

HC-One Oval Limited

Summerville Care Home

Inspection report

Hill Top Road
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Warrington
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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

About the service:

Summerville is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during the inspection. Summerville has the capacity to support up to 45 people; at the time of the inspection 31 people were living at the care home.

People's experience of using this service:

The quality and safety of care people received had improved since the last inspection.

People's level of risk was assessed and determined from the outset; measures were put in place to monitor people's health and well-being as a measure of keeping them safe.

Care records contained consistent, up to date and relevant information in relation to the care people needed. Staff told us they were provided with up to date and timely information.

Safeguarding procedures had improved; staff told us they were aware of safeguarding processes and the importance of keeping people safe. People who lived at Summerville told us they felt safe.

Staffing levels were routinely analysed and reviewed in relation to the dependency needs of people who were living at Summerville. The registered manager also listened to the views of the people receiving support and responded accordingly in relation to the levels of staff.

Recruitment procedures had been improved since the last inspection. Staff had been appropriately vetted and had undergone the necessary pre-employment recruitment checks.

The registered provider was now complying with the principles of the Mental Capacity Act 2005. People were appropriately assessed from the outset and measures were in place to ensure people were not unlawfully restricted.

We observed kind and compassionate interactions between staff and people receiving support. People received dignified and respectful care that was tailored around their support needs.

The complaints procedure had improved since the last inspection. Complaints were regularly reviewed, discussed and responded to in line with organisational policy.

Improvements had been made in relation to 'person-centred care'. Care records contained tailored information in relation to people's likes, wishes and preferences.

Effective quality assurance measures were now in place. Processes and systems to assess and monitor the

provision of care had improved since the last inspection.

Audits and checks were routinely completed; these helped to maintain a good level of high-quality, person-centred care.

Effective health and safety checks were in place and regulatory compliance was maintained. Up to date certificates were in place for gas, electricity, legionella and fire safety.

Whilst Summerville was homely and offered a friendly atmosphere, aspects of the design and decoration could be further reviewed and adapted.

We recommend that the registered provider reviews the home environment and areas of refurbishment that are required.

Medicine management procedures were safely in place. Staff received medication administration training, regularly had their competency levels checked and were familiar with the medication administration policy.

Staff were supported with training, learning and development opportunities. People and relatives told us that staff were experienced and could provide the support they required.

There was a dedicated activities co-ordinator in post; people were supported to engage and participate in a range of different activities that they enjoyed. Summerville now had access to a mini-bus and external activities were arranged as often as possible.

Rating at last inspection: At the last inspection the service was rated 'Requires Improvement' (Report published June 2018). Following the last inspection, the registered provider submitted an improvement plan which we checked during the inspection. We found that improvements had been made.

Why we inspected: This was a scheduled inspection based on previous ratings.

Follow up: We will continue to monitor the quality and safety of care being provided and return to inspect the service as per inspection schedule. For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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.

Details are in our 'Safe' findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our 'Effective' findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our 'Caring' findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our 'Responsive' findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our 'Well-led' findings below.

Good ●

Summerville 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 as part of our regulatory functions. This inspection checked whether the registered 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.

Inspection team:

The inspection was carried out by one Adult Social Care Inspector, one 'Expert by Experience' and a 'Specialist Advisor'. An 'Expert by Experience' is a person who has personal experience of using or caring for someone who uses this type of care service and a 'specialist advisor' is a person who has professional experience and knowledge of the care which is being provided.

Service and service type:

Summerville is a 'care home'. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

Notice of inspection:

The inspection was unannounced.

What we did:

Before the inspection we reviewed the information we held about the service. This included any statutory notifications sent to us by the registered provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send to us by law. We also contacted local commissioners of the service to gain their views. The registered provider had also completed a Provider Information Return (PIR). This is a form that asks the registered provider to give some key information about the service, what the service does well and any improvements they plan to make. We used all this information to formulate a 'planning tool'; this helped us to identify key areas we

needed to focus on during the inspection.

During the inspection we spoke with the registered manager, seven members of staff, four external healthcare professionals, two kitchen assistants, one registered nurse, two activities co-ordinators, nine people who were living at Summerville and five relatives who were visiting at the time of the inspection.

We looked at care records of four people receiving support, four staff recruitment files, medication records, and other records and documentation relating to the management and quality monitoring of the service.

