

The Star Nursing Home

The Star Nursing Home

Inspection report

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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: Star Nursing Home provides support with nursing and personal care for older people, some of whom live with dementia. Star Nursing Home accommodates 30 people in one adapted building. At the time of the inspection there were 27 people receiving personal care.

People's experience of using this service:

People were happy at the service and were supported by staff who knew them well. People's privacy and dignity was promoted. People were supported to make decisions about their care. People's care plans were person centred and gave staff information on how to support them.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The recruitment process and training systems meant people were supported by staff who were suitable to work in a care setting and equipped for their role. People's felt there were enough staff to meet their needs. On the day of inspection people had their needs met in a timely fashion.

Staff received appropriate training and were supported to develop. Staff received regular supervisions and staff meetings. Staff felt supported by the registered manager.

People had their individual risks assessed and reviewed regularly or when required. People received their medicines when needed and these were managed safely. People told us that personal care needs were met in a way they liked. People confirmed staff were kind and they were confident to speak up if they had any concerns.

People had access to activities, their choices were promoted, relatives were positive about the way the care was provided. People were supported to express their views. People and their relatives described the staff as kind and caring.

People had access to other professionals to ensure they received the right care and support.

The provider had systems in place to help them identify and resolve any issues in the home. The registered manager was known throughout the home and people and staff were positive about them. All staff were clear about what was expected of them and any lessons learned from events or incidents were shared with staff.

More information about our inspection findings is in the full report.

The last rating for this service was good (published 03 November 2016).

Why we inspected:

This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received.

Follow up: We will continue to monitor the service to ensure it provides safe and effective care. We will plan further inspections in the future.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

The Star Nursing 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. 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 was carried out by one inspector.

Service and service type:

The Star Nursing Home 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 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 site visit took place on 23 July 2019.

The inspection was unannounced.

What we did:

Our inspection was informed by evidence we already held about the service. We also checked for feedback we received from members of the public and local authorities.

We asked the service to complete a Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection

During the inspection

We spoke with the registered manager, four staff members, two people who used the service, four relatives

and two visiting professionals

We reviewed two care records, medicines administration records and other records about the management of the service.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. One relative told us, "I can relax when I am at home because my [relative] is safe and looked after by caring staff."
- Staff had a good understanding of safeguarding and reporting concerns. One staff told us, "I would report and document any concerns."
- Staff received safeguarding training and safeguarding was discussed with staff in supervisions and team meetings.
- A safeguarding policy was in place at the service.
- People had their individual evacuation needs assessed. Fire drills were practised by staff and they were aware of how to evacuate people in case of a fire.
- Accidents and incidents were reviewed, and actions taken to ensure people stayed safe. This was reviewed by the registered manager to enable them to identify themes and trends.

Staffing and recruitment

- Staff felt there were enough staff to meet people's needs. On the day of the inspection we saw staff being quick to respond to people's needs and call bells were answered promptly. The registered manager explained they will review and depending on people's needs will implement extra staff if needed.
- Safe and effective recruitment practices were in place to help ensure that all staff were of good character, physically and mentally fit for the roles they performed. All staff had been through recruitment procedures which involved obtaining satisfactory references and background checks with the Disclosure and Barring Service (DBS) before they were employed by the service.

Preventing and controlling infection

- Systems were in place to ensure infection control was sufficiently managed. The environment was clean and tidy throughout the day. We noted any spillages were quickly attended to.
- People were protected from the risk of infections, staff received training and followed guidance. This included the wearing of personal protective equipment, such as gloves and aprons.

Using medicines safely

- People's medicines were administered, stored and recorded safely.
- Regular checks and audits were completed to ensure staff followed best practice.
- People received their medicines when they needed them. Staff were administering medicines in a calm and discreet manner.

Learning lessons when things go wrong

- The registered manager took appropriate actions following incidents and learning was shared with staff. Risk assessments and care plans were updated after accidents and incidents to ensure that the measures in place were effective.
- The registered manager said that lessons learned were shared with staff at meetings and supervision. They also explained that positive lessons were also shared.

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The building was not purpose built however the staff and registered manager utilised the building well. However, we noted due to space constraints there were not enough seated dining spaces at lunch to ensure everyone could eat at a table if this was their choice. However, this was managed well by staff. Some people were supported by staff in comfortable armchairs in the lounge to have their dinner.
- People had easy access to the lift to enable them to move around freely between floors. There was communal space which we saw people using.
- There was access to the garden area. We saw one person who enjoyed going for walks liked to stroll out in to the garden.

