

Royal Bay Care Homes Ltd

The Old Vicarage

Inspection report

Weekly Village
Kettering
Northamptonshire
NN16 9UP

Tel: 01536484378
Website: www.royalbay.co.uk

Date of inspection visit:
18 October 2023

Date of publication:
07 November 2023

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

The Old Vicarage is a residential care home providing personal and nursing care to up to 38 people. The service provides support to older people. At the time of our inspection there were 27 people using the service.

People's experience of the service and what we found:

People felt safe within the service. Risk assessments were in place to manage risks within people's lives, and staff understood how to manage risk.

Staff recruitment procedures ensured that appropriate pre-employment checks were carried out.

Medicines were stored and administered safely, and staff had training in this area.

Staffing support matched people's needs within the service during our inspection. Staff were supervised well and felt confident in their roles.

The staff and management was open and honest, and worked in partnership with outside agencies to improve people's support when required.

Audits of the service were detailed and any issues found were addressed promptly.

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.

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

Rating at last inspection

The last rating for this service was good (Published 17 November 2017)

Why we inspected

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

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question 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 The Old Vicarage 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?

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.

The Old Vicarage

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.

Inspection team

The inspection team consisted of one inspector.

Service and service type

The Old Vicarage 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. The Old Vicarage 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

The 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.

During the inspection

During the inspection we spoke with 4 people who used the service, and 3 relatives of people who use the service. We also spoke with 3 staff members, the chef, the deputy manager, and the registered manager. We looked at multiple records including care plans, risk assessments, and recruitment records.

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 has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Staff were knowledgeable about safeguarding procedures and understood what to do if they suspected abuse had taken place.
- People and relatives told us they felt safe within the service. One family member told us, "I wish that [name] could have come here sooner. They look after them so well, it's the best place for [name] to be."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Risks present within people's lives were assessed to ensure that staff could work safely with people. This included risks around the environment, mobility, medicines, and activities.
- People felt their environment was safe and risks were well managed. One person said, "I have got all the equipment I need to get around. Im quite independent."

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- There were suitable numbers of staff working within the service to meet people's needs. Staff were recruited using safe recruitment procedures including identity checks, employment references, and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People told us they received prompt support from staff. One person said, "There seems to be enough staff around. I don't have to wait long."

Using medicines safely

- People were supported to receive their medicines safely.
- Medicines were administered safely by staff who were trained to do so. Records we looked at were completed accurately and were regularly checked for any errors.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- 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 were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Any incidents or accidents that occurred were recorded and investigated by management.
- Staff told us that information was communicated to them regularly to ensure lessons would be learned.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.

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 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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People and relatives all felt the service was open, honest, and well run. Visiting relatives were able to approach managers, and told us they were comfortable to do so.
- One person told us, "I can't rate this place highly enough." A family member said, "They have been so welcoming here to us all, its really made a difference. I would recommend this home to anyone."

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 provider understood their responsibilities under the duty of candour.
- The manager understood information sharing requirements. We saw that information was correctly shared with other agencies, for example, when the service had identified concerns, and the registered manager sent us notifications about events which they were required to do by law.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Staff were inducted and trained in their roles, and understood risks and regulatory requirements.
- Staff we spoke with understood what was expected of them, and felt well supported within their roles. One staff member said, "There is good support from supervisors. It's a good team that works well together."

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- People and staff were engaged with, both formally and informally. This included the use of questionnaires so that people could feedback on all aspects of their care.
- People and relatives felt they knew who staff were and were able to communicate with them positively. One relative told us, "[Staff name] has been brilliant. They go out of their way to make sure we are

comfortable."

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- The registered manager had comprehensive systems and processes in place to monitor and improve the service. All aspects of the service were audited, with clear and prompt action taken to make improvements when required.

Working in partnership with others

- The provider worked in partnership with others.
- The service had worked in partnership with various outside agencies and health and social care professionals.
- During our inspection, the staff and management team were open and honest, and receptive to any feedback given.