

HC-One Limited

Stamford Court

Inspection report

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Date of inspection visit:
17 October 2022
19 October 2022

Date of publication:
22 November 2022

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

Stamford Court is a residential care home providing personal and nursing care to up to 40 people. The service provides support to older people and people with physical disabilities who require nursing care. At the time of our inspection there were 39 people using the service. Stamford Court is a purpose build care home providing care across two floors with a variety of communal living areas, adapted bathrooms and secure outside space. Bedrooms are single occupancy with ensuite facilities, and a lift provides access to both floors of the home.

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

People felt safe and there were enough staff to meet their needs. The premises were clean and tidy and equipment suitably maintained. Risk was assessed and mitigated as much as possible and both environmental and individual assessments were in place. Medicines were safely stored and managed and staff were safely recruited.

People's needs were assessed and reviewed and where external healthcare input was needed referrals were made. People were supported to eat and drink enough and staff received the training and support they needed to meet people's needs.

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.

People told us staff were kind and caring and promoted choice and independence where possible. People were encouraged to make decisions about their care and were treated with respect and dignity.

People received personalised care in line with their preferences and wishes and were supported to engage in a range of activities and interests relevant to them. People felt able to raise concerns if needed and complaints were investigated, with action taken where needed. Staff were committed to providing good end of life care and ensuring people remained as comfortable as possible.

The registered manager had a variety of systems to ensure the home was safe and provided good quality care, including regular checks and audits of records. There were a variety of systems to obtain feedback and action was taken in response to this. The registered manager and staff worked closely as a team and there was a positive culture within the home.

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

Rating at last inspection

This service was registered with us on 27 August 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service. 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, 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?

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 ●

Stamford 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. 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

The inspection was completed by two inspectors.

Service and service type

Stamford Court 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us 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 sought feedback from the stakeholders including the local authority, professionals who work with the service and Health watch. Health watch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We reviewed information we had received about the service since the last inspection. All this information was used to plan the inspection.

During the inspection

We looked around the service to ensure it was clean, tidy and a safe place for people to live. We observed how staff cared for people throughout the day. We spoke with 5 people and 2 family members to understand their experiences of the service. We spoke with 13 members of staff including the register manager, nurses, carers and auxiliary staff.

We reviewed four peoples care records and additional records in relation to the management of medicines. We reviewed multiple records in regard to the management and quality assurance of the service.

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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe from the risk of abuse. One person told us, "I feel safe, the staff look after me." Families told us they felt confident that their relatives were safe and well cared for.
- The service had suitable policies and procedures in place to ensure staff knew what action to take in the event of a safeguarding concern. Staff were completing regular training in this area and had a good understanding of their responsibilities to safeguard people.

Assessing risk, safety monitoring and management

- Systems to ensure equipment was being safely maintained were in place and regular checks were being completed.
- People's risks were reviewed regularly, and a variety of risk assessments were in place including both individual and generic environmental risk assessments.
- People had their individual needs assessed and where risks were identified, for example regarding falls, measures were put in place to reduce the risk including equipment and care plans.

Staffing and recruitment

- Safe systems for recruitment were being followed. Checks of employee's previous employment, and with the disclosure and barring service (DBS) had been completed to ensure staff were of good character and had the skills required to fulfil their role. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions
- There were generally enough staff to meet the needs of people in a timely way. One person told us, "Staff are pretty quick at responding to me."
- Staff told us they felt there was enough staff to meet people's needs and that all staff worked well as a team.

Using medicines safely

- The service had suitable arrangements for the safe storage and management of medicines.
- The medicines room was clean and organised. Medicines were being securely stored and there were systems of regular checks to reduce the risk of medicine errors and ensure people had enough of the medicines they were prescribed.
- Guidance was in place for people who were prescribed medicines they may need occasionally, such as paracetamol for pain, so that staff would know when people might need these medicines.
- Medicine records included current photographs and important information about the person, including

any allergies they might have,

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

The service was following guidance regarding friends and family visiting people in care homes. We observed several people living in the home received visits during the day and the relatives we spoke with told us they felt welcomed when they visited the service.

Learning lessons when things go wrong

- The service had systems to ensure lessons were learnt when things went wrong. This included various tools for oversight and analysis of themes and trends. Any incidents and lessons learnt were shared across the provider's homes.
- Information was shared in a variety of forums and meetings to ensure staff were up to date with any action they needed to take in response to any accidents or incidents.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People had assessments of their needs and these were used to ensure appropriate care was delivered that met people's individual needs. Assessments were linked to the care plans implemented.
- People's needs were reviewed regularly and specific areas of risk, such as wounds, were closely monitored and managed to ensure wounds were healing as expected.

Staff support: induction, training, skills and experience

- There was a stable staff team in place who knew people well and were able to meet their needs. People told us they were happy with how they were supported.
- Staff told us they accessed a variety of training and were encouraged to develop in their role. One member of staff said, "We do training online. It is pretty comprehensive. We do some face to face training too."
- Staff told us they felt well supported and had regular supervisions. One member of staff commented, "[Registered managers] door is always open." Another staff member told us, "[Registered manager] is very respectful of us and will listen."

