

Bupa Care Homes (CFHCare) Limited

Colonia Court Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Colonia Court is a residential care home providing personal and nursing care for up to 123 people across 4 purpose built units, each with its own specialism.

Paxman House provides nursing care and support for up to 35 people. Mumford House accommodates up to 28 people who are living with dementia. Blomfield House is a residential unit for up to 30 older people and Amber Lodge provides specialist nursing care for up to 30 people diagnosed with Huntington's Chorea. At the time of our inspection there were 108 people using the service.

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

People and their relatives were positive about the service and the care provided. One person told us, "I need to tell you how marvellous it is here. They are wonderful. I couldn't ask for better people to look after me. I really didn't think it would be like this, but it really is a wonderful place to live. I feel very safe here." Staff were highly thought of and were said to be 'the best thing' about this service. Caring attitudes, professionalism and welcoming manners positively impacted the lives of people using the service and family alike. Relatives stated many times how fortunate they considered themselves having their loved ones living at Colonia Court and they were so grateful for this.

The atmosphere within the home was friendly and welcoming and staff were warm and considerate towards the people they cared for. A relative told us, "[Family member] is looked after very well, all their needs are met. [Family member] has dementia, staff are very good to [family member] and [family member] likes them. Yes, they feel safe, they think of Colonia Court as their home now."

Management and staff were dedicated and committed to the service. There were enough staff available to meet people's needs. Relatives told us there were always staff around checking and interacting with people. Staff knew how to keep people safe and protect them from avoidable harm. A relative told us they had fought for their family member to come to Colonia Court because the staff understood their condition and were aware of the risks to their family member's health and welfare, "They are constantly supervised and staff anticipate their needs". Another relative said, "My [family member] has been here one week and the difference is staggering."

People received their medicines as prescribed and systems were in place for the safe management of medicines.

The registered manager investigated incidents, accidents and complaints, and took actions where needed to improve practice and prevent reoccurrence. Relatives were considered partners in care and felt fully involved. Relatives told us they knew who to approach if they had a concern and were confident that anything raised would be dealt with.

The service was well led, the registered manager provided clear and consistent leadership. People and staff

felt well supported. Systems were in place to monitor the quality and safety of the service.

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 requires improvement (published 31 May 2022) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Colonia 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?

Good ●

The service was well led.

Details are in our well-led findings below.

Colonia Court Care 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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by 4 inspectors and 2 Expert 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.

Service and service type

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

Registered Manager

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

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

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used all this information to plan our inspection.

During the inspection

We spoke with 10 people who used the service and 15 relatives. Some people could not give us feedback. We, therefore, used informal observation to evaluate their experiences and to help us assess how their needs were being met. We also observed how staff interacted with people. We looked at records in relation to 14 peoples care.

We spoke with the registered manager, a senior manager, 2 clinical managers and 15 staff including 3 unit managers. We looked at records relating to the management of the service and systems for checking the quality and safety of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People were protected from risks associated with their care needs. Assessments identified risks related to mobility, falls, moving and handling, use of bed rails, nutrition and skin condition. Management plans provided guidance for staff on how to support individuals in a safe way and reduce any risk identified.
- A review of handrail provision in communal areas had been carried out and handrails installed where required.
- A relative told us, "[Family member] lost weight when they were in hospital, but now they have put weight back on. There is a choice of food and they will always cook something else they may want; they are always encouraging [family member] to drink." People's weights were monitored and where weight loss was identified they were referred to appropriate professionals and provided with prescribed supplements, fortified foods, cream shots and nutritional snacks.
- People found at risk of skin breakdown were provided with pressure relieving equipment and were regularly supported by staff to reposition and prevent skin breakdown. Where people had acquired skin wounds/breakdown prior to their admission to Colonia Court, staff had successfully helped their skin to improve or heal.
- Equipment was regularly serviced and well maintained. Clinical equipment checklists were completed each day to ensure equipment was in good condition and functioning correctly for immediate use.
- Risk assessments had been carried out in relation to contractors carrying out refurbishment with actions to be taken to minimise risk identified.

Systems and processes to safeguard people from the risk of abuse

- Interactions between people and staff were relaxed and comfortable; people looked happy within their environment. Staff had formed trusting and positive relationships with people they cared for and were responsive to their needs.
- Relatives considered their loved ones to be safe at Colonia Court and gave examples of contented family members who were well looked after, well-groomed and happy and content. One relative said, "Safe, oh yes

[family member] is very safe here, there are always staff around to be with them and staff pop in to check on them. They are very caring. [Family member] feels very safe and they keep her safe, they get all the help they need. [Family member] always says they are happy and they love the food. I am very lucky they are in here."

- Systems and processes were in place to safeguard people from risk of abuse.
- Staff had a good understanding of keeping people safe; the processes to follow if they had any concerns and how to report them.
- The registered manager was aware of their safeguarding responsibilities, liaised with the local authority about safeguarding issues and where concerns had been raised managed them well.

Learning lessons when things go wrong

- Incident, accident and safeguarding investigations were undertaken; where failings were identified actions were taken to drive improvement and prevent re-occurrence.
- Learning from lessons was shared and staff were encouraged to reflect on practice and learn from incidents for improvement.

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.
- 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.
- Staff treated people with kindness and respect; they understood each person's needs, preferences, and what was important to them.

Staffing and recruitment

- At the time of our visits staff were suitably deployed and there were enough staff with the right competencies and skills to meet people's needs and spend time with them. The registered manager told us they kept staffing numbers under constant review and would increase when necessary.
- Staff were highly thought of by people using the service and relatives and were said to be "the best thing about the service". Relatives felt there were always enough staff.
- Although the service had a stable staff team with a high retention record, there was an effective ongoing programme of recruitment and only applicants who were right for the job were employed.
- The provider had robust recruitment systems in place. Pre-employment checks were undertaken before new staff began to work to ensure they were suitable and safe to carry out their role. Gaps in employment and any discrepancies found from checks were explored further.