In addition, a Short Observational Framework for Inspection (SOFI) tool was used. SOFI tool provides a framework to enhance observations during the inspection; it is a way of observing the care and support which is provided and helps to capture the experiences of people who live at the home who could not express their experiences for themselves.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- Risk management procedures had improved since the last inspection and were effectively in place.
- People's level of risk was assessed from the outset. Risk assessments were regularly reviewed and contained up to date and relevant information.
- Individual risk assessments were in place for falls, eating and drinking, choking, bladder and bowel, and skin integrity. Risk assessment contained up dated information in relation to the level of risk and support that needed to be applied.
- People were asked if they felt safe, they told us "Yes, feel safe here", "Oh, yes I do" and "I love it (at Summerville). One relative said, "I feel very happy they're [person] here."
- The registered manager maintained a good level of oversight in relation to health and safety compliance. We saw that all regulatory checks and compliance certificates were in place.

Systems and processes to safeguard people from risk of abuse

- Safeguarding and whistleblowing procedures had improved since the last inspection. Staff were familiar with the processes that needed to be followed as a measure of keeping people safe.
- The registered manager ensured that processes and procedures were available to staff. Staff knew the importance of recognising signs of abuse and received the necessary safeguarding training.
- The registered manager reported safeguarding incidents to CQC and Local Authority accordingly.

Staffing and recruitment

- Staffing levels were routinely checked and analysed by the registered manager. A 'dependency tool' was used to monitor staffing levels in conjunction with the number of people living at Summerville and their individual support needs.
- Call bell response times were analysed on a daily basis. Response time analysis enabled the registered manager to review how quickly people received support. Analysis indicated that people were receiving support in a timely manner. One person told us, "Oh, yes very good, every time someone [staff] come within minutes."
- The registered manager told us that staff rota changes had recently taken place in response to the requests of people living at Summerville. Two extra members of staff were deployed throughout the morning to specifically help with personal care and breakfast routines.
- Recruitment procedures had improved; all staff were subject to the appropriate pre-employment checks and Disclosure and Barring System (DBS) checks were routinely completed.

Using medicines safely

- Medication processes were safely in place. Staff received the medication administration training and regularly had their competency levels assessed.

- There was an up to date medication policy in place; this contained relevant guidance and best practice to be followed.
- Medicines were appropriately stored, and room and fridge temperatures checks were regularly completed.
- Medication administration records (MARs) were appropriately completed by trained staff; people were administered their medicines according to administration instructions.
- Routine audits/checks were carried out to ensure safe medication administration practices were being followed.

Preventing and controlling infection

- Summerville was clean and hygienic; measures were in place to ensure people were living in a safe and homely environment.
- We saw that there was an up to date infection control policy in place and staff were provided with personal protective equipment.
- Routine cleaning scheduled were in place. People felt they lived in a clean, tidy and well-maintained environment.

Learning lessons when things go wrong

- The manager maintained a good level of oversight in relation to all accidents and incidents that occurred at Summerville.
- An 'incident management' folder was in place. This contained all relevant information in relation to accidents and incidents that occurred, investigations that had taken place and outcomes.
- The registered manager ensured that 'reflective accounts' (discussions) were held with staff following accidents/incidents as a measure of establishing if lessons could be learnt.
- Accidents and incidents were discussed and reviewed during managers and staff meetings.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and people's feedback confirmed this.

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 Act 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 with appropriate legal authority. In care homes, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Improvements had been made in this area of care since the last inspection. The registered provider was complying with the principles of the Mental Capacity Act, 2005.
- People had their levels of capacity assessed and regularly reviewed from the outset.
- People were encouraged to make decisions about the care and support they needed and wanted. One person told us, "I can please myself in here, watch TV, read my newspapers and books, have a snooze and look forward to happy holidays."
- People who lacked capacity did not have their liberty unlawfully restricted; 'best interest' meetings were arranged, decisions were appropriately made, and the appropriate applications were submitted to the Local Authority.

Adapting service, design, decoration to meet people's needs

- Aspects of the service required refurbishment. Some areas throughout the home required re-decoration and needed to be designed around the preferences and wishes of people living at Summerville Care Home.

We recommend that the registered provider reviews the service design and aspects of re-decoration that are required.

- Bedrooms were individually tailored and designed around people's wishes as much as possible.
- We found adequate lighting throughout the home and people were able to navigate themselves around the home as independently as possible.
- People had access to a communal garden area; this was well-maintained and people enjoyed accessing this area especially throughout the warmer months.

