

Central and Cecil Housing Trust

Cecil Court

Inspection report

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Date of inspection visit:
08 February 2023
09 February 2023

Date of publication:
24 March 2023

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

Cecil Court is a care home that provides accommodation and personal care for up to 45 older people in one adapted building. At the time of our inspection there were 43 people using the service including those living with dementia.

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

At the previous inspection Cecil Court had participated in the 'My Life' project that researched the effectiveness of individual biographical reminiscence films for people with dementia. We saw first-hand the positive effect these film biographies had in greatly enriching people's quality of life and reducing their anxiety. This has now been further developed by the home participating in the development of a 'My Life' TV channel that provides people with dementia and others with access to topics identified as of interest to them, whenever they wish.

The home was excellently led and managed in a positive, open, and transparent way and had an inclusive culture. The provider's vision and values were clearly set out and staff understood and followed them. Areas of responsibility and accountability for staff and management were clearly defined, and an outstanding service was provided that was regularly reviewed. There were thorough audits conducted, and records kept up to date. Whenever opportunities arose, community links and working partnerships were established and maintained to minimise people's social isolation. The provider met Care Quality Commission (CQC) registration requirements. Healthcare professionals said that the service was very well managed and met people's needs in a professional, open, caring and friendly manner.

We were told by people using the service, their relatives and staff that Cecil Court was a safe place to live and for staff to work. Any risks to people were regularly assessed, reviewed and minimised meaning they were able to take acceptable risks, and enjoy their lives in a safe way. Safeguarding concerns, accidents, and incidents were reported, investigated and recorded. There were enough staff to meet people's needs and support them appropriately. Staff were suitably recruited and trained including how to safely administer medicines. The home used Personal Protection Equipment (PPE) safely, effectively and the infection prevention and control policy was up to date.

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.

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 14 June 2018). The overall rating for the service remains

good. This is based on the findings at this inspection.

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 did not inspect the key questions of effective, caring and responsive.

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

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Cecil Court 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 well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-Led findings below.

Cecil Court

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

This inspection was carried out by 1 inspector.

Service and service type

Cecil Court 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 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

Inspection activity started on 6 February and ended on 2 March 2023. The inspection visit took place on 8 and 9 February 2023 and were unannounced on the first day.

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 professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with

key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke in person with the registered manager. We spoke with 6 people using the service, 5 relatives, 8 staff and 4 health professionals to get their experience and views about the care provided. We reviewed a range of records. They included 5 people's care plans and risk records. We looked at 7 staff files in relation to recruitment, training and supervision. We checked a variety of records relating to the management of the service, including staff rotas, audits, quality assurance, policies and procedures.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

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

- People were protected from the risk of abuse.
- We were told by people using the service and their relatives that the care home was safe for people to live in, staff treated them well and had their best interests at heart. This was reflected in the care and support we saw people receiving and their positive body language towards staff. This was relaxed and indicated that people felt safe. A person said, "I feel very safe here. What I particularly like is that it is nice to have company and staff, and everyone are so friendly." A relative told us, "This is a great service, no problems and very safe." A staff member said, "The people here are like our family and of course we want to keep them as safe as possible."
- Staff received training in how to identify abuse towards people, safeguard them and the appropriate action to take if they encountered abuse including how to raise a safeguarding alert. A staff member said, "If I thought something was wrong, I would report it straight away." Staff had access to the provider safeguarding policy and procedure.
- Staff advised people how to keep safe and any areas of concern about people, was recorded in their care plans.

Assessing risk, safety monitoring and management

- The provider had systems in place to assess risk and monitored people's safety.
- People were enabled by staff to take acceptable risks and enjoy their lives in a safe way by following people's risk assessments. The risk assessments included all aspects of people's health, daily living and social activities. The risk assessments were regularly reviewed and updated when people's needs, interests and pursuits changed, to keep people safe.
- Staff had a good understanding of identified risks people might face and the action they needed to take to prevent or safely manage those risks. This included staff being aware of the action to take to minimise risks associated with people choking whilst eating and drinking. They also made sure people could safely move independently around the home and were aware that people who were bed bound ran a higher risk of developing pressure sores. A staff member told us, "We know [people using the service] so well and when things are not right for them."
- People had care plans that were up to date and contained detailed risk assessments and management plans. They addressed important areas such as people's mobility, nutrition and hydration needs, risk of falls and personal care.
- There was a well-established staff team who were familiar with people's routines, preferences, and identified situations where people may be at risk and acted to minimise those risks. A relative said, "Nothing but praise for the staff."

- The general risk assessments were regularly reviewed and updated including reference to equipment used to support people. This equipment was regularly serviced and maintained.

