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The Talbots

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

The Talbots is a care home without nursing, providing personal care. The service can support up to 16 people. At the time of the inspection 15 people were using the service.

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

The provider and registered manager had improved the governance systems and ensured appropriate risk assessments were in place. These were reviewed regularly or when people's needs changed.

People felt safe living at The Talbots. Relatives confirmed their family members were kept safe and cared for by competent staff.

Staff received appropriate training and understood how to keep people safe. This included recognising signs of abuse and how to report and escalate concerns when needed. People were cared for by staff who knew them well. People and relatives were happy with the support they received.

Staff received training to administer people's medicines safely. Systems were in place to safely order, monitor and review medicines. Processes in place ensured people received medicines safely. Staff received competency checks to ensure best practice was followed.

The provider promoted an open culture that was inclusive and supportive of people and staff. The registered manager and staff were clear about their roles. Staff confirmed they felt supported. People were involved with all decisions about their care and support.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Talbots on our website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 10 May 2019) and there were two breaches of regulations. 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 carried out an unannounced comprehensive inspection of this service on 11 January 2019. Two breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. 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.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

The Talbots

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 Care Act 2014.

Inspection team

The inspection was completed by one inspector.

Service and service type

The Talbots is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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 reviewed information we requested from the provider to show the improvements they had made where a breach had been identified at the last inspection. We sought feedback from the local authority.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We also spoke with three staff members, the registered manager and the provider.

We reviewed a range of records. This included two people's care records. We looked at two staff files in relation to recruitment. 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 registered manager to validate evidence we found.

Is the service safe?

Our findings

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

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

At the last inspection systems were not in place to ensure risk assessments were appropriately updated and reviewed regularly. The lack of developing the information held to inform required risk assessments and risk management plans, was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider had made enough improvements and was no longer in breach of Regulation 12.

Assessing risk, safety monitoring and management

- The registered manager had developed systems to review and update changing risk. People's risk assessments were reviewed regularly or when their needs changed.
- People, where required, had appropriate risk assessments in place. For example, addressing changes to a person's behaviour with low mood. The risk assessments contained guidance for staff on how to support and recognise the signs.
- People had an individual evacuation plan in place to support them if they needed to evacuate the building. Fire safety checks and fire drills were completed to ensure people understood how to keep safe.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. One person told us, "I chose to come here as I feel so safe when I am here." One relative said, "They do everything to keep [my family member] safe."
- Staff had a good understanding of safeguarding and reporting concerns. One staff member told us, "If we have any concerns these are documented and reported to the [registered] manager."
- A safeguarding policy was in place and all staff had completed the appropriate safeguarding training. One relative said, "My [family member] is safe, I have complete trust in the staff."

Staffing and recruitment

- Recruitment processes ensured appropriate checks had been made including a criminal record check and references had been obtained.
- Staffing levels were reviewed, and people and staff told us there were enough staff. One person said, "Staff are always there to sit and talk to me."

Using medicines safely

- Staff had been trained in medication administration and there were competency checks to ensure best practice.

- Staff kept accurate records of all medicines and medicines were stored appropriately.
- Staff had appropriate guidance to follow for medicines that were required to be given when needed, for example paracetamol for pain relief.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Staff documented any incidents and accidents. These were reviewed and analysed by the registered manager and appropriate action and measures put in place if required. Any lessons learned were shared with staff at handovers, staff meetings or staff supervisions.

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

At the last inspection the provider had not developed a governance system to ensure themselves the service was meeting the requirements of the regulations. The lack of robust quality assurance meant this was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider had made enough improvements and was no longer in breach of Regulation 17.

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

- The provider had ensured better monitoring was now in place. Audits were regularly completed on a wide range of areas of the service. Information gathered from audits, and incidents and accidents, was used to improve the service. Where required other professionals were involved to ensure appropriate support and action plans were in place to drive improvement.
- Staff understood their roles and had a hand over at the start of each shift.
- Staff told us they felt supported. One staff member said, "I feel supported [the provider] is always here."
- The registered manager was visible in the service and available if anyone needed to speak with them. One staff member said, "I feel supported one hundred percent, [management] is always there even for personal support."
- Records showed that legally required notifications were submitted to the CQC as required, and when things went wrong.

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

- People were involved in making decisions about the care they received. People, relatives and staff had the opportunity to express their voice through meetings and surveys. One relative said, "[The registered manager's] communication is second to none, they always keep me in the loop with what's going on."
- People knew who the registered manager was and felt they could speak up if they needed to. One person said, "[Management] go above and beyond. I want you to know how important this place is to me; they can't do enough for you."
- Staff delivered care and support in a person-centred way that supported people to maintain their independence. One relative said, "My [family member] is happy there."

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 provider ensured that all reportable incidents were shared with the relevant authorities and CQC.
- The management team were open and honest about improvements which needed to be made.
- People felt listened to and able to discuss how they felt. Any issues were appropriately responded to by the staff and registered manager.
- The registered manager told us, "We take an open and transparent approach to the delivery of care and view this to be an essential part of the work we do."

Working in partnership with others and Continuous learning and improving care

- The management and staff team had worked hard since the last inspection to improve the care that people received at the service.
- The registered manager worked with the local authority and other professionals to ensure better monitoring, documenting and skill sets were in place.
- The registered manager demonstrated through collaborative working with relevant professionals such as psychiatrist, psychologist and social workers, that people's outcomes to live a more independent life were being achieved. For example, one person with agoraphobia found it very difficult to leave the home. However, whilst living at The Talbots they had been supported to grow in confidence. They now walked to the shop, regularly attended a local group, socialised in the community, and attend their own appointments.
- There was a service improvement plan in place, which included plans to further develop and improve the service.