

St. Gregory's House Limited

St Gregory's House Limited

Inspection report

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Date of inspection visit:
18 June 2019
19 June 2019

Date of publication:
04 September 2019

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

St Gregory's House Limited is a residential care home providing personal and nursing care for up to 30 older people. At the time of the inspection there were 23 people living there but three of those were currently receiving treatment in hospital. The home is a large detached three storey Victorian property that has been suitably extended for its purpose.

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

We looked at medicines management and found that people's medicines were being safely managed and given as prescribed and at the correct times. The nurse in charge told us people had received their medicines at the times that they had been prescribed for. One person told us they managed their own medications and staff supported with making sure there was always enough stock.

There were 16 people sitting in the main lounge when we arrived on the first day at 6.15pm. Most of them were watching the TV, one person was reading the newspaper and two others were in conversation with staff.

There were enough numbers of staff available to meet people's needs and ensure people were monitored and kept safe. We noted that the main lounge was never left unattended by staff. Records we looked at showed people's risks of falling had been identified. Care and treatment plans informed staff how to manage these risks.

When we arrived on the first day two people were already in bed and this was because they had skin integrity risks and were having bedrest as part of their care and treatment plan. Two people were in their rooms by choice. People we spoke with told us they had no concerns were happy living at the home. One person told us, "I cannot fault the care here, there's plenty of staff when I want them."

Care and treatment plans we looked at identified people's preferences for bedtime routines and we saw records that showed people were checked on regularly through the night by staff to ensure they were safe. We also saw recorded where someone had asked not to be checked on as it disturbed their sleep.

Staff told us about changes that had been made to the evening routines in the home in February 2019 by the newly appointed registered manager. We also saw staff meeting minutes that confirmed that some routines prior to procedure changes in February may have restricted people in their preferred bedtime routines. We saw that the changes in procedures meant staff promoted a safer and more person-centred approach to people's evening routines.

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 good (published 24 August 2018). At this inspection we found the ratings have remained the same.

Why we inspected

We received concerns in relation to people not receiving their evening medications as prescribed, there not being sufficient staff for evening routines, people's falls risks not being managed and people's bedtime routines not being at times of their choice. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained the same. This is based on the findings at this inspection. We found no evidence during this inspection that people were at risk of harm from the concerns. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for St. Gregory's House Limited 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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

St Gregory's House 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. 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 team consisted of two adult social care inspectors.

Service and service type

St Gregory's House Limited is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 who had recently 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 all of the 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

During the first visit we spoke with three people living at the home, the nurse in charge, two care workers and the registered manager by phone. The following day we spoke with the nominated individual and with the registered manager again. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included two people's care records and multiple medication records and minutes from a staff meeting and recently introduced written procedures for evening routines in the home.

Is the service safe?

Our findings

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 remained the same good.

This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were managed safely and people received them when they should. We checked the quantities of medicines being held in stock for people against the records of medicines already given and found these quantities tallied. This indicated that people had not had any medicines earlier than the time prescribed.
- 'As required' (PRN) medicines stated the dose and the minimum time between doses and recorded when it had been given. The maximum number of doses to be given (for example, in a 24-hour period) was stated.
- We spoke with the registered nurse on duty who showed us how they checked the written medicine records to make sure a PRN dose had not already been given and that the prescribed medication to be given was due.
- People had received their medicines at times they were prescribed for.

Staffing and recruitment

- We saw there were adequate numbers of suitably qualified staff to meet people's needs in a timely manner. We observed staff were consistently present in the communal lounge.
- People told us they thought there were enough staff. One person told us, "If I use my call bell they [staff] respond and quite quickly."
- The registered manager, in consultation with staff, had implemented new evening procedures. These procedures allowed people more choices in ensuring their preferred evening routines were fulfilled.
- At the last inspection the provider had followed safe recruitment processes.

Assessing risk, safety monitoring and management:

- Staff identified and managed risks relating to people's care and treatment safely. Staff had recognised where changes to a person's needs had occurred and had reassessed their risks of falling.
- People's care records we looked at were current and gave guidance for staff about the actions to take to ensure their safety and the safety of the people they were supporting.
- Staff were following people's care and treatment plans and managing the risks identified. Two people who had risks identified with their skin integrity were having bed rest during our first visit.

Learning lessons when things go wrong

- The registered manager reviewed all accidents and incidents to ensure appropriate actions were taken. Records showed the appropriate treatment had been sought. The registered manager and staff reassessed

risks and, where lessons had been learned, these were shared throughout the staff team.

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 remained the same requires improvement. This was because there was not enough evidence to change or amend the current rating.

There is a new management structure in place since the registration of the new manager in February 2019. This means there will be a more consistent approach to leadership and culture. We will review the consistency of leadership at the next scheduled comprehensive inspection.

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

- The registered manager and staff team had made changes in February 2019 to the evening routines. This was to ensure a more person-centred approach to people's preferences being upheld for their evenings and preferences around bedtime.
- Two people who were in their bedrooms on the first inspection visit told us it was their choice to spend time alone in their bedrooms during the evenings. One person told us, "I prefer to watch TV in my own room." Another person said, "I'm in my bedroom because I prefer it in here. Staff are very good, polite and listen to me, I cannot fault the care here."
- The culture of the service was caring and focused on ensuring people received person-centred care that met their needs. It was evident staff knew people well and put these values into practice.
- Staff told us people were safe and they had no concerns about their care and treatment in the home.

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 service was open and honest and understood its legal responsibility and duty of candour. A range of audits were being completed and actions had been taken that supported improvements in the service.
- The registered manager regularly monitored and reviewed accidents and incidents to identify any patterns that needed to be addressed or lessons to be learned.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Staff we spoke with were happy with how the home was managed and described it as a good place to work. A staff member told us, "I made a good move coming to work here. There's always plenty of care workers and nurses. The care is good and it's a good place to work."
- Staff told us the registered manager had made a number of positive changes since coming into the home that had improved people's experiences. One member of staff said, "They [registered manager] has made quite a few changes all for the better."

- The provider used quality assurance systems to ensure safety, quality and improvement were consistently monitored.