

Morris Care Limited

Morris Care Centre

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?	Good

Summary of findings

Overall summary

Morris Care Centre is a service that supports older people with nursing and personal care needs. It provides accommodation for up to 85 people. There were 85 people living at the home on the day of our inspection.

Rating at last inspection

At the last inspection, in February 2015, the service was rated Good. At this inspection we found the service remained Good.

Why the service is rated Good.

People continued to receive care which protected them from harm and abuse. Staff supported people's needs in a safe way, monitored risks to their safety and were available when people needed support. People's medicines were managed and stored in a safe way. People had their medicines when they needed them.

Staff were supported through training and meetings where their views were listened to. Staff were encouraged to develop their skills so that they could develop their professionalism and take additional responsibilities in the home. Some of the staff had worked at the service for several years providing people with a continuity of care

People received care that was kind and compassionate. Care was tailored to the individual and provided by staff that were respectful, trained, well supported and managed to ensure that people received a caring service.

Relationships with families and friends were respectful. People were able to maintain and develop their ties with people important to them. Friends and families built relationships with other people living in the home. This provided people living in the home with a continuation of friendships and interactions with a wide group of people that were interested in them as individuals and that enhanced their quality of life.

People received care and support that was individual to them. Their support needs were kept under review and staff responded when there were changes in these needs. People had opportunities to give feedback and make complaints about the care and support they received. They also had opportunities to make suggestions for improvements at the service and these were listened to.

People lived in a home where they felt confident to express themselves and felt comfortable to speak with staff and managers about concerns and issues that affected them. The provider had systems in place that continued to be effective in assessing and monitoring the quality of the service provided.

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 remains good.	
Is the service effective?	Good •
The service remains good.	
Is the service caring?	Good •
The service remains good.	
Is the service responsive?	Good •
The service remains good.	
Is the service well-led?	Good •
The service remains good.	



Morris Care Centre

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 was a comprehensive inspection, which took place on 23 May 2017 and was unannounced. The inspection team consisted of two inspectors and an 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 service.

Before our inspection we reviewed information held about the service. We looked at our own system to see if we had received any concerns or compliments about the home. We analysed information on any statutory notifications we had received from the provider. A statutory notification is information about important events, which the provider is required to send us by law.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This information helped us to focus our inspection.

We contacted representatives from the local authority and Healthwatch for their views about the home. We used this information to help us plan our inspection of the home.

We spoke with 12 people who lived at the home. We also met and spoke with three care workers, four nurses, two activity coordinators, the deputy manager, the clinical nurse manager and the registered manager. We viewed five people's care and medicine records. We also viewed other records relating to the management of the home.

We observed people's care and support in the communal areas of the home and how staff interacted with people. We did this to gain an understanding of people's experience of the care and support they received.



Is the service safe?

Our findings

One person said, "Yes I feel very safe here. There are enough staff about and I have a buzzer to call them if I need assistance." Another person said, "Yes I do feel safe. They provide me with all I need and I can call them if I need anything, they are always about. As I am on the first floor I feel very safe here. "A third person commented, "Yes I do feel safe and secure. The staff do check on me regularly and that's makes me feel quite safe." People continued to be protected from abuse and harm. Everyone we spoke with told us they felt safe living at the home and with the staff that supported them.

Staff had received training in how to keep people safe and protect them from abuse and discrimination. They understood how to respond to concerns and who to contact to ensure people remained safe. The registered manager understood their responsibilities in reporting and dealing with concerns. They would follow the local authority safeguarding procedures and notify CQC as required.

One person told us, "I am very safe. The staff here are very good and always there for me. I can get about on my frame myself, but they always watch me to make sure I am safe when going around." Risks to people continued to be managed in a way that protected them and kept them safe from avoidable harm. One person showed us the alarm bell in their room, which they could use to call for help. They confirmed that they had used it during the night and staff had responded very quickly, so they felt safe.

One person told us, "I did fall a while ago. I was in the lounge and thought I could reach the television remote to change the channel. I got up and as I stretched for it I fell over. The staff were with me very quickly." The support people needed was provided in a way that enabled them to live their lives safely and maintain their independence. Clear plans were in place to ensure people were protected from risk both within the home and when out in the community. Staff were aware of risks associated with people's care and knew the support they needed to help keep them safe.

We looked at records which showed that the provider had made checks before staff started work at the home. Staff confirmed the provider had requested their previous employers to provide references for them. The records showed that staff had not been allowed to start work until criminal checks on their background had been completed to ensure they were suitable to work with people who lived at the home. These checks are called disclosure and barring service checks.

One person told us, "They do my medicines for me. Rather them than me as I'd get muddled up. They know what they are doing and are always on time." Another said, "The staff are good with medicines. They are very careful with me. I have them at certain times and they never miss me." A third person said, "Yes I do have medicine and tablets. They bring it around to me and help me take it." People's medicines continued to be managed safely. People said that staff gave them their medicines at the same time each day. We saw people received their medicine safely and staff checked they were happy to take them. Staff checked each person's medicines with their individual records before administering them and records were completed correctly. Nursing staff administered people's medicines. Staff we spoke with confirmed they received the training they needed to do this safely, and their competency was checked.



Is the service effective?

