

Pro Care Homes Limited

The Sylvester Care Centre

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 well-led?

Good ●

Summary of findings

Overall summary

About the service

The Sylvester Care Centre is a care home providing personal care to 25 people who live with dementia and other mental health conditions. There is passenger lift access to all floors and sufficient bathing facilities to meet people's needs. The Sylvester Care Centre will be referred to as Sylvester within this report. At the time of the inspection there were 24 people who lived at the home.

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

Designated staff kept the building clean and tidy and maintenance checks were in place. Staff were seen to wear appropriate personal protective equipment (PPE) as latest guidance stated. There were sufficient staff to meet people's care needs. Staff were employed following a thorough recruitment process. Safeguarding training was mandatory and with regular updates, staff were aware of the processes to follow to enable people to be safe. Risks were assessed and carefully monitored to ensure individuals safety and promoted their independence within a risk framework. People received their medicines safely.

The registered manager had a training programme to support staff to improve their skills and knowledge. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. The registered manager had good systems to reduce the risk of malnutrition and monitor people's food and drink intake to ensure people received appropriate care and support.

The registered manager had auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Surveys had recently been sent out to people, relatives and health and social care professionals. Responses had all been positive. Quality assurance systems ensured people were able to give their views of the service verbally in structured 'resident meetings'. One person said, "You can talk to [registered manager] and if I suggest something at the meetings they are seen to." People were happy with the way the home was managed and staff felt valued and enjoyed working at Sylvester. The registered manager provided an open, inclusive environment. People, relatives and staff told us the registered manager was approachable and very supportive. A relative said, "They have great staff and such a caring, compassionate manager in charge."

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 29 January 2020).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

We found no evidence during this inspection that people were at risk of harm. Please see the safe, effective and well-led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating has remained good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Sylvester Care Centre 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 effective?

Good ●

The service was effective

Details are in our effective findings below

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Sylvester Care Centre

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

The inspection was carried out by 1 inspector.

Service and service type

Sylvester Care Centre 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

This inspection was unannounced. Inspection activity started on 10 January 2023 and ended on 14 January 2023.

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 commissioners who work with the service. We also looked at information we had received and held on our system about the home, this included notifications sent to us by the provider and information passed to us by members of the public. The provider did not complete the required Provider Information Return (PIR). This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who lived at Sylvester, 4 members of staff the registered manager and area manager. In addition, we spoke with a visiting relative at the time of the inspection visit. We observed staff interaction with people, also, we reviewed a range of records. These included care records of 2 people, medication records, and 2 staff files in relation to recruitment. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at the quality assurance systems the provider had in place and staff training records.

Is the service safe?

Our findings

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

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

Using medicines safely

- Records for the receipt, administration and disposal of medicines were kept. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required. We observed medication being administered at breakfast and lunch time. People received their medication safely and at the right time. A staff member said, "No one gives out medication unless trained and competencies are regularly updated."
- The registered manager had good systems to manage medicines safely. Also they had auditing processes to monitor medicines and identify any issues and act upon them so that people were kept safe. We confirmed this by looking at records and talking with staff.

Staffing and recruitment

- Staff recruitment processes were robust. Pre-employment checks were completed to help ensure suitable people were employed. One staff member said, "When I started here all checks for my employment were done before starting work it was very thorough."
- Sufficient numbers of staff were on duty to support people's care and social needs and promote their independence. For instance, at the time of the visit a person had to go out to meet family and this was accommodated by a member of staff accompanying them. A staff member said, "We have enough staff to do this if it is needed." People we spoke with told us they felt safe with the number of staff around to help them. One person said, "I feel relaxed knowing there is plenty of staff around."

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and confident with staff that cared for them.
- There were effective safeguarding processes in place. The management team and staff had a good understanding of safeguarding people. They understood their responsibilities for keeping people safe and the processes for reporting any concerns.
- Staff told us they had received training in areas of safeguarding adults which was regularly updated. Records confirmed this.

