

Bupa Care Homes (ANS) Limited

# Havelock Court Care Home

## Inspection report

6 Wynne Road  
Stockwell  
London  
SW9 0BB

Tel: 02079249236

Date of inspection visit:  
07 July 2016

Date of publication:  
05 August 2016

## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of Havelock Court Care Home on 23 and 24 March 2016 at which we found a breach of regulation. At this inspection, we found that people had not always received safe and appropriate care. The service did not always have sufficient staff on duty to meet people's needs safely. The procedures for the service to follow in an emergency to ensure there were sufficient and suitable staff deployed to cover both emergency and the routine work of the service were not robust.

Due to our concerns and the breach of regulation we issued a warning notice which the provider and the registered manager were required to comply with by 30 June 2016.

We undertook a focused inspection on 7 July 2016 to check that the service now met the legal requirement. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Havelock Court Care Home' on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Havelock Court Care Home is a care home with nursing. The service provides personal care and nursing care to older people, those living with dementia and mental ill health. The service can accommodate up to 60 adults. 58 people were using the service at our inspection on 7 July 2016.

At our focused inspection on 7 July 2016, we found the registered manager and provider had followed their plan and met the legal requirements in relation to staffing. We saw staffing levels had been reviewed and increased. The registered manager ensured there were sufficient staff to meet people's needs safely. Staff responded to call bells and people's requests promptly and spent time engaging people in conversation and activities. There were enough staff to enable them to complete their duties in an unhurried manner.

At our previous comprehensive inspection on 23 and 24 March 2016, we found some staff felt unable to approach the registered manager and felt unsupported in their role. The staff told us they felt their concerns were not taken seriously. At this inspection of 7 July 2016, we found the provider and the registered manager had increased their engagement with staff. Staff told us they felt their relationship with the registered manager and management continued to improve and said their concerns were being addressed.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

We found that action had been taken to improve the safety of people using the service. Improvements had been made to ensure people received support safely and in a timely manner. Staffing levels had been increased and there was a consistent staff team employed at the service. Staff responded promptly to people's requests and call bells were answered in a timely manner.

The registered manager and provider were now meeting legal requirements with regards to staffing. While improvements had been made we have not revised the rating for this key question because to do so requires a record of consistent good practice over time. We will review our rating for 'safe' at the next comprehensive inspection.

**Requires Improvement** ●

### Is the service well-led?

We found that action had been taken to strengthen the leadership of the service. Staff morale had improved and staff felt they were being listened to. The provider and registered manager were engaged in various staff engagement processes to ensure staff's concerns were raised and acted on in a timely and fair manner.

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

**Requires Improvement** ●

# Havelock Court Care Home

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Havelock Court Care Home on 7 July 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the registered manager and the provider after our comprehensive inspection on 23 and 24 March 2016 had been made. We inspected the service against two of the five questions we ask about services: Is the service safe? Is the service well-led? This is because the service was not meeting some legal requirements in relation to these questions.

The inspection was undertaken by one inspector. Before our inspection we reviewed the information we held about the service. This included the registered manager and provider's action plan, which set out the action they would take to meet legal requirements. We also reviewed the information we held about the service including any statutory notifications received. A statutory notification is information about important events which the provider is required to send us by law. We used this information to help us plan the inspection.

During our inspection, we spoke with five people using the service and two relatives. We also spoke with the registered manager, deputy manager, two nurses and five care staff. We looked at three people's care records which included assessments, care plans and risk assessments.

We undertook general observations and formal observations using the short observation framework for inspections (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

Since our comprehensive inspection on 23 and 24 March 2016 we were in contact with the senior management to share feedback about our visit to the service and progress made against service improvement plans.

# Is the service safe?

## Our findings

At our previous inspection on 23 and 24 March 2016 we found the provider and the registered manager did not ensure they were sufficient staff on duty to meet people's needs safely. The provider's system to cover staff emergency and routine work at the services was not effective which led to insufficient staffing levels at the service. People had not received the support they required which caused them and others discomfort. Staff did not always respond promptly to people's requests and calls bells in a timely manner.

On this inspection of 7 July 2016, we saw that since our last inspection a review of staffing levels had been undertaken and staffing had been increased. The new staffing levels were based on people's needs and the support they required. Staff we spoke with told us there were now sufficient staff to meet people's needs. They said the new staffing levels enabled them to support people in a timely manner, have time to spend speaking with people and engaging them in activities of their choice, and complete their other duties as required. The registered manager had made changes to how the staff rota was managed which ensured that there was management oversight in the covering of shifts and the use of bank staff. We looked at staff rotas over six weeks and saw two unplanned absences. The registered manager had taken appropriate action and ensured the absences were covered by bank staff.

At our inspection in March 2016, the service had a limited pool of bank staff which meant there were not always sufficient staff to provide cover for both planned and unplanned absences. At this inspection of 7 July 2016, we found all care and nursing staff vacancies filled. The service had 14 care staff on bank which provided a sufficient pool to cover any staff absences. There was a recruitment drive at the service to ensure there were sufficient numbers of staff with the appropriate skills mix. The provider had recruited 14 care staff and four nurses as permanent staff. Rotas we saw showed shifts had been covered consistently by regular staff which enabled staff to understand people's needs and support them safely.

During our inspection of 7 July 2016, we observed staff responded to people's requests for support and their call bells promptly. One person told us, "Staff do not take long to come when I ring the bell." We saw staff did not leave people alone and they were available around communal areas to support them as required.

People received the support they required with their meals. We observed there were enough staff to engage and support people at lunchtime. We saw three people who had previously been anxious and unsettled at lunchtime, reassured by staff and received the support they required. The atmosphere at the service was calmer and relaxed than at our previous inspection of 23 and 24 March 2016 as staff were able to provide people with the individual support they required without being hurried or interrupted by more urgent issues.

We found the service was now meeting Regulation 18 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

## Is the service well-led?

### Our findings

At our previous inspection on 23 and 24 March 2016, we found staff did not feel confident to approach the registered manager to raise their concerns and felt unsupported in their role. Staff said they felt their concerns were not listened to. At this inspection of 7 July 2016 we found the registered manager and provider had implemented team building initiatives to improve staff morale and working relations at the service. This included ongoing training on communication and staff get together meetings to improve staff relations and the relationship with the registered manager.

Staff told us communication had improved between the team, the registered manager and the management team and they had more one to one and group meetings to improve relations. The registered manager and provider organised staff meetings which emphasised the importance of teamwork and treating each other with respect. The provider had carried out a staff survey in June 2016 and had carried an analysis of the results which had been shared with staff. The results showed staff were happy with the progress they had made in teamwork and an improvement in communication between the registered manager and staff.

The provider had made improvements to the service about staff relations and staff were positive about the culture at the service. We saw senior management had reached out to staff to understand their concerns at the service and had made commitments to ensure there was a conducive atmosphere for all staff to support people effectively.

Staff told us the registered manager promoted teamwork and they worked together well and used each other as a source of support. One member of staff told us, "Things are getting better. Communication has improved in the team." Another member of staff said, "We have access to senior management to raise our concerns when necessary." Staff told us they were aware of the provider's employee assistance support team where they could raise their concerns and get advice for things they were not sure about. They told us they felt confident the provider would address their concerns.

The registered manager recognised and valued individual and team effort to boost staff morale. Staff told us they nominated a colleague every month for outstanding service and received an employee of the month award of recognition from the provider. Staff told us the recognition was important as they felt the registered manager and the provider appreciated their efforts to improve the quality of support they provided to people.