

Stroud Care Property Limited

Stinchcombe Manor

Inspection report

Echo Lane
Stinchcombe
Dursley
Gloucestershire
GL11 6BQ

Tel: 01453549162

Date of inspection visit:
28 March 2023
29 March 2023

Date of publication:
19 May 2023

Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Stinchcombe Manor is a care home providing accommodation to persons who require nursing or personal care, for up to 19 people. The service provides support to people living with mental health and associated needs. At the time of our inspection there were 12 people using the service. Some people living at Stinchcombe Manor requires support when they become anxious or distressed.

Stinchcombe Manor is a large adapted home with a number of communal areas people can access, including two lounges, a dining room and garden.

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

The registered manager did not always operate effective systems to identify, assess the safety of the home to enable them to take action. The provider's governance systems had not always identified or taken action in relation to concerns we found at this inspection.

People's care needs had not always been recorded in full. The registered manager was aware of this; however, action had not been taken from audits carried out in February 2023. Checks of people's environments were routinely carried out, however these hadn't always comprehensively identified potential shortfalls.

People spoke positively about Stinchcombe Manor and enjoyed the time they spend with support workers. On both days of the inspection people were enjoying games and activities with staff. Staff spoke positively about working at Stinchcombe Manor and the support they received to provide person centred care.

People's medicines were managed effectively, and people were protected from the risk of infection.

People's individual risks were known by support workers. Staff had clear guidance to support people when they became anxious. Where incidents and accidents occurred, the registered manager had systems in place to ensure appropriate action was taken to reduce the risk of avoidable harm.

The registered manager ensured the views of support workers and people were listened to and acted upon. Staff spoke positively about the communication they received and discussed the improvements happening at Stinchcombe Manor.

Deprivation of liberty safeguards had been applied for when people could not consent to live in the care home.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make

assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

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

The last rating for this service was Good (published 23 July 2022). At this inspection the rating has remained the same.

Why we inspected

This inspection was prompted by a review of the information we held about this service, including information of concern in relation to people's care and the management of the service. We also had received concerns about an incident which occurred at Stinchcombe Manor. This incident was subject to further investigation by CQC as to whether any regulatory action should be taken. As a result, this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the management of the environment. This inspection examined those risks.

As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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.

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

Enforcement

We have identified a breach in relation to good governance at this inspection. Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

Stinchcombe Manor

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

Two Inspectors carried out the inspection.

Service and service type

Stinchcombe Manor 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. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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 considered the

feedback from the local authority and professionals who work with the service. We used the information the provider sent us in September 2022 in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We spoke with 7 people who lived at Stinchcombe Manor and with 1 person's relative about their experience of the care and support provided by the service.

We spoke with 9 staff including the registered manager, 2 senior support staff, 3 support workers, 1 chef, 1 maintenance worker and 1 housekeeper.

We reviewed a range of records. This included 6 people's care records. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

We continued to seek clarification from the management team to validate evidence found. We sought and received feedback from 3 healthcare professionals involved with the service as well as local authority commissioners.

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 for this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Prior to our inspection one person managed to leave the building as window restrictor had not been in place. Following this incident the registered manager had ensured this had been fixed and additional areas checked.
- The registered manager and support staff had not always ensured people had clear care plans and assessments in place. The registered manager was aware of this concern and was planning to ensure all care plans were completed after the inspection. Please see "Is the Service Well Led?" for more information.
- Staff understood people's individual care risks and were able to discuss the support they required. Staff were confident in discussing how they supported people with their wellbeing and knew how to support and reassure them when they may be anxious. Where people could become anxious, there were clear support plans in place which provided staff with guidance on the support they required, including support to reflect on when they had become anxious or agitated.
- Staff understood people's dietary needs. Staff told us, and people's records confirmed where people required textured diets or thickened fluid to protect them from the risk of aspirating. Support workers and catering staff had clear information on people's needs and provided a diet in accordance with these needs.

Learning lessons when things go wrong

- Prior to our inspection, an incident had occurred when one person left the building unsupervised. The registered manager had taken action to ensure a reoccurrence of this would be reduced. The person's care and risk assessments had been reviewed and the registered manager had ensured the person's environment had been secured.
- The registered manager had systems in place when accidents and incidents occurred. This included reviewing people's care needs and ensuring staff had clear guidance and information. Where appropriate the service had contacted healthcare professionals for further advice.
- Staff kept and maintained detailed records of incidents and accidents within the home and any action that was taken to ensure people were protected from avoidable harm and risk.

Staffing and recruitment

- Staff were recruited safely. All required checks were made before new staff began working at the home. Disclosure and Barring Service (DBS) checks were completed alongside seeking references from staff's previous employers. These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- On both days of the inspection we observed there were enough staff to meet people's needs. Staff had time to assist people with their wellbeing needs, including supporting them with daily activities that were important to them.

