

Dr G H Khan

Galtee More Residential Home

Inspection report

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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?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Galtee More Residential Home is a care home providing accommodation and personal care for up to 23 people aged 65 and over. At the time of the inspection there were 22 people using the service.

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

While the registered manager ensured the smoother running of the service, the registered provider did not always respond in a timely manner to requests for improvements. They did not provide the registered manager with adequate oversight. We made a recommendation about this.

The service worked in partnership with a variety of agencies to ensure people received all the support they needed. People were happy with how the service was managed. Staff and external professionals felt well supported by the registered manager.

People received person-centred care, which was responsive to their needs. Care records were well written and contained important details about people's needs. People's communication needs had been assessed and where support was required these had been met. While the registered manager managed people's concerns and complaints appropriately, we found complaints had not been adequately dealt with if they were directed at the registered provider. We made a recommendation about the management of complaints.

People were protected from the risk of abuse and avoidable harm by staff who understood how to recognise, respond and report concerns. Allegations of abuse had been dealt with in a robust manner to assure people about their safety. People told us they felt safe when supported by staff. Risk assessments had been developed to minimise the potential risk of avoidable harm to people during the delivery of their care. People were safely supported to receive their medicines as prescribed. The registered manager had robust and safe recruitment procedures. The provider needed to timely respond to concerns regarding the maintenance and safety of the premises.

People's care and support had been planned in partnership with them and their relatives. Staff had received regular training and supervision to support them in their roles. 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.

People were positive about the service and said staff were kind and caring. People were treated with dignity and respect and their right to privacy was upheld. The registered manager worked in partnership with people and their advocates.

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 18 September 2018). There was also an inspection on 17 July 2018. However, the report following that inspection was withdrawn, as there was an issue with some of the information that we gathered.

Why we inspected

This was a planned re-inspection because of the issue highlighted above.

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 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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Galtee More 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. 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

One inspector and one Expert by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Galtee More Residential Home 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, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from the local authority. 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 took this into account when we inspected the service and made the judgements in this report.

During the inspection-

We spoke with five people who lived at the home and six relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager, deputy manager, care workers, housekeeping staff, the cook and the handyperson. 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. We had a walk around the home to ensure the environment was a safe and homely place for people to live.

We reviewed a range of records. This included three people's care records, multiple medication records, two staff recruitment records and we looked at a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance records and read feedback from two health professionals.

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 safe and protected from abuse and their human rights were respected and upheld. Staff told us training was provided and regularly updated. Staff were confident to report concerns and were satisfied that action would be taken to investigate the concerns.
- Before our inspection we were aware of allegations of abuse that had been reported in the home. We found the registered manager had carried out robust investigations and addressed all the concerns. They effectively followed the local safeguarding policies and their own policies to protect people from abuse and neglect. The manager confirmed, "The residents are our main priority. With what's gone on since last July, it's been our challenging year. We are getting back on track now and we will work hard to make sure it stays that way."
- People we spoke with told us they thought the service was safe and felt secure. One person said, "I am safe here love, yes, I can't grumble. And the staff are lovely." A family member told us, "We couldn't wait to get [relative] out of the last care home and get them in here. Yes, she is definitely safer here than in the last home, the staff here seem to care a lot more and it's all about the people here, they are brilliant staff."

Assessing risk, safety monitoring and management

- The registered manager had assessed and managed risks to keep people safe. There were risk assessments to guide staff on safe working practices and to keep people safe from avoidable harm.
- Staff knew how to support people in an emergency and had sought medical assistance where necessary. People had personal emergency evacuation plans which ensured in case of a fire staff had guidance on how to support people out of the building.
- The premises had been maintained to protect people from risks, however we found the provider had not ensured the necessary checks such as electrical installation inspection was carried out in a timely fashion. They took immediate action during the inspection to address this.

Staffing and recruitment

- The registered manager followed safe staff recruitment procedures. All the necessary background checks were carried out. This ensured only suitable staff were employed to support people.
- People, relatives and staff told us staffing levels were enough to keep people safe. We observed the service had appropriate staffing levels to keep people safe.

Using medicines safely

- People received their medicines when they should. Staff had received training in medicines management and regular checks had been carried out to monitor the medicines. One visiting family member told us, "They [relative] have a health condition, so they are on medicines for that and there've never been any

problems around their medicines. Staff rung the doctor when they've needed to, and they keep me up to date, I can't knock it."

- Medicines administration systems were robust and well organised. The registered manager and staff received additional support from the local clinical commissioning group to manage medicines safely.

Preventing and controlling infection

- People were protected against the risk of infection. We completed a tour of the home and found the environment to be clean.
- Staff had access to personal protective equipment (PPE), such as gloves and aprons. We saw staff used PPE when appropriate. Staff confirmed there was enough PPE, such as disposable gloves, hand gels and aprons to maintain good standards of infection control.
- The home had been awarded a five-star rating following their last inspection by the 'Food Standards Agency'. This graded the service as 'very good' in relation to meeting food safety standards about cleanliness, food preparation and associated record keeping. A recent audit on infection control had been carried out by the local health authority and found standards to be satisfactory.

