

Tamaris Healthcare (England) Limited

Astell Care Centre

Inspection report

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Date of inspection visit:
29 December 2020
05 January 2021

Date of publication:
18 January 2021

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Astell Care Centre is registered to provide nursing and personal care for up to 96 older people. This includes a single sex section for men who are unable to live harmoniously in a mixed gender environment. It also includes a separate unit for females who require more supervision and support because they may display distressed behaviour. A further unit also accommodates people who may be living with dementia and have nursing needs. At the time of our inspection there were 74 people living at the service.

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

People we spoke with were positive about the care and support they received. One person told us "I love it here. The staff help me loads. I feel very safe here, I've never felt safer. It's a good home and is run properly. The kitchen staff are fantastic, they are all good cooks."

Risks to people's personal safety had been assessed and plans were in place to minimise these risks. Risk assessments were in place to support people to be as independent as possible. When people had accidents, incidents or near misses these were recorded and monitored to look for developing trends.

The registered manager followed safe recruitment practices to ensure people were supported by staff with the appropriate skills, experience and character. Staff told us there were sufficient staff to meet people's care and support needs.

People's medicines were managed and administered safely. People received their medicines when required.

People were protected by infection prevention and control procedures at the home. Staff had received training in the appropriate use of PPE and were able to correctly explain how they put it on and took it off.

The service had a positive culture that was person centred and inclusive. The views of people using the service had continued to be sought during the pandemic.

The service worked in partnership with the relevant health and social care professionals to ensure people's health and care needs were met.

The provider had effective systems in place to monitor the quality of service being delivered and identify any improvements.

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 02 November 2018).

Why we inspected

We received concerns in relation to staffing, the management of medicines and people's care needs. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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.

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

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Astell 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.

Inspection team

The first day of the inspection took place on 29 December 2020 and was carried out by one inspector. The second day of the inspection took place on the 5 January 2021 and was carried out by two inspectors.

Service and service type

Astell 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.

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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included on-going monitoring of information about concerns and incidents the provider must notify us about. We sought feedback from the local authority professionals who work with the service. We took this into account when we inspected the service and made the judgements in this report.

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 used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with 14 members of staff including, the registered manager, the regional support manager, deputy manager and care workers.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision.

After the inspection

A variety of records relating to the management of the service, including training data, quality assurance records and policies and procedures were reviewed.

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.

Systems and processes to safeguard people from the risk of abuse

- Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns.
- People were protected against the risk of potential harm or abuse. The registered manager raised safeguarding alerts to the appropriate agencies in a timely manner.

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

- People were supported to be as independent as possible. Risk assessments were in place to protect people whilst maintaining their freedom.
- Occasionally people became upset or anxious. Information was available in care plans to guide staff on how best to support people during these times. We observed staff supporting one person with kindness and compassion when they became anxious.
- When people had accidents, incidents or near misses these were recorded and monitored to look for developing trends. Records were reviewed to ensure lessons could be learned and changes to care were made if required.

Staffing and recruitment

- People were supported by sufficient staff with the correct skills and knowledge to meet their individual needs. Staff we spoke with were able to demonstrate they knew people's care and support needs.
- Safe recruitment practices were followed before new staff were employed to work with people. Checks were completed to make sure staff were of good character and had the correct skills for their role.
- Staff we spoke with said there was sufficient staff to meet people's needs and cover was always sought. One staff member told us "There is always enough staff to care for people. Cover is provided by in-house staff who are happy to cover extra shifts. I work with a very supportive team."

Using medicines safely

- All staff who were permitted to administer medicines had received appropriate training and competency checks to support them to be able to administer medicines safely.
- We viewed multiple medicine administration records (MAR) and saw people received their medicines as prescribed. Where people had 'as required medicines', such as painkillers, there were detailed protocols in place to guide staff on when these should be administered.
- Systems were in place to ensure medicines were being administered correctly. Regular audits were undertaken which included daily stock checks of people's medicines.

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 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 can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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.

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

- Staff were clear about their roles and responsibilities. They were very proud that there had been no cases of Covid19 in the home for at least 12 weeks. They were conscious however, of the need to keep up with infection prevention and control practices to ensure people were safe.
- The registered manager had a good understanding of the needs of the people using the service and was responsive in ensuring these were met. Staff spoke positively about the support they received from management during these unprecedented times.
- The registered manager had submitted the required statutory notifications to CQC following significant events at the service.

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

- The service had a positive culture that was person centred and inclusive. Care plans contained detailed information to support staff to understand people's preferences where they were not able to express these themselves.
- The registered manager and the culture of the service ensured people received person centred care. One person said "I have never settled anywhere but here, [name of registered manager] the manager is fantastic. I have had some really nice chats with her."
- The home had a positive atmosphere and staff morale and teamwork were good.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service worked in partnership with the relevant health and social care professionals to ensure people's health and care needs were met.
- The views of people using the service had continued to be sought during the pandemic. Monthly 'resident meetings' had continued where people were encouraged to share their views about what changes they would like to see within the service.

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; Continuous learning and improving care

- The registered manager investigated incidents fully and was open and honest with exploring any lessons to be learned. Where identified, changes to practice were implemented to improve people's experiences of

their care and support.