

Curtis Homes Limited

Hampton House

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Hampton House is a care home providing accommodation to persons who require nursing or personal care, for up to 37 people. The service provides support to older people. At the time of our inspection there were 32 people using the service. People are accommodated in one adapted building, with a large communal room and access to a secure garden. Each person had a bathroom which contained en-suite facilities.

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

People told us they felt safe living at Hampton House. They told us staff knew them well and understood their needs. People were involved in planning and managing their care. Staff worked with people to promote their independence and supported them to manage their own medicines where appropriate.

People enjoyed an active and engaging life at Hampton House. They enjoyed a range of activities and events which were tailored to their needs and preferences.

People were supported by a stable staffing and management team who understood and respected people's needs. One person told us, "I feel like staff know us. Some of the staff have been here years." A relative told us, "Staff know people so well, they are so good at meeting the minor needs. They do go the extra mile to ensure [relative] is happy and contented." The home did not use agency staff. Staff told us they had the skills, time and support they needed to meet people's needs.

Incidents and accidents were reviewed to reduce the risk of reoccurrence. The management reviewed where accidents occurred to identify any potential trends. Staff were supported to reflect on incidents and medicine errors to enable them to make improvements.

The provider had infection control procedures in place to protect people and prevent the spread of infection. Staff used personal protective equipment (PPE) in accordance with government guidance. People's friends and family were able to visit the home with no restrictions.

People living at Hampton House were able to make their own decisions. At the time of our inspection, no one was living under the Deprivation of Liberty Safeguards.

The registered manager and deputy manager operated effective systems to monitor the quality of care they provided people living at Hampton House. Staff carried out audits and the registered manager and deputy manager took appropriate action when improvements were needed.

Staff were encouraged to share their ideas and thoughts and were rewarded if an idea was implemented into practice at Hampton House.

People, their relatives and staff spoke positively about the management of the service. They felt that

Hampton House was well led and praised the communication they received from the management team. Healthcare professionals spoke positively of Hampton House and how the service met people's needs.

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 30 November 2017). 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 and the length of time since the last inspection. As a result, we undertook a focused inspection to review the key questions of safe, responsive and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

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 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 ●

Hampton House

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 and an Experts by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Hampton House 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. The registered manager was also the service provider.

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 October 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 17 people who lived or were staying at Hampton House. We spoke with 6 people's relatives about their experience of the care and support provided by the service. We also spoke with a visiting healthcare professional.

We spoke with 7 staff including the registered manager, deputy manager, 1 care leader, 3 care assistants and a catering manager. We also received feedback from 6 staff who work at Hampton House.

We reviewed a range of records. This included 5 people's care records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the management team to validate evidence found. We sought feedback from 2 healthcare professionals involved in the service.

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 remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People's risks were assessed and known by care staff. People and their representatives were involved in planning and discussing their care preferences. One person had made a risk-based decision in relation to their dietary needs. Staff had discussed this and the risk with the person, recorded their preferences and respected the person's decision.
- Where people had specific healthcare needs, their individual needs had been assessed. Staff we spoke with understood people's needs and the support they provided.
- Guidance was in place to support people at risk of falls. When people fell, people were monitored to ensure they had not sustained an injury. Falls were reviewed and these showed health professionals were contacted promptly when needed to keep people safe.
- People were protected from the risk of their environment. Appropriate checks had been made to ensure the environment was safe. The registered manager had systems in place to improve and maintain records in relation to environmental risks.

Learning lessons when things go wrong

- Care staff were supported to reflect on incidents, accidents and medicine errors. This included reviewing the support and training staff required. The management also worked with other organisations to communicate any issues they identified to ensure appropriate action was taken.
- When accidents occurred, the management carried out accident and incident audits. They reviewed when and where accidents happened and who was impacted. This enabled them to identify if people required additional support and identify any potential concerns in relation to staffing and staff deployment.

Using medicines safely

- People's medicines were stored safely, and they received their medicines as prescribed.
- Staff had received medicines training and guidance. The management team and provider had checked that 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 in pain. Protocols contained clear guidance for staff to follow, including when to administer these medicines and how to review their effectiveness.
- Where appropriate, people were supported to administer their prescribed medicines. Staff supported them as much as they required, including ordering medicines. Staff carried out regular checks and discussions with people to ensure they remained satisfied with their medicine arrangements.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections. People told us the home was clean. Comments included: "It's clean and smells nice" and "The home is always very clean. I can't fault them."
- 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. The service had made a decision with staff, people and their relatives to continue wearing face masks. This decision was agreed by all parties due to seasonal illnesses and COVID. One relative told us, "They involved us, I respect the decision."
- 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.

Visiting in care homes

The provider was following current government guidance in relation to visiting at the time of the inspection.

