

Mr Keith London-Webb

Long Close Retirement Home

Inspection report

23 Forest Road
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Poole
Dorset
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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

Long Close Retirement Home is a residential care home registered to provide care and support to up to 16 people. The service provides support to older people some of whom were living with dementia. At the time of our inspection there were 11 people living at the home.

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

People and their relatives told us Long Close Retirement Home was a happy place, care was provided to a high standard. Staff described working at the home as, 'just being with family.' People told us they felt safe living at Long Close.

Utilities checks were not always carried out as planned, the provider and registered manager took immediate action and booked in the necessary checks. We received assurances the environment was safe. The registered manager was in the process of reorganising the documentation and office at the home. Risks people faced day to day had been identified and assessed, there were clear instructions for staff for safe ways of working. Staff told us they had enough information to enable them to provide safe care. Recruitment procedures were in place and all necessary checks had been taken to ensure staff were suitable to work with people.

People received their medicines as prescribed. The home was clean and free from clutter, people told us they liked the décor and homely feel of the environment. The provider told us there was a continual redecoration plan for the home. People's bedrooms were spacious, lounges were well lit and there were various places people could spend their time in the home, as well as access to the gardens and grounds.

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 understood the importance of asking people how they wished to receive their care.

Audits were used to monitor the standard of care within the home, the registered manager told us they were making changes to the programme of audits to use them for continual improvements. Action points from audits were carried out and the registered manager and provider continued to work through improvements. Long Close Retirement Home actively sought feedback on the service it provides. Annual surveys and regular meetings with people and their relatives meant they were involved in how the home operated.

Staff felt appreciated by the provider and registered manager and were complimentary about their colleagues. They told us they were proud to work at the home. Long Close Retirement home worked well with external professionals and we received extremely positive feedback about how the home worked together with health services to ensure people received the best care.

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 25 January 2019).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

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.

Long Close Retirement 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 1 inspector.

Service and service type

Long Close Retirement Home 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. Long Close Retirement Home 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 sought feedback from the local authority service improvement and safeguarding teams. The provider completed 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 4 people who lived at Long Close Retirement Home about their experience of the care provided. We spoke with 5 members of staff including the registered manager, provider, care workers and the chef. We spoke with 1 health and social care professional who works with the home regularly.

We made observations throughout the day of interactions between people and staff. We reviewed a range of records. This included 2 people's care records and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. We made observations of interactions between people and staff, there was laughter and affectionate exchanges.

A variety of records relating to the management of the service, including policies and procedures were reviewed.

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. At this inspection the rating has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- General risk assessments were in place for the home. However, some utilities checks had not taken place as planned. The provider and registered manager took immediate action to book in the necessary checks and told us they would devise a system to ensure this did not happen again. We were assured by the steps taken during the inspection.

We recommend the provider ensures all necessary environmental checks always take place as planned to ensure people are safe.

- People had risk assessments in place for all their care and support needs. Staff told us they knew people's risks well and the information they had access to was of a good standard. Risk assessments had been reviewed monthly to ensure they remained current.
- Equipment used by staff to support people to move, and transfer had been checked and tested by an external specialist to ensure it was safe to use.
- People had personal emergency evacuation plans in place. The registered manager was in the process of developing the plans further. This meant people's needs were known if they needed to leave the home in an emergency.
- Accidents and incidents were recorded. The registered manager reviewed all accidents and incidents and records showed the appropriate actions and referrals had been made.
- Learning from incidents and events in the home were shared amongst the staff team, informally day to day and in team meetings.

Systems and processes to safeguard people from the risk of abuse

- People, their relatives and staff told us Long Close Retirement Home was a safe place to be. Some of the comments were: "I feel safe as I was all on my own, now I have someone around if I have any problems", "I do feel safe, I am looked after very well", "I am very happy here, I feel safe, there is always somebody about, they come if I call them."
- Staff told us they knew how to recognise the signs that someone may be at risk of harm or abuse. They knew who to report their concerns to both inside the home and externally. The registered manager knew the process for reporting safeguarding concerns to the local authority. Staff were confident any concern would be followed up. A member of staff told us, "They [registered manager/provider] would take thing seriously, I know I can report to the safeguarding and CQC if needed. That would not be necessary though."
- There were clear communication channels for raising concerns within the home. We saw posters around the home with contact details to enable people, relatives, visitors, and staff to speak up about concerns.

