

Aps Care Ltd

Stradbroke Court

Inspection report

Green Drive
Lowestoft
Suffolk
NR33 7JS

Tel: 01502322799

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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:

Stradbroke Court provides accommodation and personal care for up to 43 older people, some of whom were living with dementia. At the time of our visit 38 people were using the service.

What life is like for people using this service:

We carried out this inspection in response to concerns about people's health, safety and welfare. At this visit we did not identify any concerns or shortfalls that would place people at risk of harm.

People who live at Stradbroke Court have their needs met by sufficient numbers of suitably trained staff.

Medicines were managed and administered safely.

Risks to people were identified, monitored and managed. The service was clean and appropriate infection control procedures were in place.

The provider had employed a new manager who was proactive in identifying areas for improvement. A new regional manager had also been appointed, who was overseeing the management of the service. Both were transparent in accepting that there were areas for improvement and development in the service. A thorough and robust action plan had been put in place stating how each area for improvement would be addressed and this was ongoing.

The quality assurance system in place to monitor the service provided to people was robust and capable of identifying areas for improvement.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update):

At the last inspection the service was rated Good. (Report published 6 December 2017)

Why we inspected:

We received concerns in relation to the care people received to keep them safe. 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. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained the same. This is based on the findings at this inspection.

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.

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

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.

Stradbroke Court

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Stradbroke Court is a care home for older people, some of whom were living with dementia. 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 in place who was in the process of registering with the Care Quality Commission. They and the provider are legally responsible for how the service is run and for the quality and safety of the care provided in line with the Health and Social Care Act 2008 and associated Regulations.

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. This included details about incidents the provider must notify us about. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with two people who used the service to ask about their experience of the care provided.

We spoke with the regional manager and two care staff. We looked at four records in relation to people who used the service. We also looked at staff files and records relating to the management of the service, recruitment, policies and systems for monitoring quality.

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 the service was rated 'good' in this key question. At this inspection we found the service remains rated 'good' in this key question.

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

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living in the service.
- Staff were aware of the service's safeguarding policy and demonstrated a knowledge of safeguarding procedures. Staff had received training in this area.

Assessing risk, safety monitoring and management

- The service had identified risks to people and implemented comprehensive risk assessments for each person using the service. These set out the measures in place to reduce the risk.
- Risk assessments relating to the environment were in place. This included evacuation plans. These had been kept under review to ensure they remained accurate.
- Equipment such as fire detection systems, hoists and water quality were regularly tested for safety.

Staffing and recruitment

- People told us they felt there were enough staff to meet their needs. One person said, "No issue there, someone is always around."
- Staff told us they felt the staffing level was appropriate. The staffing level was under constant review and was flexible in line with people's changing needs.
- The service had robust procedures in place to ensure staff were suitable to work with vulnerable people. This included carrying out checks to ensure people did not have criminal convictions which may make them unsuitable to work with vulnerable people.

Using medicines safely

- Medicines were managed, monitored and administered safely.
- Staff were knowledgeable about safe medicines administration and practice observed was good.

Preventing and controlling infection

- We observed that the service was hygienically clean and free from odours.
- Audits were carried out of infection control to ensure the risk of the spread of infection was reduced. There was a head of housekeeping whose role included checking on the cleanliness of the service and supervising domestic staff.
- Staff had access to appropriate protective clothing (PPE) such as gloves and aprons to use when providing personal care to people or supporting with meals.

Learning lessons when things go wrong

- Accidents were appropriately recorded. The contents of these records were reviewed by the management team and investigations into the causes of incidents were recorded. Actions were taken to reduce the risk of reoccurrence. These included making referrals to specialists such as the Falls Prevention Team.

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 the service was rated 'requires improvement' in this key question. At this inspection we found that quality assurance and management oversight was good. The service is now rated 'good' in this key question.

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

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility and continuous learning and improving care

- There was a robust quality assurance system in place which was capable of identifying areas for improvement. The provider had invested in strengthening quality assurance processes by employing a regional manager to oversee the quality of services and the performance of managers.
- The regional manager had carried out in depth audits since they came into post in September. These had identified a number of areas where improvements could be made to develop the service. Audits focused on areas such as infection control, care planning, the completion of daily records, medicines and the maintenance of the building.
- Risks had been identified through these audits. For example, they identified that recruitment procedures before the new management team started had not been robust enough and that evidence of appropriate criminal records checks was not present. Action had been taken to ensure criminal records checks were carried out and current recruitment procedures were safe. A new member of admin staff had been employed to assist with safe recruitment.

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

- A new manager had been employed and was in the process of registering with the commission. Records demonstrated they had been effective in identifying areas for improvement and completing actions required to address shortfalls identified through their audits and those carried out by the regional manager.
- The service employed heads of departments, such as a head of housekeeping. It was their role to carry out quality assurance checks in areas such as cleaning and laundry. They also led regular meetings with domestic staff to communicate messages and discuss practice.
- Notifications and referrals were made where appropriate. Services are required to make notifications to the Commission when certain incidents occur.

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

- Surveys had been sent out to people using the service and their relatives prior to the new management team taking over. They identified that these had not been analysed or acted upon, so they had carried out

this work and displayed the results in a communal area. Actions were included in the services improvement plan.

- The new management team was commencing surveys of staff views and had been holding more regular staff meetings to improve engagement with staff. Minutes of these meetings demonstrated staff were able to share their views and were kept informed of planned developments and improvements to the service.
- Meetings were also held with people using the service and relatives. People were given opportunities to make suggestions, including suggestions for upcoming activities.

Working in partnership with others

- The registered manager and provider had positive relationships with healthcare professionals who supported people using the service. The management team had built a positive relationship with commissioners, one of whom was positive about the management team and felt reassured by the progress they were making.