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 have no reason not to feel safe here" and "The service is safe. I have never had any concerns. I have peace of mind; I can go on holiday and not worry."
- The registered manager and deputy manager were visible and regularly worked alongside staff which made it easier for any concerns to be identified or reported. The management team took appropriate action to safeguard people. They ensured safeguarding authorities were informed of any concerns and took action to protect people from harm.
- Staff had read the provider's whistleblowing policy and procedures and felt able to report any concerns about poor practice or inappropriate staff behaviour. One member of staff told us, "If I've ever had a concern or worry within the workplace I find [deputy manager] approachable and they have always remained very calm and tackles any concern with nothing but fairness and professionalism."

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).

- 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. At the time of our inspection no one was living under DoLS.

Staffing and recruitment

- Suitable staffing levels were in place to meet the needs of people using the service. The home had a stable

staffing team and did not use agency staff to maintain staffing.

- People and their relatives praised the staff team and the continuity of care they or their loved ones received. Comments included: "Staff are always popping in to see him and checking he is okay" and "There have been times at the night when she's needed assistance and they've been with her straight away. She only has to press her call bell or shout and they are there very quickly. I've seen it for myself."
- Staff told us there were enough staff and they had the time they needed to provide people's care. Comments included, "We have enough staff, that has never been a concern for me" and "We have a consistent staff team. We help each other out. We're incredibly proud we don't use agency here. It means the residents are cared for by staff they know and trust."
- Staff were recruited safely and the registered manager assured themselves staff were of good character. 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.

Is the service responsive?

Our findings

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

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'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

- People were supported to plan and make their own decisions about how they would like their care delivered. At assessment people were supported to discuss their life histories and the things that were important to them and their care plans reflected this. One person told us, "I go to bed every night very happy to be here."
- When people came to live at Hampton House they were supported by a dedicated member of staff to reduce any anxieties they may have with such a change and to support them to settle in their new home. Staff also carried out a one-week review to ensure the person was comfortable and make any changes to meet the person's care. One relative told us, "The support we received when [relative] moved in was so comforting, it enabled [relative] to settle in quickly."
- People receiving respite care were supported to maintain their independence when staying at Hampton House. One person was supported to maintain their independence to manage all aspects of their care, including ordering and auditing their own prescribed medicines.
- Staff were responsive to people's needs. Staff, people and relatives told us of examples where staff had reacted to their needs immediately to promote their independence and wellbeing. One relative told us about their loved one who had had a few falls. They told us, "I went to speak with [deputy manager] about rearranging the furniture to make it easier for [relative]. Before I left the home [deputy manager] and [registered manager] had moved the furniture. I was impressed, they took it seriously and they were proactive."
- One relative spoke positively about how staff understood their loved one's needs. They told us, "My mum lost an earring. One member of staff identified that mum folds important things up and takes them away safely. We never told them that, they picked that up themselves and they found it. I feel they have a good handle on mum and her needs. We are very lucky."
- A healthcare professional spoke positively of the service and told us they felt staff cared for people well and this was reflected in the fact that many people stay for a long period of time.

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

- People were free to spend their days as they chose. We saw people enjoying the garden, spending time with others and enjoying some adhoc activities.
- A range of activities which were tailored to people's interests were available. We saw people enjoying friendly games of scrabble, chess and anagrams. Each member of staff had a specific activity they lead on, which helped develop engagement in activities for people. Comments included, "I can't say I get bored" and "I enjoy that we are involved, we do things we want to and enjoy them."

- The home arranged for regular themed days as well as drinks and tea parties. These were well attended and enjoyed. One relative told us, "Dad loves all the activities there especially the scrabble and anagram afternoons. He really likes living there. Compared to when he was at home, he is much more settled. He is extremely content at Hampton House and he trusts all the staff. Staff really listen and I'm certain that they would listen and respond."
- People's birthdays were celebrated and made to feel important. One relative told us, "Mum loved the vintage tea party, she talked about it afterwards. So, when it came to her birthday they did it again. She really enjoyed it."
- The registered manager had appointed a wellbeing co-ordinator to support people to become more involved or to rekindle a hobby or interest. They also provided people with conversation and promote further development on their goals and aspirations.
- People maintained their personal relationships. People's relatives were supported to visit and also to take their loved ones out. One relative told us, "It's their home. Staff always make us feel so welcome, this makes us feel reassured."

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.

- Each person's communication needs had been clearly recorded as part of their care plan. The persons views including how they would like to be addressed and any additional support they required was recorded.

Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to make a complaint to the service and felt their complaints would be listened to. Comments included: "I've never had any concerns. I've had discussions with management. I know how to get in touch with them. They are approachable" and "I know [registered manager] and [deputy manager] are approachable. I haven't had to raise a concern; however I have every confidence they would act on my views."
- The management acted on any concerns or suggestions in a timely manner. At the time of our inspection the service hadn't received any complaints or concerns.

End of life care and support

- People were cared for at the end of their life through the service working in partnership with health professionals. Where relevant, anticipatory medicines had been prescribed by health professionals.
- Where people had recorded their wishes for their end of life care, these were known to the staff. Where appropriate, people had been supported to discuss their views, including the people they wished to be involved at the end of their life.

