

Hydefall Limited

Sutton Court Care Centre

Inspection report

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Sutton

Surrey

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Outstanding 🌣

Summary of findings

Overall summary

About the service

Sutton Court Care Centre is a residential care home providing nursing care to up to 63 people. The service provides support to older people, some of whom are living with dementia. At the time of our inspection there were 60 people using the service.

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

Sutton Court Care Centre were committed to providing high quality care that achieved good outcomes for people. There was a continued strive to improve and the management team had worked with other health and social care professionals to further strengthen links across the two areas to benefit people's care and wellbeing. They were participating in several pilots and projects that used digital solutions to provide enhanced care. This included a system which enabled staff to access people's care records as well as their health records, including GP records and summary records from stays in hospital. This enabled staff to provide more coordinated streamlined care. They were using technology to provide more accurate readings on people's health which could be accessed remotely by their GP and pharmacist to provide a more responsive service which enabled timely escalation of care when people's health declined. The service contributed to the wider health and social care landscape by being a dedicated service for the discharge of covid positive people from hospital during the covid-19 pandemic. Learning from this initiative had been used to improve transitions from hospital to the care home. The staff were also actively participating in several initiatives to support research into dementia in order to better understand the illness and how people living with dementia could be supported.

People's wellbeing was central to the care and support provided by staff at Sutton Court Care Centre. People were happy, safe, and comfortable living at Sutton Court Care. They received safe care that met their needs from staff who knew them well. 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. Safe medicines management practices were in place. People were protected from the risk of abuse and supported to live a life free from discrimination.

Governance systems were in place to closely monitor practices and if areas requiring improvement were identified these were acted upon promptly. Staff felt comfortable speaking openly with the management team. They felt listened to and supported in their roles. The senior management team were aware of their regulatory duties and reported any necessary information to the CQC, the local authority and funding authorities.

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 12 February 2021).

Why we inspected

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

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 well-led?	Outstanding 🌣
The service was exceptionally well-led.	
Details are in our well-led findings below.	



Sutton Court 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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 2 inspectors.

Service and service type

Sutton Court Care Centre is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Sutton Court Care Centre is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements

they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 8 people, 4 relatives/representatives and 9 staff. This included 2 care workers, 3 senior care workers, 1 nurse, the registered manager, the head of operations and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed 4 people's care records, records relating to medicines management, quality assurance processes and policies. We reviewed the safety of the environment. We also received feedback from 3 healthcare professionals who worked closely with 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff were respectful of people's protected characteristics and people received support free from discrimination. One person said, "I like to be happy. I feel happy. I am very comfortable. I feel very comfortable with the staff."

Assessing risk, safety monitoring and management

- People received safe care and support. A person told us, "I feel much safer here than at home." Another person said. "The people here look after people who can't look after themselves... It's a very nice place to come because they look after us." A third person said, "I feel safe here. There's always somebody here to help." A relative told us, "The staff seem to genuinely care for [my relative]."
- Staff assessed risks to people's safety and developed management plans to support people to minimise those risks. Staff we spoke with knew people's needs well and the level of support they needed. A staff member told us, "We review people's risk assessments every 4 weeks but if there are any changes, for example, from the GP rounds, we update this immediately." A health care professional told us through the development of their relationships with the staff at Sutton Court Care Centre it has enabled them to provide timely action to ensure people received the care they needed.
- People had equipment in place to support their safety. People we spoke with were able to tell us about the different equipment they had and how it supported them. People had call bells in reach, and we observed call bells being answered promptly. One person told us, "I have a little button to call for help and they [the staff] come quickly."
- Systems were in place to ensure a safe environment was provided and any improvements required to the environment were quickly actioned. There was an ongoing refurbishment programme in place, and the refurbishments that had been completed to a high standard.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is

usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

• We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met. A staff member told us, "We do an assessment of people's capacity when they move in. We make sure that people are always offered a choice and able to make simple decisions for themselves."

Staffing and recruitment

- Safe recruitment practices were in place to ensure suitable staff were employed to support people. This included undertaking criminal records checks, getting references from previous employers, checking people's identity and their eligibility to work in the UK.
- There were sufficient numbers of staff to keep people safe, meet their needs and spend time engaging with them. This included providing people with one-to-one support when required. A person told us, "The staff are excellent. They help you in every single way." Another person said, "Staff are very good. Very nice. You can't complain about the staff at all. They are very good. They are so gentle and so lovely."