Staff skills, knowledge and experience

- Staff were provided with a variety of different training, learning and development opportunities.
- Staff received regular supervisions and told us they were supported on a day to day basis.
- Staff who did not have the relevant qualifications were supported to complete 'The Care Certificate'. This is an agreed set of standards that staff within the health and social care sector are expected to complete.
- People told us, "I would say they [staff] are au-fait (familiar) with what's going on" and "Well trained staff, some staff are very good, some exceptional."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; and staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Care record contained a 'pre-admission assessment' and an 'assessment' form upon admission.
- Such assessments helped to establish the level of support people needed and if/how this would be safely provided.
- People (where possible) were involved in the assessment processes and helped to develop the care plans and risk assessment that needed to be implemented.
- Systems and processes helped to assess and establish people's needs and choices in line with legislation and best practice.
- People received support from external healthcare professionals. For instance, one person's care record demonstrated the support they were receiving from a local GP and the speech and language therapist team.
- We found that people's overall health and well-being was supported, and a holistic level of care was provided. One healthcare professional told us, "My impression is that they're [people] well looked after, staff know them well and there's continuity of care."

Supporting people to eat and drink enough with choice in a balanced diet

- People's nutrition and hydration support needs were assessed and established from the outset.
- Care records contained eating and drinking care plans and risk assessments as well as guidance that needed to be followed.
- People were supported with 'choice' and encouraged to make decisions around their dietary intake.
- Care records contained person-centred information about people's dietary likes, needs and preferences. For instance, one care record stated, '[Person] likes to have well buttered white toast, crust cut off and cut into four pieces with marmalade on.'
- A variety of food and drink options were served during meal times; alternative options were also provided upon request. One person said, "The food is good, each chef does it differently. We get three variations of the menu." One relative said, "Lovely meals here, they tuck into fresh salmon."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care

Ensuring people are well treated and supported; respecting equality and diversity

- This area of care had improved since the last inspection. Staff were observed providing dignified and respectful care and we received positive feedback about the caring approach of staff.
- Comments we received included, "[Staff are] Caring and polite", "The staff have time to sit down and chat with you", "They [staff] take their time and don't rush me." Relatives told us, "[Person] had a wonderful level of care, I can't praise them [staff] enough" and "They [staff] didn't just support [person] but the family too." "The staff work very hard, they go above and beyond."
- Staff were familiar with the people they supported; staff knew people's likes, dislikes, preferences and interests. One relative said, "Yes, they know what [person] likes and dislikes, desserts, cup of tea not juice."
- People were treated as individuals and were encouraged to make decisions in relation to the care they needed.
- People's equality and diversity support needs were established from the outset; support measures were put in place to ensure people were receiving the correct level of care.

Supporting people to express their views and be involved in making decisions about their care

- Care records indicated that people were involved in the care planning process from the outset.
- We observed care and support being provided that was tailored around the needs and wishes of people receiving support.
- 'Resident and Relative' meetings were taking place; people (and their relatives) were supported to share their views, and involve themselves in the quality and safety of care being delivered.
- Satisfaction questionnaires were circulated on an annual basis and there was an electronic feedback device in the foyer of the home; this enabled anonymous feedback to be captured.
- Any feedback and/or suggestions that the registered manager received were actioned; they were discussed during 'resident/relative' meetings and meeting minutes were accessible for people and visiting relatives to read.

Respecting and promoting people's privacy, dignity and independence

- People's sensitive and confidential information was safely stored away and protected in line with General Data Protection Regulations (GDPR).
- People received respectful care and their privacy and dignity was maintained and promoted.
- Care records we checked indicated that people were supported to remain as independent as possible. One care record stated, '[Person] can do most of their daily tasks independently, can communicate needs well.'