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

- People told us the food was good. One person said, "The food is nice." Relatives told us that the food was good.
- People were asked about food choices by the chef each day and the chef used pictures to support people with their choice.
- Tables were set ahead of the meal and drinks were offered. Some people had changed their mind about the food they wanted, and this was not a problem. The chef told us, "There are always alternatives for people."
- People were given support in a kind and patient way if they needed help to eat. Staff chatted with people while they supported them.
- Allergies, dietary needs and weight changes were shared with the kitchen staff. Staff recorded people's food and drink intake where people were assessed as being at risk of not eating or drinking enough.
- Snacks and drinks were available and offered regularly to people.
- On the day we inspected the weather temperature was hot. However, measures were in place to keep people cool, they included offering lots of fluids and ice lollies were available.

Supporting people to live healthier lives, access healthcare services and support

- People were supported by different health and social care professionals. Staff supported people with this as needed. This included hospital and opticians. There was a regular GP visit.
- People's changes in their health were documented and staff were aware of these.
- We spoke with a social worker and a discharge nurse. They told us this was a good nursing home and gave positive outcomes for people's care. For example, one person who had required four people to move them due to their behaviour. Following their admission to the Star Nursing Home, the staff soon recognised they

were in pain. Pain relief is now given before any attempt to move the person. This had a huge impact on the way the person felt and only requires two staff with moving support. One professional said, "There is good nursing care here."

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.

- People were encouraged to make their own choices and decisions. Staff offered choices for people even when they had limited ability to communicate. One staff member said, "If they don't understand the question, then you simplify the question, break it down in ways to help them understand and make a decision."
- People had their capacity assessed in relation to important decisions about their care. Best interest decisions were recorded. There was further work underway to ensure that all elements of a person's needs were captured in the assessment and decision-making process.
- DoLS applications were made appropriately to ensure people's rights were respected while promoting their welfare.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People, and their relatives where appropriate, were involved in planning care. One person said, "They talk to me about my care." A relative said, "We talked about the care, there is really good communication from the staff. We are involved and have the contact numbers should we need to call."
- People's choices were reflected in their care plans and we saw staff giving people choices throughout the day. For example, people were asked about the food and drinks they wanted. Staff took the time to engage and explain to people what was happening.

Staff support: induction, training, skills and experience

- Staff received an induction when starting at the service. One staff member told us, "I had a good induction and the training is really good. I am being supported to complete my nursing degree." The registered manager told us they were supporting two staff to complete their nursing assistant course. They also explained the staff were being supported with Mathematics and English courses to support them with their training."
- Regular training, specific to their role, was delivered and refreshed when needed. Staff felt they had enough training but could ask for more if they felt they needed it. Staff told us that their competency was checked after receiving training.
- Staff received supervision and felt supported. Supervisions were recorded as happening regularly. All staff told us that they could go to the registered manager at any time. There were champions in wound care, end of life care, health and safety, dignity and care, safeguarding, Infection control and five dementia

champions. Champions shared best practice as part of the champion role to ensure all staff were up to date with best practice.

Staff working with other agencies to provide consistent, effective, timely care

- People were supported by staff who knew them well and this helped to ensure care delivered met people's needs consistently in a way they liked.
- People told us that staff supported them when they wanted to be supported.

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People were treated with respect and kindness. Staff spoke with people in a way that demonstrated they respected them. One person said, "Staff are kind and caring." A relative told us, "In the three years [name] has been here they have never been in pain. They eat and drink well. They always look clean and well dressed. Staff are helpful and always welcome me."
- A relative had asked to speak with the inspector as they felt the standard and quality of the care was second to none. They told us about their past experience that had impacted on the whole family in such a negative way. However, they explained that since their relative had moved into The Star Nursing Home their experience was now very positive. The relative told us, "We think it's a beautiful place no complaints. It feels very homely. We are happy because of the good care. I feel like we are part of a family."
- Staff were attentive to people. People told us that staff were kind and friendly. The atmosphere was homely. We saw several examples of positive interactions and staff demonstrated they knew people well.
- We did see one person who was supported to move from a chair, to a wheel chair. This was done with the use of a standing hoist. However, the person was not supported in a caring way by staff. We spoke with the registered manager about this who told us they would address this with staff and will implement procedures to ensure this is not repeated.
- People and their relatives told us that their relationships were respected. Visitors were welcomed into the home. One relative told us, "The care here is great."
- People's life histories, religion or cultural beliefs, hobbies and interests were considered by the staff team. This was documented so that staff could speak with people about what was important to them.

