

Castletroy Care Home Limited

Castletroy Residential Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 22 February 2017, and the service was rated good. After that inspection we received an increased amount of information about incidents and concerns in relation to the safety of people living within the home. We also received concerns about the lack of support relatives received from management when complaints or issues about the service were made. As a result, we undertook a focused inspection to look into those concerns. This report only covers our findings in relation to those topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Castletroy on our website at www.cqc.org.uk.

Castletroy is registered with the Care Quality Commission as a care home with nursing and personal care. The home provides care and support for up to 69 older people with a range of care needs and some of whom may be living with dementia. The home is spread across two floors and people living with dementia live on the ground floor. 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 home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The provider did not always ensure that the home was cleaned to acceptable standards and infection control policies were not always followed by staff. Communal areas and bathrooms were also found to be in need of refurbishment. This was a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider had quality monitoring processes in place to ensure that they were meeting the required standards of care but this was not always effective.

There were risk assessments in place that gave guidance to staff on how risks to people could be minimised and how to safeguard people from the risk of possible harm.

People's medicines were managed safely.

This is the first time the service has been rated requires improvement.

You can see what action we told the provider to take at the back of the full version of the report.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement ●

The service was not always safe.

People were not protected against the potential spread of infection.

The provider had ensured proper and safe use of medicines.

There were systems, processes and practices in place to safeguard people from harm.

Risks to people were assessed and their safety monitored and managed so they could be supported to stay safe and their freedom was respected.

There was sufficient numbers of suitable staff to support people to stay safe and meet their needs.

When errors were made by the provider or staff, these were acted on and lessons learned and improvements were made.

Is the service well-led?

Requires Improvement ●

The service was Well-led

There was a consistent approach to record keeping.

There was a clear vision and credible strategy in place to deliver high quality care and support.

The provider promoted a positive culture that was person-centred, open, inclusive and empowering, which achieved good outcomes for people using the service.

The provider ensured that responsibilities were clear and that quality performance, risks and regulatory requirements were understood and managed by all staff.

The people who used the service, the public and staff were engaged and involved in the service.

The service worked in partnership with other agencies.

Castletroy Residential Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 19 January 2018 and was unannounced.

The inspection team consisted of two inspectors from the Care Quality Commission and two experts by experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection, we reviewed information we held about the service, including the notifications they had sent us. A notification is information about important events which the provider is required to send to us. We also reviewed information that had been sent to us from the local authority and members of the public.

During the inspection, we spoke with the two care team managers, head of catering and housekeeping, domestic staff, laundry staff, one agency staff, and three visiting health professionals. We also spoke with six care staff, four relatives and fifteen people who used the service. We looked at the care records of three people who used the service. We observed how staff interacted with people throughout the day including lunchtime, and when people were supported to take medicines.

We reviewed information on how the provider managed complaints, and how they assessed and monitored the quality of the service.

Is the service safe?

Our findings

During our last inspection on February 2017, we rated the safety of the home as good. We carried out this focused responsive inspection because we had received information relating to the safety of people in the home. This was because some people in the home went into other peoples rooms. During this inspection we found that the provider had taken action to safeguard people from this occurring. However we also found concerns around the cleanliness and general maintenance of the home. We found that the provider did not ensure that the home was cleaned to a standard that would prevent the spread of infection.

As we moved around the home we saw that a toilet on the ground floor was smeared with faeces and this was also observed on the underside of a commode over the toilet. We monitored this bathroom in half hourly intervals and noted that it was not cleaned for more than an hour and a half from when we first checked the bathroom. The toilet and commode was cleaned promptly when we brought this to the attention of staff.

We also found that some bathrooms in the home were used as a storage area for slings. Where slings were stored, there were not enough hooks for slings or hoist belts so these were piled on the floor of the bathroom.

Some concerns were also identified in relation to the maintenance of the home which may have an impact on infection control. Carpets around the home which included the ground floor dining room and lounge were stained and the carpets were rippled which was a trip hazard. There were cracked tiles around the toilets and baths in some of the bathrooms; the paper towel dispenser was broken in one bathroom; and one bathroom had a large hole in the ceiling. We spoke with the registered manager about this; they were able to send us a refurbishment plan for the home, which had already identified some of the areas that required repair.

This was a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Staff were provided with protective equipment to prevent the spread of infection and staff confirmed that there were no issues with accessing them. We observed throughout the inspection the use of gloves and aprons, and hand sanitizer was available at points throughout the home.

Most people we spoke with and their relatives felt that Castletroy was a safe place to live. One person said, "I feel safe here, I have no concerns." While a second person said, "I'm safe because there are always plenty of girls about looking after us." A third person said, "I do feel safe here because I can leave everything up to them."

However, some people felt unsafe because some of the people in the home would walk into their rooms. One person said, "You can get people wandering in and out of your room, but the staff are quick to guide them away and tell them 'it's not your room'. They're harmless really." While a second person said, "I've had

a man sleep on my bed. My [relative] found him. He's six feet tall. Last week I had a feeling and I came up here and a lady was sitting on my bed with my jumper and shoes on. The men [residents] come in the night looking for their room. I push them away. They're big and they're strong. I do complain and staff put them back to where they belong. They say 'leave it to us'. I used to put my dressing gown on and take the men back to their rooms. I don't mind, but it's frightening sometimes." Staff explained to us that on occasions some people would walk into other people's rooms and this has been identified as a safeguarding risk. As a result of this, we saw that the home had set up monitoring charts for each floor. One member of staff explained this to us. They said, "We carry out observation checks every half hour and record it on the chart, it's so that we know where everyone is. We also try and occupy the people who do like to walk around with activities where we can."