Using medicines safely

- People were supported by staff who followed systems and processes to administer, record and store medicines safely.
- A new electronic medicine administration record (eMAR) had been introduced which informed staff what medicines people received and when. We saw that accurate records were maintained of the medicines administered. The new system also gave a countdown of time in-between doses for medicines that were time critical so staff where able to easily identify when a person required their next dose, for example in relation to pain relief.

Preventing and controlling infection

- We were assured the provider was supporting people living at the service to minimise the spread of infection.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises. A person said, "The cleaner comes in and keeps everything nice."
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

Friends and family were welcome at the service and there were no visiting restrictions in place.

Learning lessons when things go wrong

- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned. A relative told us, "If mum's unwell or had a fall they ring me straight away."
- When things went wrong, staff apologised and gave people honest information and suitable support.

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 this key question good. At this inspection the rating has changed to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- People's and relative's comfort and quality of life was prioritised by all the staff at Sutton Court Care Centre. The provider supported the registered manager and their team to prioritise what was important to people and their wellbeing in order to achieve the best outcomes for people.
- Management and staff put people's needs and wishes at the heart of everything they did. A relative expressed their gratitude to staff and being able to accommodate their loved one after a stay in hospital, their exception person centred care and the support provided to the whole family.
- The registered manager told us an example of where they were supporting a person to come to the care home from hospital as they were nearing the end of their life and did not want to die in hospital. The staff wanted to give the person the comfort to be able to die peacefully with their family around them. They were organising with the family space at the service, so they were able to spend time with their loved one as well as have some time to grieve as a family.
- The management team encouraged and empowered staff to use technology to support people, particularly those with dementia, to reminisce and be present in the moment. They used virtual reality (VR) headsets to transport people back to the town where they grew up so they could remember the places the used to go or re-experience their favourite memories. Staff also used the VR headsets to take people to the beach so they could experience 'holidays' with their families. Staff commented on how the use of this technology achieved positive outcomes on people's mental well-being. Staff said this also helped them to understand people more and get to know more about their lives, which they could use to further engage and interact with people in a meaningful way.

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

- Positive feedback about the service's leadership and expertise was received from healthcare professionals. A healthcare professional told us, "Sutton Court Care Home is one of best care homes I have ever worked with. The service is very well managed. They are very open to try out new ideas. The staff are well trained and supported to deliver safe and efficient care to the service users. I am particularly impressed by their passion and commitment to get the basics right – nutrition, hydration, frequent monitoring, and advanced care planning."
- There were effective governance systems in place to review and improve practices. The home had made steps towards being fully digital. These systems had their own quality assurance systems built in which would flag to the registered manager and senior management team if certain aspects had not been updated

or needed reviewing. The records we viewed were up to date.

- The registered manager also used the 'safety cross' to review key information and gather data about people's needs to enable clear oversight of the service. The registered manager told us they had observed the 'safety cross' in practice in a hospital setting and adapted it to make it relevant and meaningful for their service. The 'safety cross' is a one-month colour-coded calendar that notes daily safety measures.
- Senior staff understood and demonstrated compliance with regulatory and legislative requirements. The provider, head of operations, registered manager and clinical lead worked together to develop the vision and values of the service, with input from the whole staff team to ensure everyone focused on what was important for the service.

Continuous learning and improving care;

