

# Mr Munundev Gunputh & Mrs Dhudrayne Gunputh Seacliff Care Home

## Inspection report

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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

Seacliff Care Home is a residential care home registered to provide care and support to up to 24 people. The service provides support to older people some of whom were living with dementia. At the time of our inspection there were 21 people using the service.

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

Improvements had been made to the quality assurance and oversight processes within the home. A variety of audits and checks meant there was consideration to continual improvement. Medicines procedures were strengthened, and good practice guidance was key to the improvements made.

People, their relatives and staff told us Seacliff Care Home was a safe place to be. There were enough staff on duty, and they had been recruited using robust, safe processes. Staff knew how to identify, and report concerns about people, they were confident matters would be followed up.

People had risk assessments in place for all their care and support. Assessments were reviewed regularly and supported people to live their life the way they wanted to. 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 were protected from avoidable infections; the home was clean and hygiene processes were in place. Accidents and incidents were recorded and reviewed to ensure lessons were learned within the home.

Staff felt appreciated and proud to work at Seacliff Care Home. They were complimentary about the leadership of the home and their colleagues. The registered manager understood their regulatory responsibilities.

Staff knew and understood their job role and tasks were defined. The home sought to work in partnership with a range of external professionals including making links within their local community. Seacliff Care Home actively sought feedback on the quality of the care provided and used the information to continually improve.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 3 February 2022). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

At our last inspection we recommended that the provider follow good practice guidelines for the safe management of medicines. At this inspection we found the provider had acted on the recommendation and were operating safe practices.

#### Why we inspected

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

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

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?**

This service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service well-led?**

This service was well-led.

Details are in our well-led findings below.

**Good** ●

# Seacliff 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 (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 carried out by 1 inspector.

#### Service and service type

Seacliff 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. Seacliff is a care home without nursing care. 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority service improvement and safeguarding teams. The provider completed a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with 4 people who used the service and 2 relatives about their experience of the care provided. We spoke with 8 members of staff including the registered manager, deputy manager, quality and compliance lead, care team leader, health care assistants and the provider. We made observations throughout the day of interactions between people and staff.

We reviewed a range of records. This included 4 people's care records and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection we recommended the provider ensured staff practice, adhered to their policy and good practice guidance for the safe handling of medicines. Improvements had been made.

- People received their medicines as prescribed. There were safe procedures in place for the storage, administration, and disposal of medicines within the home.
- Procedures for medicines which required stricter controls by law were robust. Recording systems had been improved and demonstrated safe working practices had been sustained.
- Guidance for medicines which were taken as required, were in place for each person and each medicine. Staff used the guidance to ensure these medicines were offered consistently.
- Medicine administration records were completed accurately, and checks were in place to ensure they were signed and legible.
- Staff who gave medicines were trained and had their competency assessed regularly. A relative said, "They [staff] do help my loved one [name] with their medicines, are patient and makes sure they get them safely."

### Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with the service they received from Seacliff Care Home. Some of their comments were: "The residents are 100% safe here", "People are safe because they are well looked after", "Yes, residents are safe at Seacliff", "I feel my loved one [name] is very safe living there. They know the staff well; they know them by sight. Staff know them well too", "I feel my relative [name] is safe", "I've been very happy with it all my loved one [name] landed on her feet there they [staff] are all so good and attentive."
- Staff told us they knew how to recognise the signs that someone may be at risk of harm or abuse. They knew who to report their concerns to both inside the home and externally. A staff member said, "If we have any concerns, they are dealt with."
- There were clear communication channels for raising concerns within the service. Posters displayed around the service reminded staff of the importance of speaking up and gave the number to call should they need to raise concerns to the local authority. The registered manager told us, "I feel I can pick up the phone and talk through safeguarding concerns. I have a good working relationship with the local authority safeguarding team."
- Staff had received training in safeguarding and were confident any concerns they raised would be taken seriously and acted upon by the registered manager and deputy manager.
- Safeguarding concerns were reviewed monthly; records showed all necessary actions and referrals had