- Staff had received training in safeguarding. Safeguarding records were kept together with all relevant referrals such as to CQC.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There were enough staff on duty. Many of the staff working at Long Close Retirement Home had long service which contributed to continuity of care for people. One staff member told us, "It's just like a family, it's a second home to me."
- The registered manager understood the requirements for employing staff to provide care and support to people. They told us they had found recruitment difficult; the home had faced the same challenges as other providers due to the national shortage of care workers.
- The home had a recruitment procedure in place and checks the home made demonstrated staff had the necessary skills and knowledge to carry out their role.
- Staff files contained appropriate checks, such as references, health screening, right to work in the UK, and a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as prescribed. The home had arrangements for the ordering, storage, and disposal of medicines. Daily checks were made to ensure safe storage of medicines and safe temperatures were maintained.
- Staff responsible for giving medicines had been trained and had their competency assessed by the registered manager.
- Medicine Administration Records (MAR) had information about when a person took their medicines and were legible. Staff checked people's medicines with their MAR to ensure the correct medicine was given to the correct person at the right time. MAR were completed correctly, audited and actions taken when discrepancies were found.
- People received their prescribed creams and skin patches correctly. Pictorial guides were in place such as body maps to ensure they were used correctly.
- Where people were prescribed medicines, they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.
- Medicines requiring stricter controls by law were stored correctly in a separate cupboard and a stock record book was completed accurately.

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.
- Unrestricted visiting was being supported by the home, in line with good practice and government advice.

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 good. At this inspection the rating has remained the same. 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; Continuous learning and improving care

- Quality assurance systems were in place; however they had not identified the shortfall found with environmental checks. The registered manager made immediate changes to their monitoring to include environmental checks. We were assured the changes would capture the information needed.
- A range of audits were undertaken to enable the registered manager and provider to ensure all areas of the home operated safely. Each audit had action stated and completed. This meant the home was continually learning. Outcomes were shared in staff meetings and handovers. Examples of audits were; medicines, call bells, infection, prevention and control.
- Staff understood their role and had clear responsibilities. Staff had job descriptions and told us they were clear on the expectations of the registered manager and the home.
- The registered manager told us they were in the process of adjusting their auditing programme within the home to improve the outcomes and ensure the home was always moving forwards.

Promoting a positive culture that is person-centred, open, inclusive, and empowering, which achieves good outcomes for people

- The registered manager told us they actively engaged staff in decisions about the home. There was a positive culture in the home, staff told us they felt included.
- Staff were proud to work at Long Close Retirement Home, their comments included: "I am really proud of it because I make the residents laugh", "To see the smile on their faces [people] is priceless", "I love it, it's small, family and friendly", "It's fabulous, brilliant", "Lovely atmosphere, lovely home."
- People, their relatives, professionals and staff were complimentary about the leadership of Long Close Retirement Home. Some of their comments included: "If we have any problems we can talk to the registered manager", "The management team listen, they support us", "The registered manager [name] is amazing, nothing is too much trouble", "The registered manager is very good, on the ball, knows the residents inside and out."
- Staff felt appreciated by the registered manager and the provider. A member of staff told us, "Yes, I feel appreciated. The registered manager [name] says thank you."

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 registered manager understood the requirements of the duty of candour, that is, their duty to be honest, open and apologise for any accident or incident that had caused or placed a person at risk of harm.

- The registered manager understood CQC requirements to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and serious injury. This is a legal requirement.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People were offered the opportunity to be involved in the home by attending a meeting. The registered manager and staff told us they speak with people each day and help them to spend the day how they want. The home was reviewing their menus at the time of our inspection. One person told us about the food and said, "The food is beautiful, gorgeous."
- The home undertook satisfaction surveys for people and their relatives. The most recent survey showed positive results. The registered manager told us relatives or staff supported people to complete the surveys. A structured report was produced which also detailed the staffing levels and needs of people.
- Long Close Retirement Home worked and communicated well with health and social care professionals to support people. One health professional told us, "We have a very good working relationship with the home. Residents are really happy here and well cared for. Staff are lovely and it's homely."