- There was a commitment to continuous learning and sharing of best practice. A healthcare professional said, "[The management team] strive for constant improvements." They also added, "Sutton Court have exceeded expectations. Their willingness and forward approach to improve, maintain, and exceed standards has been evident through their engagement."
- The staff were involved in several pilots and projects with healthcare professionals to improve practices and outcomes for people. The whole staff team were involved and invested in these projects to ensure they were a success and improved outcomes for people.
- The home was working with two London boroughs to lead in the area on the digitalisation of care homes. This included work with NHS England to access shared care records across health and social care providers. This helped staff to obtain better information about people's experiences and needs so staff could proactively incorporate this into care planning. This included identifying conflicting information and missing information on discharge notes regarding specialist assessments undertaken in hospital to ensure people received safe care that was appropriate to their needs. The home staff were also able to the results of exploratory tests in hospital so they could discuss them with their GP. This enabled a clear plan of action in order to further investigate and manage the symptoms the person was displaying.
- The home was working with the local Integrated Care Board (ICB) and had implemented V-CARE initiative. This system enabled staff to use Bluetooth enabled equipment to take people's vital signs and this was automatically uploaded onto their care records. Their GP was able to access this information remotely, so they were able to quickly identify any changes in people's health and provide timely treatment. The registered manager told us this system enabled them to have a smoother and more responsive escalation of people's care needs and identify earlier when a person's health was declining. For example, one person's health was declining and whilst staff were waiting for the ambulance staff they were able to upload their vital signs onto the system so this information was available and accessible for the medical team treating them at hospital, so prompt treatment could be given.
- The home had also implemented electronic medicine administration records. This system allows the pharmacist to access this information and they can monitor practices and stock levels. For one person the home identified that a medicine had not been supplied by the pharmacy. By looking at the person's eMAR and their GP records through the shared care records they could identify that the GP had made the change to the person's prescription that day and then get this sent through to the pharmacy to be dispensed with their other medicines, providing a more responsive approach to medicines management.
- The service had recently signed up to a pilot to improve practices around supporting people with additional hydration needs. This involved a cup and saucer that could electronically measure how much had been drunk and upload this data onto their care records. Staff and other healthcare professionals could then accurately monitor how much a person was drinking throughout the day and offer more support if required.
- The provider encouraged the registered manager to continuously develop and learn new techniques to further support staff and people using the service. The registered manager had completed best practice

training on supporting people with dementia called 'positive approach to care'. This training supported staff to look beyond the illness and people's behaviour, and instead focus on the individual and what they were trying to communicate.

Working in partnership with others

- Staff were committed to working in partnership with others to ensure seamless, coordinated and consistent approach across health and social care.
- A health professional working with the staff team at the service told us, "I was most impressed by [the management team's] passion to improve the service in which they provide to their residents that they pushed their access to Shared Care record beyond our expectations and found ways to use the system that further improved their time efficiencies as a provider but also turning their service from a reactive care provider into a proactive care provider. They looked at ways to use the information available to them to plan ahead in order to reduce delays in admission and discharge and ensuring a much smoother transition of care to the person that they were committed to caring for."
- Staff contributed to the wider health and social care landscape. During the covid-19 pandemic they were the designated setting to support the discharge of covid positive people from hospital. This initiative was continued for longer than the wider government scheme to support local hospitals, who were experiencing difficulties with timely discharge of people. The staff took an individualised approach to the use of this facility when appropriate. One person's family lived abroad and were unable to support the person's move back to their own home. Their health declined following their covid-19 diagnosis and the staff arranged for the person to spend their final days at the home so they could have a dignified death surrounded by staff who were familiar to them.
- The home was working with Kings College University Hospital's research team to further understand people's experiences of living with dementia. The researchers worked with staff to develop individualised care plans to ensure people had input from leaders in their field to incorporate best practice into the support delivered. This had widened to include researchers from outside the UK to come and learn from staff at Sutton Court Care Centre.
- Participation in research projects had a positive impact on outcomes for individual people. For example, one person's behaviour had reduced to the point that they no longer needed one to one support from staff and use of behaviour modifying medicines had been discontinued.

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

- The management team were visible in the service, approachable and took a genuine interest in what staff had to say. Staff felt respected, supported, and valued by senior staff which supported a positive and improvement-driven culture. Comments from staff included, "The management is good, and they are very supportive. If we have a problem, we let them know and they will sort this out for us." "I feel very supported. The registered manager always asks us what we need and what the residents' needs are as well. I could talk to the manager if I have concerns. The door is open, and the registered manager is willing to help us out. We all work together really well. I think the manager supports us to be caring and put the residents first."
- The management team ensured staff treated people with respect and considered their individual needs and protected characteristics, taking account of their beliefs and preferences.
- Staff welcomed feedback from people and relatives. The management team made themselves available to speak with people and their relatives and took on board any feedback received.

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 service apologised to people, and those important to them, when things went wrong

• Staff gave honest information and suitable support, and applied duty of candour where appropriate.	