been made.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People had risk assessments in place for their care and support needs. Reviews were regular and took place as planned. Staff understood people's risks well.
- Risk assessments gave clear instructions for staff. The assessments were arranged to show the care the person needed and what the risks were. Clear instructions for staff of safe ways to work supported them to reduce or eliminate risks.
- Staff had a good knowledge of people's risks. Records showed that care was delivered in line with people's risk assessments, they were detailed, and person centred.
- Accidents and incidents were recorded, and the registered manager analysed the result monthly. Records showed reviews were conducted to identify themes and trends. This had been a significant area of improvement as the provider was working on specific risk areas such as infections and variable dose medicines. This meant people were further protected from avoidable harm.
- Maintenance and equipment safety checks took place regularly. These included fire safety, equipment, electrical and gas safety checks. People had personal emergency evacuation plans in place which documented the support they required in the event of an emergency.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There were enough staff on duty. There had been improvements in staff sickness rates and retention which had supported the home to provide consistent care.
- Recruitment of staff was ongoing. The home had faced the same challenges as other providers due to the national shortage of care workers. However, they had continued to make good progress, including a number of staff returning to work at the home.
- Seacliff Care Home used a dependency tool to work out safe staffing levels. This process looked at a person's needs and calculated the number of staff needed to meet their needs and ensure safety. Staffing had been increased and this had a positive effect on safety and wellbeing.
- The home had a recruitment process and checks were in place. These demonstrated that staff had the skills, knowledge and character needed to care for people. Staff files contained records of appropriate checks, such as references, health screening and a Disclosure and Barring Service (DBS) check. The DBS checks people's criminal record history and their suitability to work with people in a care setting.

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.
- Seacliff care home were supporting visiting within the home in line with government and good practice guidelines.

# 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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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

At our last inspection the provider had failed to ensure their quality assurance systems were operating effectively. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Significant and sustained improvements had been made since the last inspection. Governance systems were operating effectively.
- Oversight of the service was multi-layered. Audits and checks were in place within the home and at the provider level. New roles had been introduced in the home to support with compliance.
- Staff understood their role and had clear responsibilities. Staff told us they were clear on the expectations of the registered manager.
- Seacliff Care Home were proactive in their approach to developments within the home. The registered manager said, "We were always firefighting, now we can really look at areas to develop and improve."

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

- The registered manager told us they actively engaged staff in decisions about the service whilst working closely with the quality and compliance lead and the deputy manager. Staff felt involved and worked together to provide a good service. A member of staff said, "There is good leadership, and I feel appreciated."
- Staff were proud to work at Seacliff Care Home, their comments included: "I am proud of the team and proud to be a part of the team", "We are a team", "I am proud because of what we have achieved. I feel appreciated", "The staff are happy, we gel together", "There is such a nice atmosphere."
- People, professionals and staff were complimentary about the management of Seacliff Care Home. Some of their comments included: "The management team is doing such a good job", "The registered manager [name] listens and implements things", "The deputy manager [name] is wonderful", "The registered manager [name] is amazing", "The team is amazing", "I love working here", "The registered manager [name] and deputy manager [name] are doing a really good job, we are doing so much better."

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 the requirements of the duty of candour, that is, their duty to be honest, open and apologise for any accident or incident that had caused or placed a person at risk of harm.
- The registered manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and serious injury. This is a legal requirement.

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

- Seacliff Care Home undertook regular surveys and questionnaires to monitor the standard of the service they provide. Results were positive and continual feedback was welcomed by the service. One relative said, "We feel listened to that's really important, and they [staff] hear our views. They [staff] are all very approachable and friendly."
- Staff felt appreciated, morale had improved since our last inspection. One staff member said, "I feel this is the most the home has been up together."
- The registered manager told us they have a good working partnership with outside agencies. We received positive feedback about the way Seacliff Care Home engages with outside agencies.