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 was being met.

Staffing and recruitment

- There were enough staff to meet people's needs and a thorough staff recruitment procedure that records demonstrated was followed. This meant people were kept safe.
- During our visit, staffing levels matched the rota and enabled people's needs to be met safely. People said there were enough staff to meet their support needs. Staff were visible throughout the inspection providing people with the care and support they needed. We saw staff responding quickly to people's requests for assistance or to answer their questions. A person told us, "So happy with the staff, they are approachable, create a friendly atmosphere and we get what we need, when we need it." A relative added, "Everyone here is kept safe with a consistent staff approach."
- The recruitment interview process included scenario-based questions to identify prospective staffs' skills, experience, knowledge of care and support for older people including those with dementia. References were taken up, work history checked and Disclosure and Barring service (DBS) security checks carried out, prior to new staff starting in post. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. There was also a 6 months probationary period with a review. This was extended if required, so that staff could achieve the required standard of care skills.

Using medicines safely

- People received their medicines safely.
- Medicines were safely administered, regularly audited and appropriately stored and disposed of. People's medicine records were kept up to date with no recording errors or omissions found on any of the Medicines Administration Records (MAR) sheets we looked at.
- Staff were trained to administer medicines and this training was regularly updated. They understood their responsibilities in relation to the safe management of medicines. Only staff who had been trained and assessed as competent handled medicines.
- Team leaders checked medicines storage and records on units other than their own.
- There was detailed staff guidance in people's care plans that included their prescribed medicines and how they needed and preferred them to be administered. When appropriate, people were encouraged and supported to administer their own medicines. People told us staff made sure they took their prescribed medicines as and when they should. A person said, "Always get my medicine on time."
- People's prescribed medicines, including controlled drugs, were securely stored in locked cabinets and medicines trollies kept in the care home clinical rooms, which remained locked when not in use.

Preventing and controlling infection

- We were assured that the care home was using PPE effectively and safely.
- We were assured that the care home infection prevention and control policy was up to date, and regular audits took place. Staff received infection control and food hygiene training that people said was reflected in their work practices. This included frequent washing of hands, using hand gel and wearing PPE such as gloves, masks and aprons. A staff member said, "We have access to everything we need to keep people and ourselves safe."
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We observed that staff wore masks in line with the provider's current guidance for staff to always wear personal protective equipment (PPE) in the home. This was in line with the government's more risk-based/individual approach to mask wearing in care homes. Staff also wore gloves and aprons appropriately if required. People told us staff always wore PPE. A person said, "They wear the masks to keep us safe." The registered manager and staff confirmed they had ample supplies of PPE and were routinely tested for COVID-19.
- People told us, and we saw that the home environment was kept clean and hygienic.

Visiting Care Homes

- The care home's approach to visiting followed government guidance and the impact on people in relation to this was that they could receive visitors safely.

Learning lessons when things go wrong

- The home learnt lessons when things went wrong.
- The home had regularly reviewed accident and incident records to reduce the possibility of reoccurrence. There was a whistle-blowing procedure that staff said they had confidence in and were prepared to use.
- Any safeguarding concerns and complaints were reviewed, responded to and analysed to ensure emerging themes were identified, necessary action taken and to look at ways of avoiding them from happening again. This was shared and discussed with staff during team meetings and handovers.
- Healthcare professionals thought the home provided a safe environment for people to live in.

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 Outstanding. At this inspection this key question remains the same. 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

- The home had a culture that was really person-centred, open, inclusive, and empowering.
- At the last inspection the home was fully engaged in a 'My Life' film project that was part of a South West London and St. George's NHS Trust clinical trial to assesses the impact of the films in a care home setting, in particular for people with dementia. At this inspection it had been further developed to incorporate a 'My Life' TV channel that focused on topics and areas of interest to people using the service, including those with dementia and made them accessible whenever they wished. The impact on people's moods and quality of life was assessed by doctors at South West London and St George's Mental Health NHS Trust.
- We saw first-hand the impact of having topics of interest available to people whenever they wished, particularly those with dementia. A person who had previously been silent and disengaged came to life when a ballroom dancing programme was put on, becoming immersed in dancing, and clearly thoroughly enjoying themselves.
- People, their relatives and healthcare professionals told us that the home was exceptionally well run, and the registered manager was excellent. This was reflected in people's positive, happy, warm and relaxed body language towards the registered manager and staff. A healthcare professional told us, "I have only seen the standards of care improve consistently and for a long time now to the point of excellence." Another healthcare professional said, "The leadership and competence of such a great [registered] manager reflects on staff, she inspires and creates the premise for team work, and leads by example." A relative said, "The care is exemplary."
- People said the registered manager and staff worked hard to meet their needs and make their lives enjoyable. A person told us, "The [registered] manager is lovely, I can't fault her or any of the staff. I just feel so lucky." A relative remarked, "Definitely so well-led. We feel completely assured by the approach of the [registered] manager, staff and their dedication and hard work." Healthcare professionals told us the home maintained excellent lines of communication with them.
- The services that Cecil Court provided were explained to people and their relatives so that they understood what they could and could not expect from the home and staff. This was reinforced in the information provided for people on admission that also sets out the organisation's vision and values. Staff understood the vision and values and people said this was reflected in their working practices. A relative told us, "Put it like this, we had 4 people independently recommend the home before [person using the service] moved in. Everything was explained to us and everyone is on the ball."