- Staff told us they had enough time to support people with their needs. Comments included, "We have enough time, sometimes sickness doesn't help us, so we do more things for people in the home" and "I think we're always safe." The registered manager and staff discussed the pressures on the staffing team, and that ongoing recruitment was reducing pressures, however they still felt there was room for improvement. One member of staff told us, "Things are improving, however we do need more staff, it will reduce the pressure on the team."
- People and their relatives told us there were enough staff to meet their needs. Comments included, "I can always get a member of staff" and "I always see a member of staff around when I visit."

Using medicines safely

- People's medicines were stored safely, and they had received their medicines as prescribed.
- Systems had been implemented to reduce risks associated with people's medicines management. The registered manager and senior support staff had supported staff with training and guidance. This enabled them to ensure staff had the right skills and competency to administer people's medicines safely.
- Some people were prescribed medicines that were to be administered 'as required' when they could be anxious or distressed or were in pain. There was clear guidance for staff to follow, including when to administer these medicines and how to review the effectiveness of their prescribed medicines.

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.

Visiting in care homes

People and their families spoke positively about their experience of visiting. The service had no current restrictions on visiting.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt the home was safe. Comments included, "I feel safe here" and "I can't say anything bad. It's really done [them] good. [They've] really changed there".
- The registered manager and senior support staff were visible and regularly worked alongside staff and met people's visitors. This enabled them to respond to any concerns and to monitor the care and support people received.
- Staff had read the provider's whistleblowing policy and procedures and felt able to report any concerns about poor practice or inappropriate staff behaviour.

Mental Capacity Act

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). When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty

- 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. Where the service had applied to deprive someone of their liberty, they ensured the legal authority was updated of any changes, including the use of sensor equipment.

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 changed to Requires Improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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

- The provider's audits and management systems had not identified concerns which could place people at risk from their environment. The providers systems were not always comprehensive and did not include window restrictors checks, or checks on other areas of the home which may place people at risk.
- The provider and registered manager did not always operate effective systems to ensure that CQC and local authority safeguarding were consistently informed of notifiable incidents at the home. The registered manager had taken appropriate action to ensure actions were taken in response to concerns, however had not always consistently ensured external reporting systems were fully embedded in the service.
- Some care planning tools used by the provider had not always been consistently utilised. Some assessments we found at this inspection were incomplete and not always reflective of people's needs. The registered manager was aware of this concern which had been picked up at an audit in February 2023, however effective action had not yet been taken to address this concern.

The provider had not always operated effective systems to monitor, assess and improve the service they provided. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- At the inspection, the registered manager took immediate action in relation to the environment and updated their environmental audit to reduce the risk of avoidable harm to people living at Stinchcombe Manor.
- The registered manager and senior support workers had implemented changes in relation to medicine management systems following audits. This included implementing new processes and safe medicine storage.

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

- The registered manager and support team focused on involving people in reviewing and managing their care needs. Staff discussed how they involved people, ensuring their voice was heard as well as supporting them to make choices. Staff recorded where they had worked with people and the support they provided.
- Where appropriate, people's goals and aspirations had been recorded and staff supported people to work to these goals. Support workers were focused on providing clear person-centred care based on people's

views and experiences.

- Staff spoke positively about continued improvements being made at Stinchcombe Manor. They spoke positively about the support they received and the impact this had on the people they supported.
- We observed people and staff spending time together, enjoying activities within the home. People spoke positively about staff and told us they enjoyed living at Stinchcombe Manor. One person's relative told us, "In my opinion, it has really done [relative] good. Staff are engaging and all very welcoming."
- The registered manager carried out a staff meeting every month. These meetings were used to communicate changes, expectations and seek the views of staff. These meetings were also used to discuss core values and information in relation to Care Quality Commission (CQC).

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 requirements in relation to duty of candour and had an open and honest approach.
- The provider displayed their CQC rating within the service and on their website.
- People knew who the registered manager and members of the management team were and how to raise a concern. The registered manager and support workers listened and responded to people's concerns, engaging with healthcare professionals to ensure appropriate action was taken where required.

Working in partnership with others

- The service worked in partnership with health and social care professionals to ensure people received the best possible outcomes. Feedback from professionals in relation to Stinchcombe Manor was positive. Professionals provided feedback that the care people received was appropriate and tailored to their needs.
- The service worked with professionals to ensure any concerns or changes in people's needs were addressed promptly. Professionals provided feedback on the management of Stinchcombe Manor, and discussed that the service worked well with them and acted on their recommendations as well as identifying any support people may require.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance The provider did not always operate effective systems to monitor, assess and improve the quality of service they provided. Regulation 17.