

Castlebar Healthcare Limited

Castlebar Care Home

Inspection report

46 Sydenham Hill
Sydenham
London
SE26 6LU

Tel: 02082996384

Website: www.excelcareholdings.com

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Inspected but not rated

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Castlebar Care Home is a 'care home' registered to provide nursing and personal care for people age 65 and over and people living with dementia. The care home can accommodate up to 59 people across three separate floors, each of which has separate adapted facilities. At the time of inspection there were 41 people living at the home.

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

People and their relatives were involved in care planning, assessments and reviews of care. This process allowed people and their relatives to make decisions regarding their care and support needs.

People and their relatives gave positive feedback about the service and they praised staff and the management team for their compassionate and effective communication. People and their relatives told us care workers were kind and provided care and support in the way they chose.

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.

There was a new registered manager in post since the last inspection. They had management oversight of the service through monitoring the quality of care and by completing a range of checks and audits. These were reviewed by senior managers each month to ensure they were of a good standard.

People were kept safe as there were robust systems in place to ensure safe infection control procedures were followed. These practices were regularly discussed, with updates and reminders being shared across the staff team.

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 requires improvement (published 8 November 2019) 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 person-centred care, good governance and staffing. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Caring and Well-led which contain those requirements.

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 coronavirus and other infection outbreaks effectively.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

Follow up

We will continue to monitor information we receive about the service. If we receive any concerning information we may return to 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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection.

Details are in our safe findings below.

Inspected but not rated

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Castlebar 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.

Inspection team

One inspector, an inspection manager and an Expert by Experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Castlebar Care Home 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.

Notice of inspection

This inspection was announced. We gave the service 72 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

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 health and social care professionals who work with the service. We spoke with one health and social care professional who regularly visits 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 the registered manager, two senior managers, one registered nurse, two care workers and the life style co-ordinator. We also spoke with one person. We reviewed a range of records. This included quality assurance and audit records and records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found for example, quality of care and monitoring checks. We spoke with eight relatives about their experience of the care provided and management of the service.

Is the service safe?

Our findings

S5 How well are people protected by the prevention and control of infection?

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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 could be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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 requires improvement. At this inspection this key question has now improved to good. 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 and their relatives said staff were kind and compassionate and provided them with help when they needed.
- Staff delivered care to people that met their individual needs. People shared their views about the support they received with us. Comments from relatives included, "We'd like to say a big thank you to all the staff at Castlebar who looked after [family member] for the short time they were with you. Treated with compassion and dignity, and for that we are truly grateful." And, "I feel that the carers show respect by always referring to [family member] by their first name, which they like. They always seem to deal with any matter respectfully."

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

- Staff supported people to contribute to a review of their care and support needs. Relatives were invited to care planning meetings with the person's consent.
- People had a review of their care to ensure the support provided met their needs. Comments from relatives included, "To date we've had two care plan reviews and there's another one scheduled for next Monday. I feel this is very good" and "My [family member's] care plan was reviewed six weeks ago and it also covered things like end-of-life, Covid-19 needs and power of attorney."
- The registered manager confirmed that all relatives were now involved in people's care planning because there was an understanding that people and their relatives should be involved in making decisions about their care.
- Staff provided people with opportunities to maintain contact with relatives and people that were important to them. A relative said, "The garden visits were well managed and safe with full PPE and social distancing maintained. My temperature was taken with Track and Trace details before going through to the gazebo."
- People were supported to arrange private, daily video calls with their relatives which helped them to maintain their relationships with loved ones during lockdown restrictions on visitors.

Respecting and promoting people's privacy, dignity and independence; respecting equality and diversity

- The registered manager arranged person centred training for staff. This helped them to understand people's individual needs and to provide compassionate care. Staff told us they had implemented learning from this training and one member of staff said, "I always respect people's dignity. I always knock on people's door and ask them if I can come in. If they say they don't want to do anything I offer them a choice of activities, but we respect their choices." We observed staff spoke with people in a calm and respectful

manner and people appeared relaxed in their presence.

- Staff ensured care and support was carried out so people's dignity was maintained. This ensured people were comfortable receiving care from staff. Relatives said, "Dignity and respect are supported well, for example, they always address [family member] appropriately and appeared well dressed" and "Privacy is also respected, for example they will deliver personal care in private, even hoisting residents in the communal areas behind curtains. I have never been aware of anything done to undermine privacy."
- People's individual cultural needs were identified and respected by staff. The service had celebrated Black history month. People had the opportunity to explore Black culture, books, documentaries and had a buffet meal tasting foods from around the world. A tea party was organised to celebrate Jamaican Independence Day on 6 August.

