

# The Southend-On-Sea Darby & Joan Organisation Limited

# St Martins Residential Home

## Inspection report

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Date of inspection visit:  
11 April 2019

Date of publication:  
21 November 2019

## Ratings

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

# Summary of findings

## Overall summary

About the service:

St Martins Residential Home is a residential care home that was providing personal care and support to 26 older people some of whom were living with a dementia at the time of the inspection.

People's experience of using this service:

People told us they felt safe and that staff were kind and caring. One person told us, "This is really a good place to live, the staff always pop in and check on us throughout the day." Staff understood how to support people safely through managing people's medicines, using equipment and managing risks around infection.

Staff working in the service put people at the centre of every decision that was made, and ensured their choices and views were valued and respected.

The culture of the service was positive, and person centred, and staff informed us this was due to good leadership which all came from the Chief Executive Officer (CEO) and registered manager. Staff understood the importance of people making choices and decisions about their care and encouraged this.

People's privacy and dignity was respected, and their independence encouraged and promoted. Staff knew people well and provided social and emotional support, in addition to meeting people's care needs.

People, their relatives, staff and other professionals were engaged with and involved with the service. Their views were listened to and acted on. The CEO encouraged engagement with the wider community and some people regularly accessed the community for social events.

Risk to people was assessed and care plans which supported staff to deliver personalised care were put in place. People were supported to maintain their health and access healthcare support. Staff worked in partnership with other agencies to ensure people received the right support.

There were enough staff available to support people. Staff were supported to meet the needs of people through training and supervision. Staff were supported with training as needed.

The home was freshly decorated in a homely way and people had personal artefacts in their bedrooms to further enhance the homely feel. People were encouraged to bring things with them to make them more comfortable.

People and their relatives told us that if they had any concerns, staff and the registered manager would respond straight away. People knew how to complain and were confident to do so. When things went wrong, lessons were learnt, and actions put in place to prevent reoccurrence.

Rating at last inspection:

At the last inspection, the service was rated Good. (14 October 2016)

Why we inspected:

This was a planned comprehensive inspection.

Follow up:

We will continue to monitor the intelligence we receive about this service and plan to inspect in line with our re-inspection schedule.

## 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 caring?

Good ●

The service was caring

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

# St Martins Residential Home

## **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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

### Inspection team:

This inspection was carried out by one inspector.

### Service and service type:

St Martins Residential Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 took place on 11 April 2019 and was unannounced.

### What we did:

Before the inspection we reviewed information, we had received about the service. This included details about incidents the provider must tell us about, such as any serious injuries to people. The provider also completed a provider information return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they

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

During the inspection we spoke with three people using the service, three staff members, the registered manager and Chief executive officer (CEO). We reviewed a range of records including parts of three people's care and support plans and reviews, risk assessments, staff recruitment and training records. We also reviewed records used in managing the service for example policies and procedures monitoring records and minutes of meetings.

# 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. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe in the service, one person told us, "This is really a safe place to live, the staff are very supportive and also make sure we are okay."
- We found staff to have sound knowledge of how to keep people safe and protect them from any potential harm. Staff were able to show how people may be at risk of harm or abuse and how they would go about protecting them and ensuring their safety. At the time of our inspection there was no concerns being investigated by any of the external agencies.

Assessing risk, safety monitoring and management

- Staff had all the information they needed to support people safely. All staff were involved with ensuring that people's risk assessments were kept up to date to ensure people's safety when they accessed the community.
- We found each person's risk assessments were kept up to date and any changes to the level of risk were communicated to all the staff working in the service by means of staff handover and encouragement from the CEO for staff to read and review changes in care plans, which was accessible to all staff.

Staffing and recruitment

- The registered manager informed us that the service reviewed staffing levels of the service monthly to ensure that the service had enough staff in place to meet the needs of people using the service.
- The registered manager and staff told us that there was enough staff to meet people's needs however; added staffing support was deployed as and when required. For example, when people went into the community for days out the service deployed more staff to ensure the safety of all the people inside and outside the service at the time. Records we viewed confirmed this.
- The provider had a robust recruitment process in place, which showed that staff employed had the proper checks to ensure that they were suitable to work with vulnerable people.

Using medicines safely

- People received their medication as prescribed. We found all medication administration charts (MARS) were all up to date and there were no omissions or gaps. Medication was safely and securely stored, and the service had a procedure in place for the safe disposal of medication.
- Staff involved in the administration of medication had received training and competency checks had been

completed in order for them to safely support people with their medications.