Learning lessons when things go wrong

- There was a process that ensured when accidents and incidents occurred these were appropriately recorded, investigated and areas for improvement identified and acted on. The registered manager followed good practice guidelines and had a post falls assessment tool that guided staff on the appropriate action to take and who to inform.

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 assessed before they came to live at Galtee More Residential Home. Information gathered during assessment was used to create people's care plans and risk assessments.
- The registered manager referred to current legislation, standards and evidence based on guidance to achieve effective outcomes. This ensured people received effective, safe and appropriate care which met their needs and protected their rights. Care and support for people was reviewed regularly or when people's needs changed.

Staff support: induction, training, skills and experience

- Staff had skills and knowledge to carry out their roles effectively. Staff told us they regularly updated their training. In addition, staff told us induction training was provided and supported them to get to know people well and provide the right support for them. Arrangements had been made to ensure any shortfalls in training were addressed in a timely manner. We saw upcoming courses had been booked for staff to attend.
- Staff told us they felt supported by the registered manager and senior staff. One staff member told us, "We complete a lot of training here, I am doing my NVQ and completing my medicines administration training."
- The home offered learning opportunities for local college students through work experience.

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

- People were supported to maintain a balanced diet. Records, when appropriate documented any associated risks with eating and drinking. Staff supported those who required help with eating and also those who needed modified diets. Guidance from professionals was requested when needed.
- Food, drink and snacks were available throughout the day. One person told us, "There are two choices every day. They come around with brews and snacks quite a lot as well. Its good, homemade food."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager worked effectively with healthcare professionals to ensure people's healthcare needs were met. They worked with services including GPs and community-based health professionals. We saw documented outcomes and the support people required in care plans. One person told us, "They are very good at spotting things and it puts my mind at rest. I'm not on pins like I used to be. They will get the doctor out or liaise with the district nurse if they need to."
- Staff had a good understanding about the current medical and health conditions of people they supported. A visiting health care professional said, "The staff are proactive at notifying us of any concerns, we come in and monitor people's conditions and they will take on board our guidance."

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

- People's individual needs were met by the adaptation, design and decoration of premises. There were adequate spaces for people to spend their time on their own or to share with others. Access to the building was suitable for people with reduced mobility and wheelchairs.
- The registered manager had made significant efforts to ensure the environment was dementia friendly and suited to support people with reminiscing and a 'walk down the memory lane'. A collection of historical items and everyday items that people used in their early years were available to help people with their childhood memories.
- Communal areas were provided where people could relax and spend time with others. A pub had been created with support from a local college for people to enjoy their favourite drinks while play games, quiz, chatting and relaxing. There was signage around the building, which helped to support people who lived with dementia. Corridors were free from clutter, which promoted people's independence.

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 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 MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager took the required action to protect people's rights and ensure people received the care and support they needed. Appropriate applications had been made to the local authority for DoLS assessments. Staff knew how to support people in making decisions and how to offer choice with day to day decisions and activities. From records viewed, we saw consent to care and treatment was routinely sought.

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; respecting equality and diversity

- People were supported by caring and respectful staff. Comments from people included, "The staff can't do enough for you. Sometimes they get busy and I have to wait for help, but they never forget me and help as soon as they can." And, "I'm glad that I live here and nowhere else. I know all the staff because I've been here that long. The night staff are all nice too."
- The registered manager and staff advocated and recognised people's political and democratic rights and assisted them to register to vote and to attend voting on election days.
- We observed people were comfortable in the company of staff and actively sought them out. People were actively included within conversations taking place. Conversations were relevant to people and included current affairs, football and holidays. One staff member told us, "I love working here, we treat the residents like one of our own, they are all lovely. [name remove] is a big football fan so I take them to matches on weekends and they love it."

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

- People and relatives were consulted about care and decisions for their wellbeing and support they required. Staff encouraged people to make daily choices and involved them in doing so. One relative told us; "The staff are absolutely spot on. They had a bit of bother with some night staff but I don't think it affected [relative]. They are up front though and if there are any problems they will tell us, but also tell us how they will deal with it which gives you confidence in them."
- The culture at the home was caring, kind and compassionate. This reflected the attitude of staff and the management team.

Respecting and promoting people's privacy, dignity and independence

- The service provided support that ensured people's privacy, dignity and independence were maintained. We saw staff knocked on people's bedroom doors before entering. We noted people's personal private information was stored securely. There was no personal information left visible for visitors to read.
- The registered manager was responsive to any concerns about people's dignity or treatment. They told us, "We have sent all staff on a dignity and respect training session in light of recent issues with the night staff. The feedback is that people found it beneficial."
- People were supported to project a positive image of themselves through the clothes they wore and the personal care they received. Staff addressed people by their preferred name, they were polite, very friendly and cheerful when supporting people.

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.

