

## Southmead Rest Home

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### Inspection report

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

Southmead Rest Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Southmead Rest Home is registered to accommodate up to 16 people. At the time of our inspection there were 12 older people living in the home. Accommodation for people is arranged over two floors with stair lifts to assist people to get to the upper floor. The home had a well maintained garden that provided a safe, accessible area for people to enjoy.

At the last inspection we rated the service Good. At this inspection we found the evidence continued to support the rating of Good and there was no evidence or information from our inspection and on going monitoring that demonstrated serious risk or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changes since our last inspection.

At this inspection we found the service remained Good.

Why the service is rated Good.

Is the service safe?

People were protected from potential abuse and avoidable harm by staff who were knowledgeable about recognising and reporting different signs of abuse. There were sufficient numbers of appropriately qualified staff available on each shift to ensure people were cared and supported safely. Risks to people were well managed and medicines were stored appropriately and managed effectively. People were protected by the prevention and control of infection. There was a system in place to review and learn from incidents when things went wrong.

Is the service effective?

People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. People had access to a variety of health care professionals who gave care and support to people at the home. Staff received quality training which they found effective and useful. Staff were well supported with a clear system of supervision meetings and annual appraisals. People had access to nutritious, home cooked food that they enjoyed and were given choice in their menu selections.

Is the service caring?

People and relatives told us they found the staff to be kind, caring, friendly and patient. Staff spoke

knowledgeably about people and showed they knew how people preferred to be given their care and support. People were treated with dignity and respect and supported to make their own choices about how they spent their day. People's privacy was respected. Relatives told us they were always made to feel very welcome and enjoyed the calm, cheerful atmosphere at the home.

Is the service responsive?

People received person centred care from a team of staff who knew them and their health needs well. People's needs were re-assessed when their health needs changed and relatives were kept informed and included. Activities formed a key part of people's daily lives which improved their sense of wellbeing. There was a planned programme of varied and interesting activities for people to take part in if they wished. People knew how to complain if they needed to and there was a clear complaints process available.

Is the service well led?

There was an open, honest, friendly culture and people told us they had confidence in the management team and the staff. People and their relatives were consulted and involved in their care and support. There was a programme of quality checks and audits to ensure the quality of the service was maintained.

Further information is in the detailed findings below.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Southmead Rest Home

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection took place on 8 and 9 August 2018 and was unannounced. On both days the inspection team was made up of one CQC Inspector.

Before the inspection we reviewed the information we held about the service. This included information about incidents the provider had notified us of. We also asked the local authority who commission the service and the local safeguarding adults team for their views on the care and service given by the home.

During the inspection we met and spoke with all of the people living at the service and spoke with three visiting relatives. We spoke with the owner, registered manager, the chef and four members of care staff. Because some people living in the home were living with dementia and were not able to tell us about their experiences we used the Short Observational Framework for Inspection (SOFI). SOFI is a specific method of observing care to help us understand the experience of people who could not talk with us.

We observed how people were supported and to establish the quality of care people received we looked in depth at three people's care, treatment and support records and all of the Medicine Administration Records (MARS). We also looked at records relating to the management of the service including staffing rota's, staff recruitment, supervision and training records, premises maintenance records, quality assurance records, staff and resident/relative meeting minutes and a range of the providers policies and procedures.

## Is the service safe?

### Our findings

People told us they felt safe and this was supported by the relatives we spoke with. People freely approached staff and chatted with them in a relaxed and friendly way. When asked if they felt safe living at Southmead Rest Home people replied, "Yes, always" and "Oh yes, I have everything I need."

Staff spoke knowledgeably about identifying potential signs of abuse and there was clear guidance available for staff and visitors to follow if they needed to contact the local safeguarding team.

Risks to people and the service were managed so that people were protected and their wishes supported and respected. People had their health and care needs assessed for areas of risk such as falls, moving and handling, nutrition, and pressure area care. Where risks had been identified for people, records were detailed and gave staff clear guidance on how to ensure people received safe, effective care that was appropriate for their health needs.

People had the correct equipment in place to support and maintain their safety. For example, air mattresses were set at the correct setting for people's weight to maintain their skin integrity and mobility aids were placed within easy reach for people. People who required pressure cushions had these available and they were clean and well maintained.

People had been individually assessed and plans made for their safe evacuation from the premises in an emergency situation such as a fire. The provider had a system in place to ensure the premises were maintained safely. Up to date service and maintenance certificates and records relating to fire, electric, gas, water systems, lifts and hoists were available. A full water system check including legionella testing had been completed, which showed the premises were free from legionella. Legionella is a water borne bacteria that can be harmful to people's health.