#### Preventing and controlling infection

- We found that people using the service were being cared for in a safe and clean environment. We saw staff cleaning the home, changing people's bedding and ensuring that the service was clean and odour free. The CEO informed us, "Over the last two years the service has invested a considerable sum of money in improving the appearance of the home, this included the removal of old carpets and installation of laminated flooring as to ensure all the staff are able maintain a clean and odour free home."

#### Learning lessons when things go wrong

- The CEO informed us that they had taken past experiences of when the service was continuously under numerous investigations as a learning outcome to improve the quality of care in the service. Collectively as a team they found this period difficult as they were under the spotlight however, since then all staff we spoke to felt more confident and knowledgeable about how to keep people safe.



# 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 the last inspection this key question was rated as Good. At this inspection this key question has remained 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 were comprehensively assessed and planned for in line with best practice. For example, the service worked with other professionals to develop positive behaviour support plans, which provided staff with strategies on how best to support people when they presented with behaviour that challenged the service.
- Referrals were made to external services without delay to ensure people's needs were met

Staff support: induction, training, skills and experience

- Staff told us they had attended training when they first started work and also attended refresher courses as and when required. The management team kept a record to ensure all staff kept up to date with their training and that they understood their role and could care for people safely. The registered manager informed us that the service was continually looking at ensuring that all staff had received training to carry out their roles.

Supporting people to eat and drink enough to maintain a balanced diet

- People said they had enough food and drink and were always given choice about what they ate. Throughout the day we saw people being offered food and drink. All staff were encouraging and supported people to have regular fluid intake throughout the day. Staff supported people to eat at the person's own pace. We saw a lunchtime meal, which was a very social occasion and people gave positive feedback about the food they had eaten.

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

- People had access to areas both inside and outside the home that were safe and promoted their wellbeing. The home was decorated in a homely style and doors that opened onto a large patio were open throughout our visit, which created a relaxed, open, environment.

Supporting people to live healthier lives, access healthcare services and support

- People's healthcare needs were managed. We noted that people were supported to attend doctors and hospital appointments. When needed, the service liaised with people's GP, community nurses to ensure all their healthcare needs were being met.

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

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 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 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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- The registered manager and staff demonstrated a good understanding of the MCA and DoLS.
- Staff identified how people were being deprived of their liberty and the relevant applications had been made for legal authorisation. We saw that authorisations were monitored to ensure any conditions were met and approvals had been notified to us as required.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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 supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People spoke positively and warmly about all of the staff and were really appreciative of the support they received.
- All staff working in service had received training on equality and diversity and further discussions were held with staff during supervision.
- People's diverse needs in relation to their culture and religion had been assessed and recorded, their contained information on how staff would support them to meet their assessed need. For example, the service arranged for the local church to visit some of the people living the service.

Supporting people to express their views and be involved in making decisions about their care

- People all told us that staff listened to them and supported them to express their views about their care. This was also clear on the day of our inspection as we observed staff listening and interacting with people.
- The service had developed close links with an advocacy service and we saw people were encouraged to use this to help support them with some decisions.

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with kindness, dignity, respect and consideration.
- Staff informed us that people's well-being, dignity was very important to them, and ensuring that people were well-presented was an important part of their supporting role.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People's care and support needs were well understood by the staff, relatives and people receiving support. This was reflected in detailed support plans and individual risk assessments and in the attitude and care of people by staff.
- Senior staff held conversations with other health professionals, people, and their relatives to plan and discuss people's care as to ensure the service was continuing to meet the needs of people.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were identified, assessed and recorded in their care plans and staff told us how they used body language or signs as a means to know if non-verbal people might need support.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service also encouraged people to access activities in the community. The manager expressed that staff continued to encourage and support people to develop and sustain their aspirations. During the inspection we observed staff doing word search games with people. Staff informed us, "I am in every day of the week, when I come in and ask people what they would like to do for the day, we also have planned activities each day but we are flexible and will change them depending on what people want to do".

Improving care quality in response to complaints or concerns

- The service had policies and procedures in place for receiving and dealing with complaints and concerns received. The information described what action the service would take to investigate and respond to complaints and concerns raised. Staff, people and relatives knew about the complaints procedure and that if anyone complained to them they would either try and deal with it or notify the manager.

End of life care and support

- People and their relatives were supported and enabled to choose the kind of care they wanted for at this stage of their lives.
- Staff informed us they would work with people and palliative care professionals to ensure people's needs were met.

# Is the service well-led?

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