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 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.

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

- People were complimentary about the staff and the overall management of the service. They felt this had improved since the last inspection. People and their relatives knew which member of the management team to contact if they had concerns. Relatives said, "I would recommend this home because the care is excellent." And, "I would recommend this home. It is heartening to see issues being addressed. I feel that it's all been absolutely amazing and it's the best place for [family member] to live."
- People and their relatives positive feedback showed staff attitudes towards providing care had positively improved which had helped to achieve good outcomes for people. People and their relatives were comfortable to raise any concerns with staff or the registered manager and were confident any concerns would be dealt with to resolve their concerns.
- Team meetings provided staff with the opportunity to share their views and knowledge or express any concerns they had. All team meetings showed that staff were engaged and had an opportunity to freely share their opinions. Records of meetings showed there were discussions about care plan review meetings, training, COVID-19 and infection control procedures.

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

- The provider had monitoring systems in place to check the quality and safety of the service. The registered manager and senior managers had followed the providers quality assurance processes to ensure audits were completed and identified any concerns with the care and support provided to people. Checks carried out included staffing observations, staff uniforms, usage and supplies of personal protective equipment (PPE).
- The registered manager demonstrated they had ownership and oversight of the quality of care provided and of the management of the service. The registered manager shared with us the quality checks they completed, the outcomes and the actions taken to resolve any issues that was identified. This helped the registered manager to be aware of each aspect of the service.
- People and their relatives commented that the service was well managed. A relative said, "It all seems to be well led, busy, positive, happy and with an open culture with carers prepared to feedback any information requested."
- The registered manager completed the provider's daily monitoring report to record any COVID-19 updates, maintenance issues, IT issues, safeguarding allegations, incidents and accidents and complaints. Records showed any concerns with the quality of care were identified, managed and shared with staff to

drive improvements.

- Assessments were completed on staffing levels to meet people's individual needs. During our observations we noted there were enough staff, and when people needed individual support, this was provided. To help improve the service, the registered manager sought advice and support from the relevant health and social care professionals to help ensure people received good quality care.

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

- The registered manager arranged regular relatives and residents' meetings to discuss issues related to the running of the home, activities and safe visiting. This helped to keep people and relatives involved and updated about the home, especially during challenging times at the peak of the pandemic.
- The service sought feedback from people and relatives by asking them for their views and opinions of the quality of care at the service. The most recent survey results showed that people and relatives were pleased with the care and support. Comments from the survey included, 'Very happy with Castlebar', 'Clear and transparent communication and being kept updated throughout' and 'I think the staff have been amazing and I have had no worry that my [family member] has been kept safe and cared for in these worrying times.'
- Some feedback raised issues related to clothing sometimes getting mixed up, a suggestion made for staff to incorporate different methods of communication outside of office hours. The registered manager showed us how they communicated with people and relatives and would continue to improve this in line with people's comments.
- Some relatives told us they would like better information in regard to visiting times, receiving the newsletters and about the Resident of the Day scheme. The registered manager and senior managers were aware of this feedback and continued to act to resolve these concerns.
- The registered manager understood relatives concerns about their loved one's health, care and support and in response arranged online webinars to inform relatives of aspects of people's care. This included safeguarding adults' processes and Deprivation of Liberty Safeguards (DoLS). DoLS ensures 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 Mental Capacity Act 2005 (MCA).

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 and provider understood their responsibilities to be open, honest and transparent and to share information when concerns were raised or when things went wrong. A health and social care professional told us, "[The registered manager] has made improvements to the service and we have seen those improvements overall."
- People and relatives were kept informed when people's health and support needs changed especially if they contracted COVID-19. Contact was made through emails, online video call meetings, newsletters and letters to relatives to keep them informed and provide any necessary reassurance.
- The registered manager ensured appropriate notifications were sent to CQC after significant incidents occurred.

Continuous learning and improving care

- The provider had a commitment to continuous learning at the service. The registered manager had identified some new areas for improvement which included providing support for relatives relating to the COVID-19 pandemic and associated restrictions.

Working in partnership with others

- Staff worked in partnership with health and social care professionals so people accessed consistent care

and advice when required.

- Records showed that staff frequently contacted health and social care services when required during the Covid-19 pandemic for support. The registered manager also attended regular virtual meetings with the local authority for further advice and support.
- The homes lifestyle coordinator was experienced in developing and maintaining strong links with the local community. Local school children wrote letters to people because they were unable to visit the service. This ensured people remained connected to their local communities despite the restrictions on visitors to the service.