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. The rating for this key question has remained the same. 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

- People benefited from a positive culture in the home. Staff demonstrated a strong desire to achieve consistently good outcomes for people. People and their relatives spoke positively about the service. People's comments included, "If you have to be somewhere like this you couldn't be anywhere nicer, I can't fault the staff, if I need anything they do it happily for me, they're pleased to help" and "I like that they know Dad so well. They all seem really caring and spend time with Dad. If we are away then staff will send us photos so we can see what he is up to. This is really nice."
- Staff told us they felt supported and valued by the registered manager and deputy manager. They expressed how this support fostered a caring and inclusive culture within Hampton House, which informed how they supported people. Staff comments included, "During the COVID epidemic [registered manager] made sure that her team were trained to keep our residents safe and provided staff with full support and even provided goodie bags to help us through the difficult time" and "They're committed to ensuring their staffs wellbeing is looked after. Hampton house is more than a workplace, it's a family unit led by caring, supportive, encouraging management."
- A number of staff told us about the personal support they received from the management during difficult times and during the recent pandemic. Staff spoke positively how they were supported in a sensitive way which promoted their wellbeing.
- Staff spoke positively about how the team worked well to provide good care. Staff comments included, "I consider myself very fortunate to work alongside my colleagues who strive to give the best care. We all have such different strengths" and "The home also looks after their staff by giving full accurate training and making sure their team are given achievable tasks which results in a happy environment."
- The registered manager and deputy manager were open and transparent throughout our inspection and were clearly committed to providing good quality care. Throughout the inspection we observed they were engaging with staff. The deputy manager also explained they worked early mornings to enable them to have regular contact with the night team. This ensured all staff working at Hampton House had access to a member of management.

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

- People's views were sought and acted upon. Each person was supported with a monthly review where they were able to express their views on their care and life at Hampton House. People were asked for their views by catering managers as well as the deputy manager and registered manager. One person told us,

"They're [staff] all very good, in fact they bend over backward to help, never rushed. I feel really well cared for. Staff do listen to what you're saying."

- The registered manager had carried out a survey of people's relatives in 2022. The feedback from this survey was positive. Following this survey, they had identified some areas where they could improve communication about certain facilities available at the home. People's relatives told us they had good communication from the management. One relative told us, "My impression of management is that, because the home is managed by the owners, they take a personal interest in it. They pay attention to detail."
- Staff had opportunities to share information, including any information of concern through handover meetings and communication with managers. Staff spoke positively about the information they received, including knowing their working rota weeks in advance, enabling them to maintain a healthy work life balance. One member of staff told us, "I believe [registered manager] and [deputy manager] together are very proactive in keeping the standard of care high. I've always admired the way that if something doesn't work they are quick to adjust to ensure everyone's needs are met, whether it's a change in breaktimes or a change in what's appropriate for our residents (as we're seeing a new generation enter the care environment). Nothing is ever not considered or thought about."
- The registered manager had implemented a good idea scheme. This was a scheme which rewarded staff if an idea they suggested was implemented into practice. One suggestion implemented was to provide lighter weight cups with the aim of promoting people's hydration. Staff spoke positively about this scheme and felt it promoted creative thinking.

Continuous learning and improving care

- The registered manager and deputy manager focused on continuous learning to improve the service people received. They had identified issues in relation to the supply of people's medicines. In agreement with the pharmacist they changed when their medicines were supplied, this enabled them to reduce any potential impact on people not receiving their medicines as prescribed.
- The registered manager had reflected on induction practices for new staff. They had focused on new staff (regardless of their role) being supported to work on the floor to develop their relationships with people and other staff. They told us this enabled staff to understand the culture in the home as well as enabling them to bring in fresh ideas in a positive way.
- Staff spoke positively about training in the home, and how the management supported them to develop and maintain their skills. Comments included: "I was given comprehensive training to perform my new role and they have supported me to make sure I fulfil my duties to maintain the excellent standards at Hampton House" and "The management ensure staff are happy and equipped with the correct knowledge and skills needed whilst providing a stimulating and nurturing environment for our residents."

Working in partnership with others

- The service worked productively with other professionals to ensure people's needs were maintained. The management had developed strong links with people's GP and the supplying pharmacist.
- Feedback from partnership organisations was positive, feeling the management and staff at Hampton House provided a safe and responsive service. One professional told us they felt Hampton House was well run and well organised.

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

- The registered manager, deputy manager and senior care staff undertook a range of quality assurance audits to ensure a good standard of service was maintained. We saw audit activity which included medicines, infection control, incidents and accidents and health and safety. Any shortfalls or concerns were

documented in action plans and appropriate action was taken.

- Scheduled audits evidenced where improvements had been made and where further action was required. Medicine management audits showed improvements had been made in relation to recording following staff support.
- When required, the management took effective action to address concerns or shortfalls. This included meeting with staff and implementing specific action plans and taking action when required standards weren't met.
- The provider had informed the CQC of significant events in a timely way, such as when people had passed away. This meant we could check appropriate action had been taken.

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 service had policies in place to ensure the staff team understood their responsibilities under the duty of candour.