

St Michael's Care Homes Limited

St Michaels Nursing Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

This inspection took place on 4 April 2017 and was unannounced.

We carried out an unannounced comprehensive inspection of this service on 11 October 2016. At which a breach of legal requirements was found. A warning notice was served in respect of Regulation 18. This was because people's safety was sometimes being compromised as there were not enough care staff to provide safe care.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook this focused inspection on the 4 April 2017 to check that they had followed their plan and to confirm that they now met legal requirements related to Regulation 18. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for St Michaels Nursing Home on our website at www.cqc.org.uk.

St Michaels Nursing Home is registered to provide accommodation and care, including nursing care for up to 39 older people, with a range of medical and age related conditions, including arthritis, frailty, mobility issues and dementia. On the day of our inspection there were 29 people living in the service, who required varying levels of support. The registered manager told us that the majority of people living at the home had low needs and that only people assessed as having low needs had been admitted since the last inspection due to the home's staffing levels.

At the time of our inspection the service had a registered manager. However, they were working their notice period and due to leave employment at St Michaels Nursing Home on the 12 May 2017. 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. After the inspection, we were informed about plans to recruit a new manager and how the provider would be monitoring the quality of care during this transition.

At this focused inspection on the 4 April 2017, we found that improvements to the number of staff had been made and the warning notice had been met.

The manager also told us that staffing levels had been increased since the previous inspection.

Feedback from staff regarding the staff numbers was mixed. One staff member told us that they thought the staffing numbers were fine. Another member of staff told us that it was variable.

We saw that care staff were present most of the time in communal areas such as the lounge and dining room. On occasions we saw that there was very little interaction between staff and people. Staff appeared to

have low morale and did not look happy in their work and we have fed this back to the provider for action.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve the safety of the service due to improvements made to staff deployment.

We could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

St Michaels Nursing Home

Detailed findings

Background to this inspection

We carried out this focussed 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, in particular Regulation 18.

This inspection took place on 4 April 2017 and was unannounced. It was carried out by one inspector.

We carried out an unannounced comprehensive inspection of this service on 11 October 2016. At which a breach of legal requirements was found. A warning notice was served in respect of Regulation 18. This was because people's safety was sometimes being compromised as there were not enough care staff to provide safe care.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook this focused inspection on the 4 April 2017 to check that they had met the warning notice in respect of Regulation 18. We inspected the service against one of the five questions we ask about services: is the service safe? This is because the service was not meeting legal requirements in relation to that question.

Before this inspection we reviewed the information we held about the service, including the previous inspection report and the provider's action plan following that inspection. We looked at notifications which had been submitted. A notification is information about important events which the provider is required to tell us about by law.

We observed care in the communal areas of the service. We spoke with people and staff, and saw how people were supported during their lunch. We spoke in detail with three people living at the service, three care staff and the registered manager. We spent time observing care and 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 looked at the staff rota for the current week and the previous three weeks and care records for two people.

Is the service safe?

Our findings

At the last inspection on 11 October 2016, the provider was in breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. A warning notice was served in respect of Regulation 18. This was because people's safety was sometimes being compromised as there were not enough care staff to provide safe care. After the inspection, the provider wrote to us to say what they would do to meet legal requirements. Improvements had been made in relation to staffing levels at the service. We found the provider had met the warning notice.

On the day of our inspection there were 29 people living in the service, who required varying levels of support. The registered manager told us that the majority of people living at the home had low needs and that only people assessed as having low needs had been admitted since the last inspection due to the home's staffing levels.

The registered manager told us that staffing levels had been increased since the previous inspection. Staffing rotas for the current week and the past three weeks showed that there was a registered nurse on duty at all times. There were six or seven care staff in the morning, four or five in the afternoon and two at night. Ancillary staff were employed for domestic duties. The staffing rotas demonstrated that there was a high level of staff sickness which had been covered by agency staff at short notice. The staffing levels were sufficient to provide safe care for the people using the service. However some people and staff felt they would benefit from more time to, "Chat."

People at St Michaels Nursing Home told us they, "Liked it." That the staff were, "Capable, nice people and good to talk to." Feedback was varied. One person told us that they felt isolated and, "It would be nice if the staff came in for a chat". Another person said, "I'm not bored, I like my own company."

During our inspection we observed care delivery at different times throughout the service. Staff did not appear rushed. We saw that people's requests were answered. However two people we spoke to gave examples of when they had had to wait for care. For example, one person told us they had on occasions waited until 11:00am for personal care. Another person who told us that they sometimes had to wait for care, said, "I don't really mind. I like it here."

Feedback from staff regarding the staff numbers was mixed. One staff member told us that they thought the staffing numbers were fine. Another member of staff told us, "If there were more staff, we could sit and chat to people." Another added, "If we had one more staff member to float, that would give us time." A further member of staff added, "Some days it is busy. It depends who is on shift and which agency staff we have. Other days it's ok."

We saw that care staff were present most of the time in communal areas such as the lounge and dining room. On occasions we saw that there was very little interaction between staff and people. Staff appeared to have low morale and did not look happy in their work.

Staff told us that they, "Could do with more guidance and training." They felt that they should have, "Better training and induction, especially for new staff." Another staff member told us that, "The induction is the same for all staff, regardless of their experience and ability." They felt that staff without experience working in care should have more induction and training. A further staff member told us that they, "Feel they need updates on the training."

Staff told us that they, "Were not paid to attend training. That they were expected to do the training in their own time." One staff member told us, "If I'm doing a 12 hour shift, I only get paid for 11. I don't get paid for my breaks." Another added, "If you're doing a six hour shift, you get paid for all of it." Staff gave many examples of when they had not had breaks because they were busy.

Staff told us that they had confidence in the registered manager and that, "[Name] appreciates things, us." Staff told us they felt apprehensive because the registered manager was leaving. They told us that they, "Can get stressed at the thought of [Name] leaving. Which can make a bad atmosphere for the residents." We gave this feedback to the registered provider and following the inspection had confirmation that a new manager had been appointed. The provider gave assurances that they would be closely monitoring the stability of St. Michaels Nursing Home during the handover of leadership. At our next comprehensive inspection we will assess how the new leadership has embedded to continue improvements at the service.