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The level of person-centred care people received had improved since the last inspection.
- Care records contained person-centred information and staff were able to provide care and support that was tailored around their needs and wishes.
- We observed staff providing a tailored level of care and were familiar with specific needs and wants of people receiving support. For instance, staff addressed people by their preferred names and knew what food people liked and disliked. One relative told us. "Staff know [person] well, they have developed good relationships."
- People's needs were appropriately assessed and planned for from the outset. People had the correct level of support in place and were routinely monitored and assessed.
- We received positive feedback about the variety of different activities people were encouraged to participate in.
- There was a dedicated activities co-ordinator employed at the service; they were responsible for arranging a variety of different internal and external activities and supporting people to engage in their hobbies and interests.
- Comments we received included, "The activities are very good, when we have use of the mini bus, I have been to the museum, Walton Gardens, Blue Planet Aquarium, normally it's a Tuesday when we go", "In the summer we sit in the garden, have our tea or dinner out there" and "We play snakes and ladders, cards, dominoes, quizzes, singing and occasionally we do exercises."
- Notice boards contained weekly activities schedules and people were given a daily newsletter which contained information to prompt discussions with other people living at Summerville and carers.

Improving care quality in response to complaints or concerns

- The complaint procedure had improved since the last inspection. There was an up to date complaints policy in place which contained relevant and up to date information.
- People and relatives were familiar with the complaints procedure and who to raise their complaints with.
- The registered manager maintained a good level of oversight in relation to all complaints received; complaints were reviewed and discussed on a regular basis.
- Complaints were appropriately managed, investigated and responded to in line with organisational policy.
- At the time of the inspection, one complaints was being responded to.

End of life care and support

- Staff had access to 'End of life' training and people were appropriately supported with this area of care.
- Staff understood the importance of providing tailored 'end of life' care in a dignified and respectful way.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Manager's and staff are clear about their roles, understanding of quality performance, risks and regulatory requirements

- Systems and processes to monitor the quality and safety of care people were receiving had improved since the last inspection.
- The quality and safety of care was routinely monitored, assessed and reviewed. Effective measures were put in place to ensure people were receiving safe, effective and compassionate care.
- A range of different quality assurance tools, audits and checks were routinely completed as a measure of reviewing and assessing the care being provided. For instance, staff competency checks, night-time and weekend 'spot checks' and daily walk-rounds were in place.
- The registered manager maintained a good level of oversight in relation to the provision of care being delivered and was committed to providing high quality, person-centred care.
- The registered manager was aware of their regulatory responsibilities; they demonstrated their understanding of the Health and Social Care Act, 2008 and the importance of submitting statutory notifications to CQC.
- All regulatory compliance checks were up to date and risks were safely managed; this ensured that people were living in a safe and well-maintained environment.
- The registered provider had a variety of up to date policies and procedures in place. Policies were accessible to staff and staff understood the importance of complying with such guidance and best practice.
- We received positive feedback about the registered manager and the staff team. Comments we received included, "The staff work very hard, they go above and beyond" and "[Person] has received a wonderful level of care, staff are very pleasant, efficient and always caring."

Planning and promoting person-centred, high-quality care and support with openness; understanding and acting on their duty of candour responsibility

- People received a tailored level of care that was centred around their individual support needs.
- People were encouraged to make decisions in relation to the care they needed and staff became familiar with the specific preferences and how they wished for their care to be delivered.
- The registered manager was committed to providing high quality, person centred care and enhancing the experiences of people living at Summerville Care Home.
- We received positive feedback about the provision of care that was being delivered. Comments we received included, "Oh yes, I am happy here", "I love it [here]" and "I feel safe here."

Continuous learning and improving care

- Quality assurance processes were effectively identifying areas of improvement that needed to take place.

- Audit checks and tools were regularly completed as a measure of identifying areas of good practice but also areas of development.
- Internal action plans were devised, and areas of development were responded to in a timely manner. At the time of the inspection a 'Home Improvement Plan' was in place and was regularly being updated.
- The registered manager reviewed all accidents, incidents and events that occurred at the service. Trend analysis was also completed to establish if any themes were emerging.

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

- Equality characteristics were determined and supported from the outset.
- The registered manager encouraged people living at Summerville, the public and staff to involve themselves in the provision of care being delivered.
- People and relatives had the opportunity to share their thoughts and views about the quality and safety of care people received during 'resident and relative' meeting as well as being encouraged to complete annual satisfaction surveys.
- 'Resident and relative' meeting minutes were available to read throughout the home and any suggestions/comments that the home received were responded to and acted upon accordingly.
- Staff meetings were regularly taking place; these helped staff to feel informed and involved in the care being provided.

Working in partnership with others

- The registered manager worked closely with other healthcare professionals, ensuring that people received a holistic level of care.
- We observed care and support being provided by local GPs, Chiropodists, Macmillan support teams and Enhanced Care Home support team.
- Positive working relationships had also been established between the Local Authority and Commissioners.