

The Orders Of St. John Care Trust

Edwardstow Court Care Centre

Inspection report

Edwardstow Court
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Date of inspection visit:
12 October 2022

Date of publication:
17 November 2022

Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Edwardstow Court Care Centre is a care home without nursing providing care to 34 people aged 65 and over at the time of the inspection. The service can support up to 48 people.

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

We undertook this targeted inspection to check on a specific concern we had about medicines, falls and safeguarding.

People were supported by staff who understood how to keep them safe from the risk of abuse. Appropriate safeguarding procedures were in place and staff had been trained in how to protect people from abuse.

People living in the service received personalised care around their medicines. The provider was taking action to ensure information about people's medicine needs and action taken in response to medicine audits would always be recorded. The Medicine Quality Lead was supporting the home and a pharmacy audit was taking place in November to further review medicine practices.

There were systems in place to monitor risks associated with falls. Staff had received training in falls prevention and the registered manager routinely monitored any patterns. They were developing the way in which they recorded actions taken and required to further strengthen this process.

The registered manager was continually reviewing the challenges they experienced with recruitment and retention to minimise the impact on people. Additional support had been put in place to support agency staff and agency staff told us the investment from management had been beneficial. One member of agency staff said, "It's a nice home. As soon as a new member of agency staff comes in the registered manager gives a walk around and explains everything, all their policies and procedures." Staff were positive about how the Registered Manager was addressing the challenges. One staff member told us, "The registered manager manages well to ensure that staff provide safe and personalised care."

The provider had increased their support and oversight of the home to ensure that any actions identified by the registered manager and quality audits were completed and that people remained safe whilst improvements were being made.

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 2 December 2021).

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about medicines, falls and

safeguarding. The overall rating for the service has not changed following this targeted inspection and remains good.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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 Edwardstow Court Care Centre 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?

At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Edwardstow Court Care Centre

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on concerns we had about medicines errors, safeguarding and falls.

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 an adult social care inspector and a medicines inspector.

Service and service type

Edwardstow Court Care Centre 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. Edwardstow Court Care Centre is a care home without 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 used the information the provider sent us in the provider information return (PIR) from February 2022. This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with six people who used the service about their experience of the care provided. We spoke with seven members of staff including the registered manager, bursar, activities and well-being co-ordinator, two care workers, a housekeeper and two agency care assistants.

We reviewed a range of records including people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider and met with the Operations Director and Area Operations Manager to validate evidence found.

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 good. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check concerns we had about medicines errors, safeguarding and falls. We will assess the whole key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- Staff knew how to raise any safeguarding concerns and were committed to keeping people safe. One staff member said, "Safeguarding training is good and I'm very clear about how I would raise concerns. I wouldn't hesitate."
- Allegations of abuse had been investigated and acted upon appropriately. Outcomes of investigations which supported lessons learned moving forward were documented.
- The registered manager liaised with the local authority and other relevant agencies when a safeguarding concern was reported to them and took appropriate action to keep people safe from further risk of abuse.

Assessing risk, safety monitoring and management

- The registered manager closely monitored falls. They ensured all staff were familiar with the provider's falls policy in response to an increase of falls. Staff were able to clearly describe the falls policy and the action they would take in the event of a fall.
- Staff had received training to deal with emergency situations this included how to respond in the event of a fall.
- The registered manager had organised for bespoke falls training from an internal trainer. They had provided the trainer with information around the recent falls so that trainer could cover specific areas of concern and development for the staff team.
- Falls audits were completed monthly so any patterns could be closely monitored. The registered manager was developing the recording of any actions taken or required to further strengthen this process.

Using medicines safely

- Policies and processes around medicines were clearly defined and staff had completed medicines training and competencies.
- Agency staff were frequently used and monitored. However due to a series of medication errors, management at the home had requested consistent staff from the agency to minimise errors.
- Staff also told us they felt management within the home were approachable and listened to their concerns. Staff told us they were at times interrupted when doing the medicines administration rounds when other staff were not available to respond to people. The provider was taking action to recruit staff routinely reviewed staffing levels to make sure there were enough staff to meet people's needs. Where the registered manager had identified potential concerns or changes to people's needs, they had proactively

taken action to mitigate the impact upon people.

- Staff knew people well and gave medicines in a personalised way. Staff sought help from other healthcare professionals to optimise medicines where required. People's medicines were reviewed regularly. Care plans specific to how people prefer to take their medicines were being updated to ensure when people transferred between services, their individualised needs around medicines would be communicated.
- People's medicines and administration times had been reviewed by their GP to ensure they were being given in accordance with their needs and preferences.
- Documents to support staff in the use of PRN ('when required') medicines were in place and specific to each service user.
- The provider was taking action to ensure daily audits around medicines were always completed as part of the 'resident of the day' checklist.
- We saw evidence of Mental Capacity Act reviews in place for medicines were appropriate and staff proactively prompted deprescribing with the GP to ensure people were not on unnecessary medicines to control behaviour.
- The service had an open and honest culture around medication errors and when things went wrong, swift action was taken to ensure people were safe. Learning was discussed with all staff and at the time of the inspection, incident training was being rolled out for all senior staff.
- A number of quality audits for medicines were completed within the home. The provider's Medicine Quality Lead was supporting the home and a pharmacy audit was taking place in November to further review medicine practices. The provider told us that they were taking action to ensure plans as a result of incidents or audits were always clearly documented to support the monitoring of improvement.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

The provider's policies around visiting ensured they supported visiting in line with the latest guidance. People's care records showed us that visiting was enabled.