

The Rectory Care Home Limited

The Rectory 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

The Rectory Care Home is a care home, providing care for up to 25 people who are living with dementia. At the time of the inspection there were 19 people living at the service.

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

Everyone we spoke with said they felt safe living at The Rectory. We received consistently positive feedback from people using the service, their relatives and visiting professionals. Comments included, "Life here is pretty good. The staff are lovely and get to me quickly when I need them" and "I am safe as houses here". Relatives and professionals told us, "The care home is fabulous, and the care is amazing" and "I have found this home and the staff to be inspiring and wish every home was so caring and well led".

The registered manager and deputy had assessed the risks associated with people's care and support. Staff were knowledgeable about these risks and knew what to do to minimise the potential for harm. There were systems and processes in place at the home to ensure people were protected from harm and abuse.

People were supported to have maximum choice and control of their lives and the provider supported them in the least restrictive way possible and in their best interests; the application of the policies and systems supported good practice. Staff treated people with dignity and respect and were caring and attentive.

The registered manager and staff team had good links with the local communities within which people lived. The service was very much part of the local community and neighbours told us what a great neighbour the service was.

The provider had effective systems in place to identify improvements and drive good care. The environment was safe. Effective health and safety checks were completed, and timely action taken to address any improvements. People's medicines were safely managed, pre-employment recruitment checks were undertaken and there were sufficient staff on duty.

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 Good (published 06 February 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall 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.

The overall rating for the service has remained Good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Rectory on our website at www.cqc.org.uk

Follow Up:

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 Rectory 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 Health and Social Care Act 2008.

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

The inspection was carried out by one inspector

Service and service type

The Rectory is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Rectory is a care home without] nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do

During the inspection

We spoke with 8 people who used the service about their experience of the care provided and 2 relatives during the inspection. Additionally, we spoke with 9 staff members including care and activity staff; catering and ancillary staff, the deputy manager, and the registered manager.

We reviewed a range of records. This included 3 people's care records and a sample of medication records. We looked at 2 staff files in relation to recruitment. A variety of records relating to the management of the service, including quality assurance audits, training records, key policies and meeting minutes were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. Following the inspection, we received feedback from 8 relatives and 7 professionals who work with this service.

Is the service safe?

Our findings

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

Systems and processes to safeguard people from the risk of abuse

- Everyone we spoke with told us they felt safe at The Rectory. Comments included, "Oh yes I am safe. The staff are all around" and "Everything here is just lovely". Relatives and professionals spoke highly of the service and were confident people received the care and support they required. One relative said, "I have witnessed some very kind professional and non-judgmental care by all members of staff"; another commented, "I cannot compliment The Rectory enough for all they provide for (our loved one)". A professional visitor said, "In my opinion the service is safe and well led".
- People were safe from the risks of abuse and ill treatment because staff members had received training on how to recognise and respond to concerns. Staff were confident about how to report any concerns internally and externally.
- The provider had systems in place to share information about any concerns with the appropriate agency. For example, the local authority and the Care Quality Commission, in order to keep people safe. Information was available to people, staff and relatives on how to report any concerns.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health, wellbeing and personal safety had been assessed and plans were in place to minimise these risks. These included risks related to falls, skin damage; nutrition and some behaviours.
- Staff were aware of the risks associated with people's care and knew how to support them safely. One relative said, "My (loved one) has settled in well and has become a different person. They are happy and stimulated on a daily basis. The staff are attentive..." Another relative told us how quick action was taken to address an emerging health issue for their loved one. They added, "This was sorted out immediately. I cannot compliment The Rectory enough for all they provide".
- The provider had systems in place to check the safety of the premises. Fire safety measures were in place. The provider was working to meet the recommendations from the latest fire risk assessment. The registered manager had liaised with the local fire service to provide practical training for staff. Care plans contained personal evacuation plans to make sure people could be safely evacuated in the case of an emergency.
- Potential environmental health and safety hazard had been addressed. Radiators were covered or had low surface heat to reduce the risk of burns to people. The temperature of the hot water supply was controlled and was within the 44 degrees limit recommended by the health and safety executive (HSE). Window openings on the first floor had been restricted to reduce the risk of people falling.
- The registered manager had a system for recording incidents and accidents, and these were reviewed regularly to improve practice. Learning from incidents was shared with staff through regular team meetings and during staff supervision.

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.

- People were supported in accordance with the principles of the Mental Capacity Act 2005.
- Staff, and the management team, followed best practice when assessing people's capacity to make specific decisions. They knew what to do to ensure any decisions made were in the best interests of the person concerned.

Staffing and recruitment

- People were supported by enough suitably trained staff. Staff were available to support people promptly when it was requested or needed. One person said, "I like how we all get along. All of the staff are good. They are always here to help".
- Staff said there were enough staff on duty to make sure people's needs were met and to ensure their care was not rushed. We saw the deployment of staff throughout the inspection was organised and people who required support received this in a timely and sensitive way. Staff had time to spend with people on an individual basis.
- Staff were skilled and caring and knew people well. Some people experienced periods of distress and disorientation. Care plans described how staff should support people at this time to ensure effective person-centred responses, which helped to calm the person. We saw staff engage in positive and mindful interactions which helped to reassure people and defuse situations.
- Staff had been recruited safely to ensure they were suitable to work at the service. Relevant pre-employment checks had been carried out. This included criminal record checks to make safer recruitment decisions and obtaining references from previous employers.