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

- Although there were a lot of people who lacked capacity and were unable to express their views as they would have liked. Staff understood phrases and gestures and used pictures and hand gestures to support people's views about their care. Staff told us that care was person centred and delivered in accordance with people's wishes, choices and preferences.
- Surveys completed were positive. One read, "What can I say, Staff do a wonderful job and I thank them for it."
- Staff were heard asking people for their choices throughout the inspection.
- Families were involved with the care reviews. Care plans were person centred and had details of what people liked and did not like. Care plans detailed who the person was and what they liked to do.
- People and their relatives told us that they felt involved in planning their care and it was delivered how they wanted it to be.

Respecting and promoting people's privacy, dignity and independence

- Staff knocked on doors and were discreet when supporting people.
- People who needed support were dressed appropriately. People who needed assistance with continence products or using the toilet, received this support in a kind and dignified way.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received care and support as they liked it. One relative said, "We sat down and discussed all of [name] needs."
- Care plans detailed people`s preferences, likes and dislikes. For example, their food likes and dislikes. Staff knew what people liked.
- People had opportunities for social interaction. One person said, "We like completing word searches."
- There were a range of activities provided to people and these included, musical entertainers, outside trips, arts and crafts and reminiscing. The activity coordinator said, "They all love music."
- The activity coordinator told us they celebrate different events and had recently looked at Ramadan and people had tried polish food. They said, "We celebrate cultural differences."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Information for people was available in different formats such as large print, pictorial prompts, different languages and easy read. Information was given to people in different ways to enable their understanding.

Improving care quality in response to complaints or concerns

- Complaints were responded to appropriately. This information was shared with the staff team.
- People and their relatives told us that they could speak to the registered manager or a member of staff if they needed to. One relative said, "I can always see [registered manager] we have a regular family meeting."
- Complaints were monitored to help them address any themes and trends.

End of life care and support

- The service offered end of life care that supported people with advance care decisions to ensure their wishes were met. When people were nearing the end of their lives, care plans were used to guide staff when supporting people.
- Feedback from relatives about support from staff during the time their family members were receiving end of life care were positive. Feedback from one relative said, 'We would like to thank you for all your hard work, commitment and care for [name]. Our family are so grateful to have received the professional care for our [relative].'

- The registered manager provides a letter to relatives that gives guidance on what to do next. This includes contact details to support the relatives with the steps they will need to take.

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 good. At this inspection this key question has remained the same. This meant 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; and how the provider understands and acts on duty of candour responsibility

- Relatives praised the registered manager for their leadership and having people`s best interests at heart. One relative said, "[Registered manager] is wonderful. The communication here is very good."
- Staff told us the registered manager was very visible about the service. Staff felt listened to and told us the registered manager's door was always open if they needed support.
- Staff echoed the registered manager`s vision and values about providing personalised care and support to people.

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

- There were clearly defined roles for staff working in the home. Staff had clear lines of responsibilities to effectively manage all aspects of the service. Staff had handovers at the start of their shifts.
- The registered manager is supporting staff to develop. For example, one staff member is in the process of joining The Open University to work towards a Nurse Qualification.
- The registered manager is working with The Open University and Anglian Ruskin University to promote staff to become 'Nursing Associates'. The role of the nursing associate is designed to help bridge the gap between health and care assistants and registered nurses.
- The registered manager monitored how staff fulfilled their role.
- Staff told us they felt valued and listened to by their managers. Staff had one to one support appropriate for their job roles.
- Staff received the appropriate support to acquire and maintain skills and abilities to provide people with effective care and treatment.
- Accidents and incidents were used as an opportunity for learning and improving. For example, discussion were held at team meetings and one to one sessions.

Engaging and involving people using the service, the public and staff. Working in partnership with others

- There were opportunities for people who used the service and their representatives to share their views about the quality of the service provided. People told us there were regular meetings at the home where managers as well as staff attended.
- Surveys were sent out biannually to people, relatives and staff to gather feedback about the quality of the service provided.

- There had been an introduction of the sex and relationship policy which supported and respected people developing relationships.
- The provider recognises the importance of enabling people to manage their sexuality needs. This included making sure people had access to education and information to help them develop and maintain relationships and express their sexuality.