Our findings

A person commented, "They (staff) are all very good and knowledgeable too. They are very careful with me, they know what I need." People continued to receive effective care and support from staff who had the skills and knowledge to meet their needs. People told us they thought staff knew what they were doing and that they understood how to support them. Staff told us they received training and support that was specific to the people they supported and their individual needs. They had received training which helped them to understand and support people with their medical needs. Staff told us they had plenty of opportunities to attend training and understood how developing their skills benefitted people living at the home. One staff member said, "Yes I am very happy here. The training is all the time, there is a lot of it, but they pay you for it here. I am kept up to date on things"

Staff told us they had opportunities to reflect on their practice and discuss after incidents through regular one to one meetings with their line manager. They told us that during these meetings they received feedback on their practice and discussed their training requirements.

The service took the required action to protect people's rights and ensured people continued to receive the care and support they needed. People told us and we saw that staff ensured they had people's permission before they supported them with anything. Staff understood the importance of obtaining people's consent. The deputy and registered manager understood their responsibilities in monitoring people's ability to give informed consent in line with the Mental Capacity Act. 2005.

People had access to sufficient food and drink. One person said, "It is good food here. No complaints at all about that and you get a choice of what to eat and drink." Another person said, "The meals are absolutely beautiful and you get a good choice and you get three courses at lunchtime." People told us they could choose what they wanted to eat each day even though there was a planned menu. We saw people had access to fresh fruit and drinks. Staff told us everyone was encouraged to eat a well-balanced diet.

A member of staff explained, "We have very good links in the community and provide advice to hospitals and community matrons when needed. It works both ways for us." People continued to be supported by staff to maintain good health. Staff supported people to have visits from their GP, consultants and other professionals and their on-going medical conditions, such as diabetes were monitored appropriately. Staff said, "We also ring the hospital wards direct when we have concerns about people and arrange admissions with the ward so that people do not have to wait in accident and emergency which makes them less anxious."



Is the service caring?

Our findings

People continued to be supported by staff they had positive relationships with. One person said, "Certainly the staff here are very good and helpful. Like I say, nothing is too much bother for them. They always pop in and have a natter with me." Another person said "They are very good here, all of them. They always come past and ask if I'm alright and do I want anything. They do make time for me." We saw that people were treated with kindness and the staff knew each person, their personal histories and interests well.

One person said, "Yes they are caring in my opinion. They are always very bright and cheerful and they always come and talk and make time." People were comfortable around staff and there was a mixture of smiles, laughter and seriousness between them when they spent time together. People expressed their wishes and opinions about the care and support they wanted and needed. They told us they felt they were listened to by staff and they felt involved in their own care. People discussed what they wanted and what their goals were for the future. They told us the conversation was led by them and the focus was on them and what was important for them. They said, "It is very good indeed. It's lovely here and the staff are brilliant, not in your face all the time, but there if you want them. Yes I feel quite valued here."

One person told us, "They respect my dignity most certainly. They close the door when moving me and if having a wash they cover me well." Staff respected people's dignity and privacy. People were encouraged to maintain their independence as much as they were able to.



Is the service responsive?

Our findings

People continued to receive care and support that was individual to them. All the people we spoke with told us they enjoyed living at the home because they were supported the way they wanted to be. Staff asked them about how they wished to be supported to meet their personal and social care needs and they felt staff knew them and their wishes.

A person told us, "They do have activities. I like the bingo and singers; in fact I like them all. We all have a good laugh with them" Another said, "Well to be honest I've only been here a week, but the activities lady came to see me earlier to see what I like and would like to do. That shows that they do care for you here and your interests"

Activities and community access were an important part of people's lives. People were supported and encouraged to engage in a variety of activities and some people regularly enjoyed spending time independently out in the local community. During our inspection we observed some people enjoying activities or quietly reading. We saw that weekly activities were planned for people to participate in if they wished. We saw a pictorial record of people's activities they had engaged in.

People told us if they had any complaints or concerns they would speak up and let staff know. One person said, "I would go to the manager or tell one of the staff when they come round." People were encouraged to give their opinions on the care and support they received and told us they were listened to. The provider had a complaints procedure in place, which people had access to although they preferred to speak directly with staff and managers. Staff told us about the one to one time they spent with people. This was an opportunity for people to express their opinions about their experience of the support they received. Staff and the person really valued this time and helped them carry out their role well.



Is the service well-led?

Our findings

People told us they enjoyed being involved in the day to day running of the home. People told us they felt able to talk openly with the registered and deputy manager at the home. One person said, "It certainly is well led. What I really like is they are all so polite and they appear to be happy and smiling." Staff told us the managers were involved in the daily routines of the home and knew what happened on a day to day basis. Staff felt supported by the management and one staff member told us, "We have good communication with our managers who support us well"

We asked staff about the culture and values of the service. Staff told us that they all worked well as a team and respected one another. Staff also said that they highly respected the people who lived in the home. One staff member said, "The manager is good and they are always available for a chat if I want one."

There were a number of systems in place to identify and rectify any issues with the quality of the service when they arose. There were also processes in place for regularly auditing areas such as care plans, medicines, infection control and the overall maintenance of the service. The care plans and other records we looked at were well maintained, up to date and stored securely.

The home is required to have a registered manager in post. 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 registered manager was present during the inspection. They demonstrated they were forward thinking and person orientated.