

Southport Rest Home

Southport Rest Home Limited

Inspection report

81 Albert Road
Southport
Merseyside
PR9 9LN

Tel: 01704531975

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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: Southport Rest Home is a residential care home which is registered to provide accommodation and personal care for 25 older people. Accommodation is provided over three floors. The home provides specialised care and facilities to meet the needs of people practicing the Jewish faith, but also caters for the needs of people from other faiths and cultures. At the time of the inspection 17 people were living at the home.

People's experience of using this service:

People's experience of living at the home was positive. We were told repeatedly that people enjoyed living at Southport Rest Home and that their needs were consistently met.

People were cared for by staff who knew them well, understood their needs and provided effective care to keep them safe. Risk was subject to regular review and was effectively managed. People received their medicines as prescribed from trained staff. The home was clean and measures were in place to reduce the risk of cross-infection.

Staff received regular training and support and were equipped to provide effective care. Care was provided in-line with best-practice guidance and legislation. People had access to a good choice of food and drink and maintained a healthy diet. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. When people were unable to make decisions about their care and support, the principles of the Mental Capacity Act (2005) were followed.

People and their relatives spoke positively about the staff and the way in which care was provided. Staff treated people with kindness and respect and supported their dignity in a sensitive manner. People were encouraged and supported to maintain their independence. They were actively involved in decision-making regarding their own care and developments within the wider home.

Care was personalised and met the needs of each individual. Care records captured important information regarding people's histories, families and preferences. This information was used to tailor the provision of care to meet each person's needs. There were a very low number of complaints recorded. People told us this was because any concerns were addressed as soon as they were raised. End of life care was provided in accordance with people's faith and wishes.

The registered manager, provider and staff promoted an open, positive culture with a focus on high-quality, person-centred care. The registered manager made effective use of audits and other sources of information to review and improve practice. The home had forged links with other providers and resources in the local community to support further development.

More information is provided in the full report.

Rating at last inspection: Good (report published 19 July 2018)

Why we inspected: This was a scheduled inspection based on the previous rating from the last comprehensive inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

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

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.

Southport Rest Home Limited

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection team was comprised of an adult social care inspector and an expert by experience with experience of care for older people and those living with dementia.

Service and service type:

The Southport Rest Home is a care home. People in care homes receive accommodation and nursing or personal care. The Care Quality Commission (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:

The inspection was unannounced.

Inspection site visit activity was completed in one day on the 8 April 2019.

What we did:

Prior to the inspection we reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about. We also sought feedback from the

local authority. We assessed the information in the provider information return. This is key information providers are required to send us about their service, what they do well, and improvements they plan to make. We used this information to help us plan the inspection.

During the inspection we spoke with six people living at Southport Rest Home and two visiting relatives. In addition, we observed the provision of care throughout the inspection.

We also spoke with the registered manager, the chair-person of the board of trustees, the chef and three care staff. We looked at three care records, records relating to the administration of medicines, residents' meetings and audits.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Each of the people that we spoke with told us that they felt safe living at Southport Rest Home. Staff were aware of the need to report any concerns and were encouraged to do so by the registered manager. One member of staff said, "I would go straight to [registered manager's name]. I can contact the chairman if I need to."
- Systems for reporting concerns were robust and aligned to the requirements of the local authority and the Care Quality Commission. Our assessment of records indicated that the number of reportable incidents in the previous 12 months was low.

Assessing risk, safety monitoring and management

- Risk assessments were completed in relation to a range of health conditions and the physical environment. Assessments were sufficiently detailed and regularly reviewed to reduce the risk of harm.
- Risk was assessed as part of the management of the home and effective measures had been taken to reduce risk and maintain people's independence. For example, people at risk of falls had been issued with a device to wear on their wrist which alerted staff to a fall and the person's location within the home.

Staffing and recruitment

- Safe recruitment practices were used to ensure that new staff were suited to working with vulnerable people.
- Staff were deployed in sufficient numbers to provide safe care. Care staff were supported by a number of ancillary staff and the registered manager.
- The home had experienced a high level of staff turnover during the previous 12 months. The registered manager provided a reasonable explanation for the staff turnover. The people we spoke with confirmed that this had not affected the quality of care provided to them.

