

## Christchurch Housing Society

# Silverways Nursing Home

### Inspection report

Silver Way  
Highcliffe-on-Sea  
Christchurch  
Dorset  
BH23 4LJ

Date of inspection visit:  
19 October 2023

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Tel: 01425272919

### 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

Silverways Nursing Home is a residential care home providing personal and nursing care for up to 61 people. The service provides support to older people. At the time of our inspection there were 41 people using the service. Silverways is located in a residential area and accommodation is provided over two floors. Shared facilities include specialist bathrooms and lounge and dining areas.

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

People told us they felt safe. Risks to people were regularly assessed, monitored, and reviewed. Staff knew people well and the actions they needed to take to help keep them safe. People had their medicines managed safely and were protected from avoidable infection. There were enough staff with the right skills and experience to care for people safely. Recruitment processes were robust ensuring the right staff were employed to work with older people.

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.

The culture of the home was open, caring, and friendly. Staff felt supported and were happy in their roles, speaking positively about the home and the care provided. The management team were visible and worked alongside the care team in providing person centred care. People, their families and staff felt included in the development of the service and able to speak up. Quality assurance systems and processes were in place and used to ensure quality standards were being met.

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

The last rating for this service was good (published 11 July 2018).

### 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 remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Silverways Nursing Home on our website at [www.cqc.org.uk](http://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?**

**Good** ●

The service was safe.

Details are in our safe findings below.

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

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Silverways Nursing 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 2 inspectors.

#### Service and service type

Silverways Nursing Home 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. Silverways Nursing Home is a care home with 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 and professionals who work with the service. The provider was not asked to complete 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.

### During the inspection

We spoke with 4 people who used the service and 4 relatives about their experience of the care provided. We spoke with 8 members of staff which included the registered manager, deputy manager, nursing and care staff and the chef.

We reviewed a range of records. This included 5 people's care records and medication records. We looked at 2 staff files in relation to recruitment and a variety of records relating to the management 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.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were cared for by staff that had undertaken safeguarding training and understood their role in recognising and reporting concerns of abuse or poor care practice.
- People and their families told us they felt safe. A person told us, "I'm safe here, the staff know what I like, I have no complaints at all its all good". A relative said, "Care is 100% safe, the building is secure, we feel (relative) is safe and cared for well."
- Records demonstrated that protocols for reporting concerns to external agencies were being followed. This meant that statutory bodies had oversight of any safeguarding issues and were able to investigate and monitor if necessary.

Assessing risk, safety monitoring and management

- People had their risks assessed, monitored, and regularly reviewed. People were involved in decisions about how their risks were managed. Risks included falls, skin damage and risk of choking. A person shared with us, "(Staff) put the bed rails up at night and I'm happy for that. They always check everything is done right and that I'm ok."
- Staff knew people well and understood the actions needed to minimise risks to people. This included using specialised equipment such as pressure relieving mattresses, alarm alert mats for people at risk of falling and ensuring safe swallowing plans were followed.
- Staff had completed fire training. Not all staff were up to date with fire drill practice. This was scheduled during our inspection. Fire equipment was regularly checked and serviced. People had personal emergency evacuation plans in place providing key information should they need to evacuate the building.
- Records showed us that key equipment such as lifts, gas boilers and equipment used to lift and transfer people were regularly serviced and in good working order.

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.

#### Staffing and recruitment

- People were supported by enough staff with the right level of skills and experience to meet their care needs safely.
- People and their families told us that staffing levels were good. A person said, "If I have to use the call bell, they come straight away to check on me." A health professional who regularly visited the service told us, "The main thing I notice about the home is there are plenty of carers present and at hand to provide care."
- Staff had been recruited safely. Recruitment checks ensured that staff were suitable to work with older people. Checks included obtaining and verifying references, full employment history and a criminal record check. This information helped employers make safer recruitment decisions.

#### Using medicines safely

- People had their medicines managed safely. Medicines were administered by staff who had completed safe management of medicines training and had their competencies checked regularly.
- When medicines had been prescribed for as and when needed protocols were in place to ensure they were administered safely and appropriately.
- When topical creams had been prescribed a body map was in place providing details of where and when creams needed to be applied.
- There were suitable arrangements for storage, recording and disposal of medicines, including those needing cold storage or extra security.

#### Preventing and controlling infection

- Staff had completed infection, prevention and control training and we observed good practice.
- The service had a good supply of gloves and aprons which they were using effectively and safely.
- The environment, furnishings and equipment were clean and well maintained.
- In line with current guidance there were no visiting restrictions in place.

#### Learning lessons when things go wrong

- Accidents and other incidents were analysed and used as an opportunity to learn and improve outcomes for people. Actions had included reviewing care and support plans and staff training.
- Handovers and staff meetings were used as an opportunity to share outcomes of incidents and reflect on practice.



# 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 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

- People, their families and the staff team all described the culture of the home as open and friendly with a home from home vibe. We observed interactions that reflected this and put people at the centre of their care.
- People, their families and staff team told us they felt listened to and included in decisions that shaped positive outcomes for people living at Silverways. A member of staff told us, "It's a happy place to work, you can ask questions and the focus is on what people can do."
- The management team were visible and worked alongside the staff team. A staff member told us, "You feel you can see the registered manager at any time. He is visible, jack of all trades, very flexible and you can rely on him." A visiting health professional told us, "There is a real nice connection between management and all staff that makes it feel like a team."

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. This is their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm. Records, and conversations with families demonstrated the duty of candour was met.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Staff had a clear understanding of their roles and scope of decision making. Daily handovers provided an opportunity for information sharing, clear communications about events in the home and allocated tasks.
- Quality assurance systems and processes were in place that included regular audits of key areas such as medicines, infection control and health and safety. Audits were completed by senior staff and included gathering the voice of people and the staff team.
- The registered manager had oversight of identified actions and used these to drive improvement. An example included creating storage space for equipment to create safer walkways around the home.
- The registered manager told us that surveys were in progress to gather feedback on the experiences of people, relatives, visiting professionals and the staff team and would be using the results to further improve quality and outcomes for people.

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

characteristics; Working in partnership with others

- People, families and staff had opportunities to be involved in the service through a range of planned meetings and informal conversations. Minutes showed subjects discussed included health and safety, working arrangements and resident safety.
- The management team worked with other organisations and professionals to ensure people's care and support was in line with best practice guidance. This included accessing Skills for Care, an online care resources site, attending local management forums and accessing guidance and training from local specialist health professionals.
- Silverways had links with the Gold Standards Framework charity and been successful in achieving an accreditation. This recognised best practice in end of life care.