Improving care quality in response to complaints or concerns

- The registered provider did not consistently follow processes to ensure all complaints would be dealt with appropriately. While the registered manager received and dealt with complaints appropriately, we found complaints that were directed to the owner, who is the registered provider were not dealt with or responded to in line with regulations. The complaints policy needed to be reviewed in line with current regulations. We recommend the provider consider current guidance on receiving and dealing with complaints and take action to update their practice accordingly.

- People told us they were happy with the care and had no reason to complain. Everyone we spoke with said they were very confident if they ever had any concerns these would be dealt with professionally. One relative told us, "Communication with Galtee has always been very good. I think everything is as good as it can be there, they do a marvellous job."

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The registered manager and staff completed an assessment of people's needs before they could move into the home. This ensured the home was right for the person and they could meet the person's needs.
- Staff were observed being responsive to people's needs. Any signs of distress were dealt with sensitively. Staff knew people's likes, dislikes and preferences and used this information to care for people in the way they wanted. One staff member told us, "We always try to sit down with people and their relatives and get as much information as we can to ensure we know the person."

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.

- We saw people's communication needs had been assessed and where support was required this had been met. There were scheduled visits with opticians to support people who were visually impaired.

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

- People were encouraged and supported to take part in activities to socialise and build on their living skills and independence. There was a strong emphasis on ensuring people had high quality activities and engagement in the home including routine coffee mornings with relatives. Staff organised activities and

clubs within the home and took people out and about in the community. One relative told us, "There are some very caring staff here who go over and above [name removed] takes my [relative] to football on weekends and to the betting office if he wants, he loves it."

- We observed activities taking place throughout the day and people could join in if they wanted to. One person said, "If I want to join in, I do. They don't make you do anything that you don't want to do. I would say there is enough to do here."
- People said their families and friends were made welcome and people were encouraged to maintain relationships outside of the home. One person commented, "As you've seen we play games, throw the ball around and there are things I like to do here. They took me to Oakwell on Saturday to watch Barnsley. It was a nice trip out."

End of life care and support

- People's end of life wishes including their resuscitation status had been recorded in their care plans.
- The staff worked with local health professionals to ensure people had dignified and pain free end of life care. One staff member told us, "Our end of life care here is very good, and nurses have commended on how excellent we are in this area." We saw compliments from relatives of people who had died while living at the home. We read feedback that included, "Galtee More Care Home is a caring and loving home. They made my [relative] contented in his final years. I cannot fault the home for care, food, cleanliness and the way my father was treated. I would recommend this home to anyone."

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 deteriorated to requires improvement. This meant the service management and leadership was inconsistent. The registered provider did not always support the delivery of high-quality, person-centred care.

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

- There was a lack of consistence and clarity and understanding of quality performance, risk and regulatory requirements from the registered provider and the owner. While the registered manager and the staff team were aware of their roles and responsibilities, we found the owner was not always responsive to ensure the premises were safe. The provider lacked organisation and understanding of their role in providing the registered manager with support and oversight on maintaining compliance.
- The registered provider had failed to ensure all required safety checks had been carried out in the premises regardless of the registered manager prompting them to resolve this. The registered provider took steps to resolve this following our intervention during the inspection.

We recommend the provider consider current guidance on good governance and providing oversight on the running of the service and take action to update their practice accordingly.

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 management team knew how to share information with relevant parties, when appropriate. The registered manager understood their role in terms of regulatory requirements. In the majority of the cases they had notified CQC of events, such as safeguarding's and serious incidents as required by law. We discussed the need to ensure all reportable incidents were reported to CQC. The manager acted to address this. The previous inspection rating was conspicuously displayed in the home.

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

- The registered manager and staff were working to promote a positive environment for people, relatives and staff. People and staff told us there was a visible management presence within the home and they would feel comfortable approaching them to share their views. One person told us, "The manager is lovely and friendly, in fact, she's more of a friend than a manager." And, "I think [registered manager] is brilliant. They are very caring, and I know that my [relative] is as safe and as happy as they can be."
- The home was well-organised and there was a clear staffing structure. The registered manager received positive feedback. One staff member said, "[Registered manager] is a good manager, she works with us during busy times, I can trust her to do the right thing if I report anything to her."

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

- The registered manager had systems to gather the views of people and relatives. We saw meetings took place with people and their relatives and staff. Feedback included "The communication from here is really good to, they always ring if they need to tell us anything." However, feedback directed at the provider by people who used the service was not always responded to. The registered manager had made all efforts to ensure the owner was aware of feedback.
- Staff told us they could contribute to the way the service was run through team meetings and supervisions. One staff member said, "[Registered manager] will ask us our views and she will listen to us."
- There were established relationships with other services involved in people's care and support. The service liaised with community health and social care professionals and family members to ensure people's needs were met. This included managing people's ongoing health and behavioural concerns.

Continuous learning and improving care

- The registered manager had audits to monitor the service delivered. Some audits were reviewed and updated during the inspection process.
- The management team attended forums alongside other health care professionals to ensure their knowledge was up to date and to support the quality care being delivered.
- The registered manager and the staff team were very committed to providing people with safe care, which was person-centred in a warm and homely environment. Our observation showed staff and the registered manager showed genuine compassion about the people they supported.