Using medicines safely

- There had been a significant number of medicines errors recorded during the previous 12 months. However it was clear from the records we saw that most of reported errors were related to stock counts and associated records and had not stopped people from receiving their medicines as prescribed.
- Senior staff and the registered manager had increased the frequency of audits to ensure that stock levels were maintained, records were accurate and people continued to receive their medicines as required.
- Staff were adhering to a safe process for the administration of medicines. People told us that they received their medicines regularly.

Preventing and controlling infection

- The environment was visibly clean and free from any unpleasant odours. We saw dedicated domestic staff

cleaning the building throughout the inspection. There was a clear system in place for the maintenance of cleanliness and hygiene in private and communal spaces.

- Staff were aware of the need to control the potential spread of infection. They wore personal protective equipment and followed safe practice accordingly.

Learning lessons when things go wrong

- Staff understood the importance of reporting incidents and accidents. The documentation that we saw included sufficient detail to aid analysis and to identify patterns or trends.

- Following analysis by the registered manager, staff were involved in discussions about incidents and accidents to reduce the risk of them happening again.

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

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

- Staff were aware of the relevant standards and guidance and used this effectively to assess people's needs and plan their care. Recognised guidance and information regarding the management of falls, pressure care and nutrition was available to staff and used appropriately.
- People's outcomes were good. One person told us, "I need a lot of care and I'm very well looked after."

Staff support: induction, training, skills and experience

- Staff were given an induction in accordance with recognised standards for care staff. Staff were also given regular additional training to improve their skills and knowledge.
- We discussed the need for specialist training with the registered manager in relation to the health needs of one resident. By the end of the inspection, the registered manager had sourced appropriate, accredited training for care staff.
- Staff told us that they felt well supported. Records indicated that staff received regular group and individual supervision.

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

- Southport Rest Home adhered to the requirements of the Jewish faith in the preparation and serving of food and drink. This meant that non-Jewish residents had some restrictions placed on them, especially during religious festivals. To ensure that this did not impact on people's choice, additional facilities were set-up for the provision of non-Kosher food and drink.
- Each of the people that we spoke with told us they enjoyed the food at the home and had a good choice of meals and snacks. One person commented, "It's quite good, the portions are good and you always get a choice".
- The mealtime experience was relaxed and people were given plenty of time to finish their food. We saw five different meals served during lunch.
- People with specific dietary needs were supported in accordance with their needs and preferences.

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

- Staff and managers worked effectively with healthcare professionals to ensure that people received the care they needed; such as involving GPs and other healthcare professionals in making important decisions.
- Staff were aware of people's individual healthcare needs and were able to explain how they met these needs through the provision of care, support and activities.
- On the day of the inspection we saw staff working closely with a visiting healthcare professional to provide them with an update and record any information provided.

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

- Southport Rest Home is converted from a former residential property and has a complex layout which is spread over three floors. The provider and staff had worked effectively to ensure that the layout remained suitable for people as their needs changed. For example, some carpeting had been replaced with vinyl to make it easier for people to use with their walking aids. The large conservatory at the front of the building had a new roof fitted to ensure that it didn't get too hot for people to use in the summer.
- Further adaptations and developments were planned in relation to bathing facilities for people with mobility difficulties and signage for those living with dementia.

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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Staff obtained consent for people's care and support. Staff understood the principles, of the MCA and people were supported wherever possible to make their own decisions.
- Where necessary, staff completed mental capacity assessments and the best interest decision making process was followed and documented.
- DoLS applications had been made when required.

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

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 they were always treated with dignity and respect and involved in decisions about their care. One person said, "I've been in three homes before this one and this is the best. I hope I can stay here."
- Staff spoke to people with kindness and respect throughout the inspection.
- Southport Rest Home provided accommodation and care for people from a range of cultures and backgrounds. It was clear from our observations and people's comments that the needs of each individual were considered and supported in a respectful and safe manner.