The provider had effective systems, processes and practices in place to safeguard people from abuse. They had a safeguarding policy in place and had worked closely with the local authority and external agencies to safeguard people from harm. Staff were aware of internal and external agencies such as the local authority safeguarding teams, who they could go to and raise any concerns they had about the people they supported. We saw that information was also available within the home to provide further guidance. Staff spoke to us about how they supported people to stay safe and recognised when a person was at risk of harm. One member of staff said, "We have had training on safeguarding." While another member of staff said, "We keep an eye on our residents, especially those who wander around."

Risks to people were assessed through risk assessments, and their safety was monitored and managed by staff in order for them to stay safe. We saw from people's care documents that personalised risk assessments had been completed for each person who lived at the home and were reviewed regularly. Each assessment identified the risks people faced, the steps in place, and the equipment available to minimise the risk. Risk assessments that were in place included for risks related to medicines, falls, and if a person exhibited behaviour that could be upsetting or put other people at risk.

We observed people being assisted to move around the home safely and where required appropriate equipment was used. One person said, "I don't have any concerns. If I had, I would tell the girls at the desk and they would sort it, or the registered manager. I'm very happy here." We observed throughout the day the use of wheelchairs and hoists to assist people to move safely.

The service ensured that there was sufficient numbers of suitable staff to support people to stay safe and to meet their needs. The provider carried out assessments on people before they moved into the home to ensure they had sufficient staff to support their needs. People we spoke with felt that there was enough staff to support them safely. One person said, "[There is] always plenty of staff popping in and out and when I call them on this [call bell], they come straight away. They're always chatty and smiling, we are very lucky." Staff we spoke with also confirmed that they were able to support people in a safe manner because there was sufficient staff allocated to support people's needs.

We saw that the management and staff all worked together to ensure they learnt from errors that were made and strived to ensure improvements were made. For example, we saw that following safeguarding concerns being raised about people going into others' rooms, the home had set up a monitoring system to try and limit the incidents from occurring. One member of staff said, "We will not stop people from moving around the home, but this new process means that we know where everyone is. If we know one person is at high risk, we will monitor them more frequently." The registered manager was open to feedback we provided on the day of our inspection and provided us with an improvement plan after our visit.

Is the service well-led?

Our findings

The service had a registered manager in post. During our last inspection in February 2017 we rated this area as good. During this inspection this area was rated as requires improvement because of a breach being identified for the area of safe.

People we spoke with were aware of the manager but were not always able to remember their role. One person said, "Oh yes I know [name of registered manager], I know her very well." A second person said, "[Name of registered manager] she comes round now and again." A third person said, "Yes I know [name of registered manager] she comes around sometimes to ask me how I am doing." A relative also commented, "The manager and staff have been marvellous. I have visited quite a few other homes with different family members and this is second to none." Other people were not able to recollect the manager. One person said, "I don't know [who the manager is]. I always go to [staff member]." Another person said, "I don't know (who the registered manager is)." And a third person said, "Maybe she [registered manager] does encourage the staff, but I think she's more isolated as a manager. Not hands on. I only see her walking through the building and she doesn't say anything. No interaction with residents."

The provider had effective systems to assess and monitor the quality of the service. We saw that that user satisfaction surveys were completed and provided generally good feedback about the home and the service. We did note that there had been some issues around the way the registered manager had responded to some people when issues had been raised about the home or the quality of care being provided. We saw from documents provided that the registered manager had taken feedback from the local authorities regarding their approach with some families and the manager had taken this feedback on board.

The registered manager and care team managers completed regular audits and took appropriate action to rectify any shortfalls. When we spoke with the registered manager about the concerns we had around the inspection they were quick to respond. The registered manager said, "I have had some issues with the cleaning staff and I am taking everything on board, we have already discussed setting up half hourly checks for all the toilets and bathrooms, similar to what the hospitals do."

We asked the manager why they had not rectified the issues with the carpets as this was raised in our last inspection. The registered manager and senior staff all confirmed that some areas of the home had already been refurbished and carpets had been changed, which we were shown. However the plan had recently been put on hold due to the central heating for the home requiring urgent replacement but that the refurbishment would be completed this year.

On the day of our inspection the registered manager was away from the home, but we were able to speak to them over the phone. We had spoken with the manager in our last inspection and found that during this inspection they still had a clear vision, which was to support people to receive high quality care and support. We saw that the culture of the service promoted person centred care which was open, inclusive and empowering for the people using the service. People we spoke with indicated that they had had appropriate opportunities to provide feedback to the service.

The manager had understood their responsibility to report to us any issues they were required to notify us of. These are part of their registration conditions and we noted that this had been done in a timely manner. Records were stored securely and were made readily available when needed.

People who used the service were involved in the improvements made within the service. There were regular resident meetings which provided people with an opportunity to comment about the service and discuss improvements.

The service worked in partnership with other agencies such as the local authority, local hospitals and GPs to ensure that people's care was effective, responsive and met the expectations of people and their families.

Staff felt valued and enabled to contribute to the development of the service through monthly team meetings. Minutes of these meetings showed that various issues relevant to the staff's roles were discussed. One member of staff said, "I love it, I wouldn't be here if I didn't. I am really supported." A second member of staff said, "I am able to go to seniors, or [registered manager] is approachable, I can go to her."

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 15 HSCA RA Regulations 2014 Premises and equipment The home was not cleaned to an acceptable standard and some areas of the home were in need of repair.