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The Royal Elms Care Home

Inspection report

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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 Royal Elms is a residential care home providing personal and nursing care to 19 people aged 65 and over at the time of the inspection. The service can support up to 26 people. The home is in one adapted building over two floors. People accessed their rooms via a stairwell or passenger lift. There are two communal lounges, a large dining room and an outside decked area.

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

The home was clean, and improvements had been made to the décor of the home and storage of personal protective equipment (PPE). Staff were aware of the latest guidance in relation to the pandemic and wore PPE when supporting people with personal care. Staff were recruited safely and staffing levels were sufficient. The registered manager had shared further information and training around safeguarding vulnerable adults and whistleblowing with staff. Staff felt confident to raise any concerns. The safety of the premises was maintained, and bathrooms had been refurbished. Medicines were given as prescribed.

Improvements have been made to the oversight and governance of the service. Audits highlighted areas for improvement. The registered manager ensured any concerning information was reported to the appropriate professionals. People felt involved in the positive changes in the home, such as the redecoration. It was evident the registered manager had been a key person in embedding and sustaining improvements across the home.

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

Rating at last inspection (and update) The last rating for this service was inadequate (published 8 December 2020) and there were multiple breaches of regulation. 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.

This service has been in Special Measures since 8 December 2020. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

Why we inspected

This was a planned inspection based on the previous rating.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The

Royal Elms on our 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Royal Elms 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 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

Two inspectors carried out the inspection.

Service and service type

The Royal Elms 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 sought feedback from the local authority and professionals who work with the service. 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 four people who used the service and one relative about their experience of the care provided. We spoke with six members of staff including the registered manager, the deputy manager, three care workers and the chef. 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 two 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed the certificates for the electrical installation and for the passenger lift.

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 inadequate. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

At our last inspection the provider did not follow guidance for the safe storage of personal protective equipment (PPE) and did not reduce the risk of infection, spreading in the home. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

- The home was clean and tidy. Equipment was stored safely and there were specific areas for staff to put on and take off PPE.
- Staff had been given training in infection control and had been continually updated throughout the pandemic. Families have been supported to visit the home following the latest infection control guidance.
- A staff member told us, "Infection control guidance has been drummed into us."

Assessing risk, safety monitoring and management

At our last inspection, the provider did not ensure the premises was clean and free from risks to people's health and safety. Regular maintenance checks of safety equipment had not been maintained within the appropriate timescales. Guidance to support staff to manage risk, was not always documented. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

- Improvements had been made to ensure the safety of the premises was robust. A programme of redecoration had been implemented and new furnishings and equipment were in place across the home. Bathrooms had been refurbished to a good standard.
- Internal and external checks on equipment were recorded. There were two certificates missing for electrical safety and for the passenger lift. We were aware these certificates were seen at the last inspection in October 2020 and may have been mislaid. The provider immediately arranged for a contractor to service the equipment to ensure it remained safe.
- Risks to people were assessed and mitigated. Staff could describe the risks people presented.
- People and staff told us they were happy with the redecoration of the home. A staff member told us, "I've seen a massive improvement. It was shocking before, it's been neglected and since [registered manager] has

come, it's been better."

Staffing and recruitment

At our last inspection, the provider did not ensure all staff had the appropriate pre-employment checks in place. The provider did not ensure all agency workers received an appropriate induction and had not assured themselves all agency workers had the appropriate skills and experience to work at the home. This was a breach of regulation 19 (Fit and Proper Persons Employed) 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 19.

- Staff were recruited safely and had the appropriate pre-employment checks in place before employment commenced. Agency staff were no longer used at the home.
- Staffing levels were sufficient to meet the needs of people living at the home. Staff were visible throughout the inspection.
- One person told us, "There are always enough staff."

Using medicines safely

- People received their medicines as prescribed.
- Protocols were in place to ensure people received 'as required' medicines, such as medication to assist with agitation. Further recording of information was required to ensure staff used de-escalating techniques before this type of medicine were used.
- Where people used food and fluid thickeners to aid swallowing, guidance was in place, but this needed reviewing to ensure the most up to date terminology was used.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse.
- Staff had received training in safeguarding vulnerable adults and further discussions had been held to ensure staff were aware of whistle blowing procedures and how they can whistle blow without reprisal.
- A staff member told us, "I am massively confident to tell management of any concerns and they would be acted upon."

Learning lessons when things go wrong

- Accidents and incidents were recorded and reported where required.
- A relative told us they were always informed of any concerning information about their relation.
- Accidents and incidents were reviewed to reduce the opportunity for repeat occurrences.

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 inadequate. 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; 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

At our last inspection, the provider did not ensure safeguarding concerns were raised in a timely manner. The provider did not comply with their own disciplinary policy and did not assess, investigate and conclude a safeguarding investigation. The provider did not ensure all staff were given training in safeguarding vulnerable adults and whistle blowing. 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.

- The provider and the registered manager had reflected on the last inspection and implemented improvements across the home to ensure they met regulatory requirements.
- The registered manager had begun to embed improvements within the staff team and staff spoke positively of the support from the registered manager and how this had impacted upon their own well-being and had brought the staff team together.
- Any concerns were raised with the appropriate professionals promptly.
- Staff told us, "[Registered Manager] has been clear about what is expected of us in our role."

Continuous learning and improving care

At our last inspection, the provider did not have robust oversight and good governance processes in place to 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.

- The provider and registered manager had made improvements to the governance of the home.
- Audits had been improved and now captured all elements of the home such as care plans, cleanliness, recruitment and safeguarding. Where improvements were identified, actions were taken promptly.
- Feedback had been gained from staff prior to the inspection and responses were rated as good or very

good.

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

At our last inspection, the provider did not identify strategies to allow people living in the home, to continue to access communal areas of the home to reduce isolation. The provider did not assess the risks and impact this had on people living in the home. 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.

- People lived in a positive culture where person-centred care was promoted.
- People told us they had been able to choose how the home and their rooms were redecorated and this had made them feel involved.
- Care plans had been updated and were person-centred and respected the choices and values of each individual living at the home.
- Relatives had been supported to visit their relation at the home following changes to visiting guidance. This has been positive to people's well-being. One relative told us, it was important they remained involved with their relation's care throughout the pandemic and were included in the home's weekly testing which allowed them to safely visit.

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

- Feedback from staff and people living at the home was positive. The local authority had recently completed a visit to the home and found the provider to be responsive. They were pleased with the level of improvements.
- Staff were involved in staff meetings and received regular supervision.
- People us, "Its great here, I always know what is going on." and "Yes, there have been some good changes, for the better in my opinion."

Working in partnership with others

- The staff team worked with other professionals to ensure people's mental and physical well-being was regularly reviewed.