Using medicines safely

- People received their medicines as prescribed. There were systems in place for the safe management of medicines.
- Staff received training in the administration and management of medicines and their competency to do so was regularly assessed to ensure their practice was safe.
- Staff administered medicines in a safe, calm and person-centred manner giving clear explanation to the person about what they were for, and time to take their medicine.

Preventing and controlling infection

- At the time of our inspection the service had a COVID-19 outbreak on one of the units. The outbreak was being managed effectively. People were being supported to minimise the spread of infection. Staff were using PPE (personal protective equipment) effectively and safely. Additional and regular touch point cleaning was evident.
- The service was undergoing a complete refurbishment and redecoration across all units, one by one. Amber unit was yet to be refurbished. The bathrooms and toilets on this unit, although not in use at the time, were unhygienic and difficult to keep clean in their current state. We were given assurance the bathrooms and toilets on this unit were next to be addressed in the refurbishment programme and would be completed by the end of March 2023.
- We found on some units toilet brushes and holders were soiled and stained and a source of cross infection. We brought this to the attention of the registered manager who immediately took action and purchased new toilet brush and holders for each unit.
- Daily cleaning schedules and the providers Housekeeping Handbook did not include instruction for the cleaning and maintenance of toilet brush holders. The registered manager raised this at the time with the provider's relevant department for immediate attention.

Visiting in care homes

- The providers approach to visiting aligned with government guidance.
- People received visits from family and friends.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we found no evidence people had been harmed. However, processes in place to monitor the safety and quality of the service were not always operated effectively. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Relatives considered the service was well managed. Some relatives did not know who the registered manager was, but the feeling for those seen to be in management positions (for each unit) was very positive. They knew who to speak to if they were unhappy about anything and they were confident that any concerns/complaints would be dealt with and resolved if possible.
- Staff were aware of their roles and responsibilities and had confidence in the management team.
- The registered manager was supported by 2 clinical leads and unit managers who provided a detailed overview of what was going on in the service. They equally provided support to staff and people using the service.
- Audits were completed on a wide range of areas of service provision with an ongoing action plan for each unit. Areas identified for improvement action were reviewed regularly to ensure completion.
- Reflective practice was promoted with staff to progress improvement and also identify where things were going well. This was shared across the service and any actions were added to the service overall improvement plan.
- The registered manager had a strong commitment to best practice and continually improving the service, and outcomes for people. Demonstrating a good knowledge and understanding of the services provided.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager led a dedicated staff team who were committed to the vision and values of the

service. People were kept at the heart of the service and staff felt valued, supported and included.

- People and relatives were exceptionally positive about the service. One relative said, "It is like a family, everyone knows you. It is very friendly and welcoming". Another said, "The best thing is the friendly staff and the information I have been given, staff always listen to me if I suggest anything, they are so good with my [family member] and they help us to communicate virtually."
- Staff were highly motivated, showed pride in the care and support they delivered to people and were respectful in how they delivered it in a consistent and dignified way. A relative told us, "The staff are all caring and you can tell they are really very sincere."
- Relatives were mostly involved in their family members care reviews/meetings and were kept informed and updated about any changes or incidents.
- One relative said, "Yes, they speak to me about [family member's] care and I have been to meetings about [family member]. They involve me in it all. The activity co-ordinator talks to me about [family member's] likes and dislikes." Another relative told us, "They involve me, but if it is medical then I leave it to them. If I said anything they involve me and they ask me. I am involved in meetings and reviews. I am involved in their care plan with their likes, preferences and interests." Another said, "Yes, they give me a ring and ask if I want to know anything and let me know things, they involve me."
- Emphasis was placed on people experiencing meaningful occupation and stimulating activity. Activities were planned around people's individual and mutual interests, preferences and wishes, based on what was important to them.
- One person never had the opportunity to receive their medals when they were in the RAF (Royal Air Force). For their 99th birthday staff sourced the medals and arranged for a representative from the RAF to come and present the medals to the person during an award ceremony hosted by the service.

Working in partnership with others

- Colonia Court was transparent and collaborative with all relevant stakeholders and agencies. It worked in partnership with key organisations such as Huntington's Chorea, Alzheimer's Society and the hospice to support care provision, service development and joined up care.
- Management had involved a Huntington's specialist in the proposed planned refurbishment and decoration of Amber unit, to ensure it met people's needs.
- There was clear evidence of collaborative working with GPs, nurse practitioner, chiropody, community dentist, diabetic clinics, speech and language therapist (SALT), dieticians, dementia team and clinical psychiatrists.
- The service was part of the 'Red Bag' scheme, a collaboration between care homes and the NHS to share vital information about an individual's health, care and support needs to improve the transition between services.
- Relationships were formed with the local community. A go back to work for the day was arranged for one person at a large known supermarket. During World Cup 2022 people attended the local sports park and were supported to either spectate or take part in a range of activities.
- A relative told us, "There is a lot of community involvement, local children go in and sing." Another told us about a local dancing school and pantomime visited the service.

Continuous learning and improving care; 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 and leadership team ensured a strong emphasis was placed on continuous learning and improvement. Governance arrangements were embedded and effective. Trends and themes were clearly identified, and corrective actions were taken proactively when needed.

- Duty of Candour is a requirement of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 that requires registered persons to act in an open and transparent way with people in relation to the care and treatment they received. We found the provider was working in accordance with this regulation within their practice.