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

- People were encouraged to comment on the provision of care and were actively involved in the decision-making process. This included decisions made about their own care and proposals for the development of the service.
- The registered manager and staff discussed decisions with people and offered choices throughout the inspection. Important decisions were recorded in care records. Other discussions and decisions were recorded in the minutes of the monthly resident' meetings.
- We saw that people and their relatives were comfortable in approaching the registered manager and staff with comments and suggestions.

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their independence for as long as possible. We saw that staff monitored people, but only intervened and offered support when people requested it, or a situation became unsafe.
- Staff supported people with their personal care needs in a discrete and sensitive manner. Staff told us how important this was to people and explained how they supported people's right to privacy at all times.
- The people and relatives that we spoke with were very complimentary regarding the caring nature and approach of staff.

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's individual needs and preferences were consistently considered as part of the care planning process. Needs and preferences were reflected in the way care was provided. For example, there was a range of chair-based activities for people with limited mobility.
- Staff were aware of each person's communication needs and adapted their approach to ensure that communication was effective.
- Staff knew people's personal histories and their likes and dislikes. They used this information to hold conversations and to engage people in activities. Where people were reluctant to participate in activities, they were encouraged, but their decision was respected.
- People were involved in planning individual and group activities. For example, excursions to local facilities.

Improving care quality in response to complaints or concerns

- The home received a very low number of complaints. Only two had been received in 2018 and none in 2019. The registered manager and chair-person of the board of trustees told us this was because people were encouraged to raise any concerns at the earliest stage before they felt the need to complain. One person told us, "If you're not happy about anything, you just mention it to [Name] the manager and she'll sort it out".
- None of the people that we spoke with said that they had made a complaint recently. They each said that they would feel comfortable raising any issues with any member of staff, the registered manager or members of the board of trustees.

End of life care and support

- At the time of the inspection, nobody at the home was receiving end of life care. However, the home was accredited for this type of provision.
- Care records contained information about people's end of life wishes. We spoke briefly with a visiting relative of someone who had recently passed away. They were extremely complimentary about the care that their relative received in their final days.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered manager and staff we spoke with demonstrated their commitment to providing high-quality, person-centred care. This commitment was reflected in records and in their interactions with people.
- Both the registered manager and the chair-person of the board of trustees were open and honest about the need to continue to improve the service through investment and staff development. Records and notifications demonstrated honesty and integrity in relation to the management of the home.

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

- Each of the people that we spoke with had a clearly defined role within the home and understood their role and responsibilities. Care and ancillary staff spoke with pride about their contribution and understood how this related to regulation.
- The registered manager spoke with confidence and authority regarding their role and influence over the development of the home and the culture. They had a clear plan for further developments which was discussed regularly with the provider.
- Notifications regarding important events had been submitted as required. It was clear that the registered manager understood their responsibilities in relation to their registration with CQC.
- The registered manager and provider completed regular safety and quality audits to measure performance and generate improvements.

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

- People living at the home were involved in discussions about concerns and improvements in different ways. They also had the option to have their views communicated by an advocate if they wished. For those with different communication needs, important information was adapted to make it more accessible to them.
- Staff were supported to express their views and contribute to the development of the home at team meetings and handovers. Staff told us they could approach the registered manager, or the provider at any time.

Continuous learning and improving care; Working in partnership with others

- The registered manager placed continuous learning and improvement at the heart of their practice. They

made effective use of audits, reports and other forms of communication to monitor and improve the safety and quality of care. For example, they had changed the frequency of medicines audits and refreshed training in response to concerns regarding stock-control.

- The registered manager was actively involved in a number of local and regional networks which offered support and guidance in relation to innovation and best-practice.
- Changes to the physical environment had been discussed with people and staff and developed in accordance with best-practice. For example, the development of the garden area and the addition of another wet-room were planned and actioned in response to concerns expressed by people and staff.
- Additional partnerships had been developed to improve the experience of people living at the home. For example, a relationship had developed with a local school and children regularly visited the home to spend time with people and engage in activities.