Supporting people to eat and drink enough to maintain a balanced diet

- The chef had a good understanding of people's specific dietary needs and took time to ensure that modified meals looked appealing.
- People generally spoke positively about the food provided and we observed people appeared to be enjoying the meals provided. Condiments such as salt and pepper were not always offered or available. The chef would provide people with alternatives if they did not like the options available on the menu.
- Staff supported people to eat and drink with dignity and patience when they required additional support.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff made referrals where people required specialist input such as regarding swallowing difficulties, choking risk and wounds management. Where external assessments and advice had been given these were incorporated into people's care plans.
- The service worked closely with the local doctor's surgery who completed regular reviews of people's health needs.
- People and families told us they were confident that staff would recognise when they needed medical input and would call a doctor if needed. Families told us they received updates if their relative became unwell.

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

- The building was purpose built and was suitable to meet people's needs.
- Adaptations were made in the home including adapted bathrooms. Bedrooms were spacious and a number of people chose to spend the majority of their time in their own rooms. People and families were able to personalise bedrooms to make them comfortable and homely.

Ensuring consent to care and treatment in line with law and guidance

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 MCA.

In care homes, and some hospitals, 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 appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Systems were in place to ensure people had the necessary capacity assessments and decisions were made and recorded in people's best interests.
- DoLS applications were made when people were subject to restrictions. The registered manager understood MCA and DoLS and was able to explain where people were subject to conditions how these were being met. In one person's records we found that more robust systems could be implemented to ensure and demonstrate how the service was meeting conditions on DoLS and the registered manager took immediate action to address this.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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

- People were well treated by staff.
- People and families told us staff were kind and caring. One person said, "It's nice here. I'm comfortable here and staff will come and talk to me although I like to stay in my room. Staff help me and I don't feel rushed."
- We observed staff would be kind and patient with people and would knock before going into people's bedrooms and generally ensured they obtained consent before providing support.

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

- People and families were supported to make decisions about their care.
- The service used a 'person of the day' scheme to ensure people had regular reviews of their care and were supported to express their views. Staff would seek advocacy services if needed.
- The service held meetings with the people living at the service and their relatives to gain feedback including ideas for the future and provide updates about any plans and changes within the service.
- The home had a wish tree where people were able to express their wishes. These were reviewed and activities arranged based on this feedback.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity. Staff were discreet when supporting people with personal care and provided support in a dignified way.
- Staff completed regular checks with people in their bedrooms, and where people were able to use these, call bells were accessible to ensure a person could seek support from staff if needed. Staff responded quickly to these.
- Care plans showed that people were able to be as independent as possible. Care plans reflected choices and preferences around their support needs. People were able to make choices around their daily lives including where they spent time and what they did.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care plans contained details about people's specific needs and risk and reflected their choices and preferences. People fed back that staff supported them in line with how they wanted to be supported.
- Care plans and assessments were regularly reviewed by staff and rewritten when needs changed. The registered manager was responsive to feedback given to ensure care plans were detailed and specific.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People had assessments of their communication needs and care plans were in place to meet these needs.
- The service could adapt information as needed to meet people's needs. One person told us "I love to read but the print in the books I had were too small. The activity person has gone to the library and arrange for large prints books for me."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service completed a life story with people and their families to understand people's experiences and interests and help build relationships within the home. These were then used to develop person centred care plans and activities. The activity worker would support people to access any equipment needed to pursue their interests.
- People spoke positively about the activities available with in the home and we saw people were given the opportunity to engage in activities during the day should they want. One person commented, "There is a singer that comes in who is good and we can play bingo when it is on."

Improving care quality in response to complaints or concerns

- People, relatives and staff all felt able to raise concerns and make complaints and were confident that any issues would be addressed.
- One relative commented, "The staff are very obliging. If I have had any concerns, I get a phone call which gives me reassurance."
- The service had policies and procedures regarding the management of complaints. Where complaints had been made these were investigated and a response provided to the complainant. The registered manager

explained how they would use complaints and concerns as feedback and opportunities to learn lessons and improve the service.

End of life care and support

- End of life care plans were in place for people. These reflected people's cultural needs and detail about how and what medicines people may be prescribed to ensure they remain comfortable whilst being supported at the end of life.
- Staff were committed to providing good quality support to people and had completed training in this area.

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

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

- The service had an open positive culture. Staff told us they felt part of a team and were committed to providing good quality care. One member of staff said, "There is a lovely atmosphere when working here. We have so much fun and I love spending time talking with the people and getting to know them."
- Family members commented on the quality of care being given. One family member told us, "My [family member] has settled in well. They were very fragile when they came but have really improved."

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; Continuous learning and improving care

- The provider and registered manager understood their responsibilities to be open and transparent with people and their families when something went wrong. Apologies would be offered when appropriate and action taken to reduce future risk and learn lessons.
- The registered manager was notifying relevant authorities when required. This included making statutory notifications to CQC and referrals to the local authority safeguarding team.
- The service was responsive to feedback and took immediate action to address any areas for improvement.

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

- The registered manager and staff team understood their roles and responsibilities. There were systems in place to monitor quality and ensure good governance.
- The management team carried out a range of checks and audits to monitor and improve the quality of care and support people received. Action was taken to drive improvements when audits identified issues.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and relatives were encouraged to provide feedback through various channels including surveys and meetings. Action was taken in response to this feedback. People gave us a variety of examples of how staff had responded to individual requests including regarding meals and activities.
- Staff were supported to engage in service development through various meetings. All staff told us they felt able to give feedback and make suggestions and were encouraged to develop within their roles.
- The service worked in partnership with a range of other healthcare agencies such as doctors, mental

health team, speech and language therapy and tissue viability nurses.

- The service had links with the local community including local schools and religious organisations and would arrange shared events which recently had included a tree planting ceremony.