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

- The registered manager had good processes in place to manage people's safety and reduce risks. Risks to people and the service were assessed and managed well. These included for example, medication and nutrition. This helped to protect people's safety.
- The registered manager reviewed incidents as part of lessons learned, to ensure risks were assessed to prevent reoccurrence where possible.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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.
- The provider was making sure infection outbreaks can be effectively prevented or managed. The provider was facilitating safe visiting in line with government guidance. This meant people could visit their relatives all days of the week in line with government guidance.

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

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

- People's needs and choices were assessed to ensure their care, treatment and support was delivered in line with current legislation, standards and evidence-based practice to achieve effective outcomes. Assessments from health and social care professionals were also used to plan effective care. The views of the people were also considered, care records evidenced this. A staff member said, "We aim to support people and promote as much independence for them."
- People's care records reflected their current care and support requirements and they were regularly reviewed. Care records we looked at confirmed this.

Staff support: induction, training, skills and experience

- Staff were competent and knowledgeable and access to training programmes was good. For instance, a staff member told us they were always supported should they wish to enhance their skills by undertaking external training to support their role. The registered manager made sure staff had a range of appropriate training, supervision and support to carry out their role effectively. Training compliance was monitored to ensure this was carried out in a timely way.
- A formal induction process was in place when staff commenced work. Staff told us it had provided a good first understanding in care, familiarisation with processes and enable them to be confident to carry out their role at Sylvester.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported with their healthcare needs. Staff had developed relationships with other agencies and professionals to provide a flexible and effective service.
- People were provided with meals of quality and choice. Comments from people were positive and included, "Yes love the food and choices."
- The registered manager had good systems to reduce the risk of malnutrition and manage people's food intake. They continued to focus on helping people to improve their nutrition in ways that offered choice and maximised their independence. For example, enabling people to choose meals and set up the dining room.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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.

- Staff had received training and understood the relevant requirements of the MCA. Staff confirmed they asked for people's consent before providing support, explaining the reasons behind this and giving people enough time to think about their decision before taking action.
- People's capacity to make decisions was considered as part of the assessment process. We saw evidence of this in care plans.
- The registered manager knew the process to submit applications for DoLS authorisations, as appropriate however none were required at the time of the inspection.

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

- Accommodation was accessible, safe and homely. Bathrooms could accommodate people who required support with moving and transferring to the bath.
- A plan of refurbishment for the premises was being developed One person said, "It's an old building but its homely. We know it is being improved by redecoration and new furnishings."
- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. We saw good examples of this where people had put up family pictures and artwork that were special and individual to them.

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 the key question as good. At this inspection, this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

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

- There was a positive culture at Sylvester which focussed on providing people with high standards of support to help them be as independent as possible. One person said, "I enjoy going out on my own."
- Staff told us they felt supported and valued by the registered manager. A staff member said, "We have the best manager, [registered manager] is supportive and kind to everyone."
- Staff and people spoken with described a caring, relaxed environment to live and work.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving 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 had good auditing systems to maintain ongoing oversight and continued development of Sylvester. They had systems in place to address any issues or shortfalls to improve the home. Audits included, medication, care records maintenance and infection control.
- The registered manager encouraged candour through openness. The registered manager and staff were clear about their roles, and understanding of quality performance, risks and regulatory requirements. Duty of candour was understood by the management team. It was clear if any complaints were made, they would be listened to, and their concerns and worries would be investigated.

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

- The registered manager encouraged people to provide their views and about how the home was performing. For example recent surveys had been sent to relatives, health and social care professionals and staff. All returned responses were positive. One survey said, 'They always show very good care to residents, keep it up.'
- The management team held 'resident' and staff meetings on a regular basis for the exchanging of views and ideas. A relative said, "They have good meetings and any suggestions are discussed and if it improves the home, they do it."

Working in partnership with others

- Records highlighted advice and guidance was sought from health and social care professionals when required.
- The registered manager worked with other agencies and relatives to share good practice and enhance

care delivery.