

# St Cuthbert's Care Holy Cross

## Inspection report

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Date of inspection visit:

22 June 2023

04 July 2023

Date of publication:

18 September 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

Holy Cross is a care home that provides personal and nursing care for up to 56 people, some of whom are living with dementia. At the time of the inspection there were 48 people living in the home.

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

People felt very safe living in the home and with the support they received from staff. People and relatives were complimentary about the staff, describing them as "friendly," "supportive" and "caring." Comments included, "I feel safe because the place is well staffed and they are very approachable, caring and the place has a good atmosphere about it" and, "The staff are very friendly, and I can have a bit of banter with them. I could not be treated better anywhere else."

Staff safeguarded people from abuse. Risks to individuals and the environment were well managed. One relative said, "It's clear that information is appropriately shared and all staff clearly know [family member] well. The whole atmosphere is of happy residents and happy staff, which has enhanced [family member's] safety." There were enough staff to meet people's needs. The provider learned from accidents and incidents to mitigate future risks. Medicines were safely managed. Infection control processes were embedded into the service and staff followed government guidance in relation to infection control and prevention practices.

People were supported to have maximum choice and control of their lives, and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

The home was well managed. A staff member told us, "Our manager has been a member of staff at Holy Cross for many years. She understands what the home is all about and is very hands on and approachable." The provider, registered manager and staff promoted a positive culture in the home. People and relatives were complimentary about the home and care people received. The provider had an effective quality assurance process in place which included regular audits. People, relatives and staff were regularly consulted about the quality of the service through daily communication, surveys, meetings and reviews.

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 4 March 2018).

### Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result, we decided to undertake a focused inspection to review the key questions of Safe and Well-led only.

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.

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. We found no evidence during this inspection that people were at risk of harm. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Holy Cross 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.

# Holy Cross

## 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 and 2 Experts by Experience. 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

Holy Cross 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. Holy Cross 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 reviewed feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

### During the inspection

We spoke with 11 people and 6 relatives about their experience of the care provided. We spoke with 9 members of staff including the owner, the nominated individual, the registered manager, a nurse, three senior care workers, a care worker and a domestic worker. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also received feedback from 4 members of staff. We carried out observations in communal areas around the home.

We reviewed documentation, inspected the safety of the premises and carried out observations in communal areas. We reviewed a range of records including 2 staff recruitment records, 3 people's care records, medicines records and quality audits. A variety of records relating to the management of the service, including policies and procedures were also 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 good. At this inspection 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

- Staff supported people to keep them safe and protect them from harm. Comments from people and relatives included, "I feel very happy and safe here. The quality of care in this service is of a very high standard. The staff on the whole are very patient and have a great sense of humour about life and that makes life happier for myself" and, "I've found it very good since I've been here. The staff are very helpful and supportive."
- Staff knew people very well and were aware of how to report any safeguarding issues or concerns.
- Safeguarding alerts were raised with the local authority in a timely way, when required.

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

- Staff assessed and managed risks to people's health, safety and wellbeing effectively.
- The premises were safe. There were environmental risk assessments in place including fire, and regular checks and testing of the premises and equipment were carried out.
- Staff recorded accidents and incidents in a timely way and took appropriate action.
- The registered manager monitored and analysed records to identify any trends or lessons learned.

Staffing and recruitment

- There were enough staff to safely meet people's needs. People and relatives told us, "I'm very happy here. I think there are enough staff on duty because there is always someone about to ask for help" and, "Staffing has always seemed OK, they (staff) certainly come as soon as we ask, when we are there."
- The provider determined staffing levels in line with people's individual support needs.
- Staff were recruited in a safe way. The provider had an effective recruitment and selection policy and procedure in place which included all appropriate checks.

Using medicines safely

- Staff safely administered and managed people's medicines. One person said, "They (staff) are fabulous at the medicines. They help me and make sure I take them."
- Staff had received up to date medicines training. They were able to explain the process of safely administering medicines, the importance of time-critical medicines and 'when required' medicines. They also clearly explained how medicines are ordered, stored and disposed of when required.
- The treatment room was kept locked and medicines were stored safely and in line with manufacturer's instructions. Regular room and fridge temperature checks were taking place.
- Regular medicine checks and audits were carried out to identify any errors and take appropriate action.

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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current 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 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 staff were working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.



# 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 the last inspection this key question was rated good. At this inspection 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

- The provider, registered manager and staff promoted a positive culture in the home. People told us, "The staff are all incredibly good. They are very caring, patient and, above all, cheerful. The atmosphere here makes it a happy place" and, "The staff are terrific. Nothing but helpful. There is a sense of fun about the place and a sense I am valued."
- Staff enjoyed working in the home and were passionate about their roles. One staff member said, "The good things about Holy Cross are that it is a welcoming environment, all the staff are friendly and they have very good teamwork. I enjoy knowing that I have made some one happy."

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 was aware of their responsibilities regarding the duty of candour. The registered manager and provider conducted themselves in an open and honest way throughout the inspection.
- The registered manager submitted statutory notifications, in a timely way, for significant events that occurred in the home, such as serious injuries.

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

- The registered manager and staff understood their roles and responsibilities.
- The provider and registered manager monitored the quality of the service to make sure they delivered a high standard of care and to drive improvement.

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

- Feedback from key stakeholders was used to improve the service. People, staff and relatives were asked to share their views of the service via regular communication, meetings, surveys and reviews. One person told us, "They (staff) are always asking for my views to see if I am alright. I suggested a few things about the quality of food, and they listened and have done something about it."
- The provider, manager and staff worked in partnership with other health professionals to achieve positive outcomes for people. People's care records showed involvement and guidance from other agencies such as GPs, dieticians and occupational therapists.