levels changed.
- The provider maintained the safety of the building and equipment through regular checks, servicing and maintenance.

Staffing and recruitment

- During the inspection we observed there were sufficient numbers of staff to meet people's needs and keep them safe. The atmosphere at the service was calm, staff were relaxed, and they interacted with people as they went about their work. However, people and staff we spoke with told us they could do with more staff. One person said, "They do get overstretched, but they do care for people well and they answer bells quickly." We spoke with the registered manager about this and they told us they were constantly trying to recruit suitable staff to fill vacancies but under the current climate it was a struggle to recruit the right people. They told us some staff had been with the service for a long time and often staff who had left, came back.
- Staffing levels were determined by the number of people using the service and the level of care they required. The registered manager told us staff absences were covered by existing staff members or agency staff known to them, which helped ensure continuity of care for people.
- People were protected by safe recruitment practices. The registered manager completed appropriate pre-employment checks for new staff, to check they were suitable to work at the service. This included obtaining references from previous employers and completing a check with the Disclosure and Barring Service (DBS). A DBS check provides information about any criminal convictions a person may have. This information helps employers make safer recruitment decisions.

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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- The registered manager spoke transparently about the learning that had taken place since the last

inspection and the measures introduced to address concerns and drive continued improvements. Specialist advice and guidance was sought and systems had been reviewed and changed in relation to medicines management.

- There was a clear system in place to ensure the service learned from accidents and incidents. Accidents and incidents were promptly and thoroughly recorded by staff and were reviewed and analysed for potential causes or themes to identify areas for development or improvement.

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 new governance systems were still being embedded into practice to ensure care delivery was being monitored sufficiently. Following that inspection the registered manager and staff took action and used their quality assurance systems and action plans to make improvements to medicines management which meant at this inspection they were no longer in breach of regulations.
- The service had further developed and strengthened their governance systems to improve the quality of service in the home. Monthly audits were carried out to monitor areas such as care plans, accidents and incidents, and medicines. Monthly development plans, based on quality assurance and observations, were completed to drive improvement.
- There was a clear structure of management at the home and staff demonstrated a good awareness of their roles and responsibilities.
- Staff were complimentary regarding the management of the service and confirmed there was good teamwork and communication. One staff member told us, "They [manager's] are a lot more hands on here. Everyone works as a team." Another staff member said, "She [registered manager] tries to do the very best for the residents and the care managers are very supportive. The Oasis is loving and caring, and the staff give the best care they can give."

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

- People and their relatives were happy with the service provided at The Oasis and felt it was well managed. One person told us "I think it's very well led. What they have done is marvelous. Nothing slips through, all the girls are on the ball." A family member said, "The Oasis was the only place I would put my mum and dad. They've been amazing. On the whole I couldn't ask for a better service."
- There was a positive culture in the service where staff worked together towards the best outcomes for people. One person commented, "The girls are always happy and smiling."
- It was clear that the management team and staff had a thorough knowledge of people's current needs and circumstances and were committed to the principles of person-centred care. Staff were able to describe people's care needs and what was important to them. One staff member told us, "It's all about working in a person-centred approach, which is best for them [people]. We do what they like to do and how they like to do it."

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 registered manager was committed to a culture of openness and transparency and it was evident that they led by example.
- The registered manager was aware of their responsibilities under the duty of candour which requires the service to apologise, including in writing, when adverse incidents have occurred.
- The registered manager had notified CQC about all incidents, safeguarding concerns and significant events as required.

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

- The registered manager encouraged people, relatives and staff to approach them with any concerns or issues they had. They said they operated an 'open door policy' in order for people, relatives and staff to speak to the management team when they needed to.
- Relatives praised the management team and staff for their excellent engagement with them during the pandemic. One relative told us, "[Registered manager's name] kept us informed daily during the early pandemic, which was very reassuring. They've been excellent throughout." The registered manager contacted relatives daily and updated them via email and regular newsletters.
- People and their relatives were asked for their views of the service and the quality of the care delivered. An online survey was used, and the last survey completed in 2020 showed people were very happy with the care people received at the service.
- Staff praised the registered manager and felt valued and respected as members of the team. One Staff member said, "I'm able to make suggestions and I feel listened to."

Working in partnership with others

- The service worked effectively with external professionals to ensure people received the care they needed. One health professional told us, "We do not have any concerns about the care at The Oasis. They always listen to our advice and make sure they follow that advice. They are proactive and very good at chasing things up. They are always approachable."
- We saw evidence of the service working with health and social care professionals to seek specialist advice to meet people's needs. For example, a referral was promptly made to health professionals for a person who was experiencing swallowing difficulties.