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

regulatory requirements

- The registered manager and staff were clear about and understood their roles, the quality assurance systems and there were clear lines of communication. This helped ensure the service ran smoothly.
- People living at the care home and staff working there were very positive about the way the service was managed. A person told us, "I just love it here, nothing is ever too much trouble." A relative said, "From top to bottom everyone knows what they are doing and supports each other." The excellent work of the registered manager in promoting good dementia care has been recognised as they had been awarded the British Empire Medal for services to people living with dementia.
- Staff gave us positive feedback regarding the leadership style of the registered manager, and how well run the care home was. A staff member said, "This is an amazing place to work. I love what I do and it's a pleasure to come to work." A further staff member added, "[Registered manager] is so hands on, always there to help and I feel I can talk to her about anything."
- The provider had upgraded to a new electronic system that incorporated real time quality assurance systems and contained performance indicators that identified how the service was performing, any areas that required improvement and areas where the service was achieving or exceeding targets. Key performance indicators (KPI) included care plan reviews, morning and afternoon activities, resident of the day and occurrences such as accidents and incidents.
- There were thorough, regularly reviewed audits carried out by the registered manager, staff and the provider that were up to date. The registered manager also produced an annual report and environmental audits were carried out by other managers within the organisation. There were also employer health and safety audit reports, service improvement plans, and visits took place from the provider quality assurance team. This meant people received an efficiently run service. Staff knew that they had specific areas of responsibility such as record keeping and medicines management and carried them out well. This was reflected by the praise from people and their relatives.

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 provider understood their duty of candour responsibilities and was open and honest with people.
- People and their relatives were kept informed if things went wrong with their care and support and provided with an apology. This was enabled by the positive and proactive attitude of the registered manager and staff.

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

- People, relatives, and staff were engaged by the provider, listened to and their wishes acted upon.
- The provider encouraged an open and inclusive culture by seeking the views of people, their relatives and staff. This meant people could voice their opinions about the service. The provider used several methods to gather people's views about what the care home did well or might do better. This included regular group meetings, care plan reviews, and annual satisfaction surveys.
- Staff contributed their ideas about what the service did well and what they could do better during regular individual and group supervision and work performance appraisal meetings with their line managers. They also had ongoing opportunities to reflect on their working practices and professional development. Staff told us they received good support when needed it from the home's management. A staff member told us, "We are a team who have a passion for [people using the service]. This job is about love and we treat people in the way we would expect to be treated ourselves."
- During the inspection visit, the registered manager, management team and staff regularly checked that people were happy and getting the care and support they needed, within a friendly family environment.
- Staff received annual reviews, 6 weekly supervision and staff meetings so that they could have their say

and contribute to improvements.

- Relatives said they were in frequent contact with the home and made regular visits. They also told us that they were kept informed, and updated with anything about people, good or detrimental and adjustments were made from the feedback they gave. The provider identified if the feedback they received was to be confidential or non-confidential and respected confidentiality accordingly.

Continuous learning and improving care

- The service improved care through continuous learning.
- There were policies and procedures regarding how to achieve continuous improvement and work in co-operation with other service providers.
- The complaints system enabled the registered manager, staff and the provider to learn from and improve the service.
- Performance shortfalls were identified by audits and progress made towards addressing them was recorded.

Working in partnership with others

- The provider worked in partnership with others.
- The home maintained close links with services, such as GPs, district nurses, speech and language therapists, tissue viability nurses, and occupational therapists. This was underpinned by a policy of relevant information being shared with appropriate services within the community or elsewhere.
- The provider worked in partnership with various community health and social care professionals and external agencies, including local authorities. A healthcare professional told us, "[Registered manager] leads the team in an excellent manner and ensures that residents receive a high quality of care. She looks after her team members, has an excellent rapport with all her residents and their carers."
- The home was involved in the community in terms of their work around promoting dementia.