Using medicines safely

- People received their medicines as prescribed. However, the recording of transdermal patches would benefit from additional information to confirm the rotation of the site of application each time a patch is applied. Action was taken during the inspection to ensure this information was recorded and in line with manufacturer guidance.
- Medicines were stored safely, including medicines requiring extra security or refrigeration. There were suitable arrangements for ordering, receiving, and disposal of medicines.
- Staff completed training to ensure the safe administration of medicines and their competencies were checked to ensure they were competent to administer people's medicines.
- There were systems in place to report any medicines errors or incidents. Regular medicines audits were completed, and we saw that where issues were identified, actions for improvement had been taken and recorded.

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 supporting people living at the service to minimise the spread of infection.

- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

- The provider was supporting visits in line with the Government's latest guidance.
- There were no current restrictions on peoples' relatives and friends being able to visit people living at the service.
- Family members said they were supported to visit in a safe way and always felt welcome when visiting. Some described the lengths the staff and management team went to during lockdown to ensure they had regular contact with their loved ones.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- The service was led by a motivated registered manager and deputy. Their commitment to providing a service that promoted person-centred values, and a strong commitment to promoting independence and social inclusion was apparent. People, relatives and professionals were complimentary about the registered manager and the staff team. Comments included, "I have found this home and the staff to be inspiring and wish every home was so caring and well led"; "The care home is very well lead by (the registered manager and deputy). They are very person centred with their care... The care is exemplary" and "Communication between staff and myself is extremely impressive. I find that all staff are aware of my (loved one's) needs and do their best to communicate with each other to enhance their care".
- Staff knew people well and provided person-centred care. For example, staff knew people's preferred morning routines. We saw staff taking time with people to hold their hands, chat to them or offer reassurance.
- People were supported to enjoy hobbies and interests. We saw people taking part in various activities. If people were being cared for in bed or preferred to stay in their room, the activities coordinator visited them regularly to ensure they did not become socially isolated.
- Relatives and professionals commented on the variety of activities and how valuable they were to people's daily lives. Comments included, "The activities they provide are fabulous, not sitting in front of a TV all day unstimulated" and "The Rectory is an amazing home, they have so many events and activities for their residents, and the staff are always open to new ideas".
- The adaptation, design and decoration of the premises assisted people's independence and well-being. There was good signage around the building, along with colours symbols and pictures to help people to recognise various areas. Particular attention had been paid to the external space which provided a range of bright and interesting areas for people to use.

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

- The service had a clear staffing structure, roles and responsibilities. Staff said they worked as a team and felt well supported by the registered manager. Comments included, "(The manager and deputy) are great and you can go to them anytime, they are very approachable. It is a good place to work" and "This is such a great place and has a lovely vibe. This is the most enjoyable job I've had".
- Relatives and professionals expressed their confidence in the management of the service. One told us, "The Rectory is extremely well lead... (The registered manager) is well supported by excellent managers and

care staff. It has been a privilege to get to know everybody and to feel that I have been extremely well supported myself by all staff" and "All my dealings with (the registered manager) have always been professional and she has shown compassion in helping her new residents through a very stressful time".

- The registered manager and provider had effective oversight of the safety and quality of care provision in the service. Information was reviewed to identify shortfalls and drive improvement. There were regular audits which included the environment, health and safety and the delivery of care.

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 aware of their responsibility to act transparently and apologise when things went wrong.
- When accidents or incidents had occurred, relatives or those acting on their behalf were informed as soon as possible. No concerns were raised about communication when we spoke with people's relatives or representatives. One relative said, "Communication between staff and myself is extremely impressive. I find that all staff are aware of my (loved one's) needs and do their best to communicate with each other to enhance their care".
- The registered manager submitted statutory notifications to the CQC in line with requirements. Statutory notifications are important because they tell us about notifiable incidents and help us to monitor the services we regulate.

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

- The service engaged with stakeholders and used feedback to drive improvement in the service. For example, relatives had completed satisfaction surveys late in 2022, which showed a high level of satisfaction in all areas.
- Due to the nature of people's health, some people would not be able to complete satisfaction surveys. Resident's meetings were held to give people an opportunity to share their experiences and ideas for any areas for improvement in an informal way. Activities and the menus were discussed, and people's suggestions were acted on. For example, a fish and chip supper was arranged following a suggestion from a person using the service. Records of the last meeting in December 2022 showed people were happy at The Rectory.
- The service supported people with a range of abilities and equality characteristics. People, and their representatives where appropriate, were involved with their care and decision making, with the support of staff and other professionals where required.

Continuous learning and improving care

- The registered manager and provider had oversight of accidents, incidents and safeguarding to help identify themes and trends and prevent a recurrence.
- The provider undertook quality assurance visits at the service to review the quality of the service. Where shortfalls had been identified, the registered manager and deputy manager worked to address these in a timely way.

Working in partnership with others

- The registered manager and staff team had established and maintained good relationships and links with health and social care professionals as well as the local community around them. All professionals contacted were positive about this service and how the registered manager, deputy and staff worked to deliver person centred care. Comments included, "It is one of the few care homes that I would recommend for anyone needing an enhanced residential environment" and "In my opinion the service is safe and well

led".

- People benefitted from the close working relationship with external professionals. The service sought advice when needed. This included the GP, community nurses and the mental health team.
- The registered manager and the team had established a Dementia Café in the grounds of the garden to support local people in the community and their families living with dementia. The Café was open one day a week and provided an opportunity for local people to meet and get support and have some sociable time.
- Several neighbours of the service shared their feedback of this service. People living locally, including children, were invited to celebrate special occasions, such as Halloween and Christmas. Comments from neighbours included, "It's a pleasure to be neighbours" and "You spoil us with our favourite things. Thank you for letting us visit".