

S3 Care Ltd

The Magnolia Care Home

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Magnolia House Care Home is a care home providing personal and nursing care to up to 38 people. At the time of the inspection, 26 people were living at the service.

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

People received safe care and felt safe within the service. Staff we spoke with understood safeguarding procedures and felt confident their concerns would be listened to and followed up. Risk assessments were in place to manage risks within people's lives.

Staff recruitment procedures ensured that appropriate pre-employment checks were carried out. Staffing levels were sufficient within the home, and people felt they could get the support they needed from staff promptly.

Medicines were stored and administered safely. Staff were supervised well and felt confident in their roles.

The service was clean, and staff understood infection control procedures and followed them.

Audits of the service were detailed and any issues found were addressed promptly. Staff felt well supported by the manager, and were motivated to provide good care to people.

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.

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 the service under the previous provider was GOOD published on 6 October 2018. The service has not been inspected before whilst under the current provider.

Why we inspected

We received concerns in relation to the management of infection control, use of personal protective equipment and lack of leadership within the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

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?

The service was safe.

Inspected but not rated

Is the service well-led?

The service was well led.

Inspected but not rated

The Magnolia Care 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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted as part of our Thematic Review of infection control and prevention in care homes.

Inspection team

The inspection was carried out by one inspector.

Service and service type

The service did not have manager registered with the Care Quality Commission, but they did have a manager in post that was going through the registration process. 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 announced shortly before it took place. This was to obtain information around Covid-19 within the service before entering the premises.

What we did before the inspection

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.

During the inspection

We spoke with three people who used the service. We spoke with three members of care staff, the manager, the operations manager, and the deputy manager. After the inspection we spoke with two relatives of

people using the service by phone.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. 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.

This is the first inspection for this newly registered service. This key question has been inspected, but not rated.

Systems and processes to safeguard people from the risk of abuse

- People were safe. Everyone we spoke with felt safe within the home and with the staff. One relative we spoke with said, "[Name] is safe, I know the staff are amazing here, so I don't worry about not being able to visit at the moment."
- Staff were trained in how to keep people safe from abuse and recognised the signs that might indicate a person was being abused. They knew how to report concerns to the manager, provider, and external agencies if necessary.
- The provider had systems in place to safeguard people from abuse including safeguarding and whistleblowing policies and procedures.

Assessing risk, safety monitoring and management

- Risk assessments documented in detail any risks that were present in people's lives, and enabled staff to work safely to support them. This included any health and medical needs they required, as well as plans to assess the risks of falls, moving and handling, and wellbeing.
- Risks were regularly reviewed, and staff understood and followed risk assessments appropriately.

Staffing and recruitment

- People felt there were usually enough staff around. One person said, "It can get busy and you could do with more staff sometimes, but its fine most of the time." Rotas we saw showed that staffing levels were consistent, and staff we spoke with said that staffing levels were regularly assessed and responded to by management.
- The provider had safe staff recruitment checks in place. This meant that checks were carried out before employment to make sure staff had the right character and experience for the role.

Using medicines safely

- Medicines were stored and administered safely, however, the temperature of the room they were being stored in was not always optimal for medicines storage. The guidelines the service had in place, were that all medication should be stored at 25c or lower. On the day of inspection, the thermometer showed the room temperature was 27c. The management immediately took action by ensuring the blinds in the room remained closed, and they would monitor the temperature and take further action if required.
- We checked medicine administration records (MAR) and found they were being used correctly. Suitable instruction about people's medicines and how and when they should be used were in place.

Preventing and controlling infection

- The service was clean and tidy, although some areas of décor were tired and needed refurbishment. There was an ongoing plan to improve these areas within the service.
- The building was cleaned regularly. Touch points were regularly wiped down to reduce the risk of infection, although this cleaning was not always recorded. Management told us they would be introducing a record of this cleaning immediately so they could evidence and monitor it effectively.
- The provider was managing the spread of infection adequately during the Covid-19 pandemic. Appropriate procedures were in place to manage infection control, including staff using personal protective equipment (PPE) appropriately, and communal spaces being changed to allow social distancing. Staff knew how to support people who may be isolating with the virus, and told us they had all the PPE, support and guidance to do so effectively when required.
- People and relatives we spoke with confirmed that staff always used the appropriate PPE, and were happy they were being protected as much as was possible.

Learning lessons when things go wrong

- Incidents and accidents were recorded and reported, where necessary, to the appropriate authorities. Management reviewed incident and accident data to identify any themes or trends, and actions were taken to make improvements and share learning points through team meetings and 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.

This is the first inspection for this newly registered service. This key question has been inspected, but not rated.

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

- People, relatives and staff we spoke with acknowledged the service had some problems in the past with staffing, and changing management, but now felt the service was well run and continually improving. One relative said, "I trust them (staff) 110%. It's the best place for [name] to be."
- The staff were committed to achieving good outcomes for people, and understood each person's wants and needs. Staff and managers were flexible in their approach to ensure good outcomes for people.

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

- The managers fulfilled their legal obligations to notify the Care Quality Commission of serious incidents involving people living at the home.
- Staff were clear about their responsibilities and the leadership structure in place. People said they knew who the manager was and staff told us they felt well supported by the manager.
- The manager in post was going through the registration process to become registered with the CQC. It was clear they fully understood their responsibilities, and felt well supported by the wider management team from the provider.
- Staff were clear about their roles and felt confident. One staff member said, "The change in provider has been great, it's much better now. They (management) listen and get us what we need."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were engaged with and involved in the service. One person told us, "I feel very involved and consulted by staff, they know me and they listen to my ideas." A relative said, "They keep me informed about everything, which is very important, especially at the moment when I can't visit."
- Team meetings were held to ensure staff stayed up to date. We saw minutes of meetings which documented discussions on medicines, care plans and shift patterns. Staff told us they felt able to raise concerns in meetings or with management directly.

Continuous learning and improving care

- Audits and checks were carried out regularly by management staff to ensure quality remained high and any issues were dealt with. For example, information on falls was monitored and checked for trends, and call bell response times were tested and monitored to see how staff performed. Actions were taken when

required.

Working in partnership with others

- We spoke with the local authority prior to inspection, and they told us there were no concerns about care within the service. They said the service had achieved compliance in their recent quality checks
- The staff and management worked in partnership with outside health and social care professionals to make sure people got the support they needed.