There were enough staff employed to meet people's needs. Staff rotas correctly reflected the levels of staff on duty during our inspection visit. Staff told us and we observed during the inspection, that there were enough staff on each shift to manage the needs of the people living at Southmead Rest Home. The registered manager said they reviewed the needs of people on a daily basis to ensure the correct levels of staff were available on each shift.

Recruitment practices were safe and the relevant checks had been completed before staff worked unsupervised at the home. These checks included the use of application forms, an interview, reference checks and criminal record checks. This made sure that people were protected as far as possible from staff who were known to be unsuitable.

Medicines were stored correctly and managed effectively. The stock of medicines recorded in the medicine stock book accurately reflected the stock of medicines held at the home. This showed returned medicines were accounted for accurately. There was a system in place for recording the daily temperature of the medicine room and medicine fridge. Staff were knowledgeable about the correct range of temperatures and

told us the correct action they would take if the temperatures went out of range.

We reviewed the medicine administration records (MARS). These were fully completed with no gaps or omissions in recording. Staff who administered medicines had received up to date medicine training. We observed red 'do not disturb' tabards were worn by staff when they were administering medicines, this is recognised good practice.

Some people required medicine patches for pain relief, these patches are a medicated adhesive patch that are placed directly on people's skin to deliver a specific dose of medicine through the skin into the bloodstream. The provider had a system in place to ensure people were guarded against the risk of skin irritation from patches being routinely placed in the same area.

Staff spoke knowledgeably about the importance of infection control and how to avoid cross contamination. We observed staff wore their personnel protective equipment when it was appropriate to do so.

There was a system in place to record and review any incidents and accidents that took place. Incidents were discussed at team meetings and an open approach taken to learn from incidents to enable pre-emptive action to be taken to reduce the risk of reoccurrence.

## Is the service effective?

### Our findings

People's needs were fully assessed and care plans reflected their current needs. People's care plans were reviewed each month or earlier if their care needs changed. People were involved and consulted in their care. One person told us, "I'm looked after very well, the staff are lovely and I'm never left in the lurch. I call them when I need them and they come quite quickly."

People were cared for by staff who had been effectively trained and received regular supervision and on going refresher training. Staff told us they found the training, "All very good and thorough and well delivered". One member of staff told us, "We are always supported very well and encouraged to raise any problems, they always listen and are very, very flexible to accommodate us so we can work really well together."

In addition to mandatory training such as safeguarding adults, infection control and health and safety, staff told us and records showed they were supported to undertake specialised end of life care training and further dementia training.

The lunchtime meal was relaxed with people and staff chatting with each other. Staff offered people a choice of condiments and drinks to have with their meals. People were supported to the dining tables just before the meal so they weren't sat waiting for a long time before their meal arrived. People were able to eat their meals independently with staff available for gentle support if needed. They explained to the person what they were eating and drinking and supported them at a relaxed pace. People told us they had been having their main meal in the garden at lunchtimes, which had enabled them to enjoy the recent good weather.

People's care records reflected their daily totals of food and fluid eaten and drunk. This ensured staff were aware of how much people had eaten and guard against possible risk of malnutrition and dehydration.

There were systems in place to monitor people's on-going health needs. Records showed a range of professionals were involved in assessing, planning, implementing and evaluating people's care and treatment. Staff told us that the service regularly liaised with a range of health professionals such as, opticians, podiatrists, occupational therapists and GP's to assess and meet peoples' needs, records we reviewed showed this was the case.

The premises had been sympathetically adapted to ensure people living there could mobilise safely and independently around the home. Stair lifts were in place and staff ensured people had their mobility aids close to hand and supported them patiently and gently when walking around the home. Bedrooms were personalised with people's furniture, photographs and personal mementoes which provided a friendly, homely atmosphere.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity



Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Dols had been applied for appropriately and the service was working within the principles of the MCA.

Staff showed a good understanding of people's capacity to consent to their care and support and the choices they could make each day. Staff told us how people were always offered choice and encouraged to be as independent as possible.

## Is the service caring?

### Our findings

There was a relaxed, welcoming and friendly atmosphere at the home. People told us they felt well cared for. One person told us, "They look after us all as best as they can. They are always kind and make sure we have everything we want." Another person said, "It's wonderful, a real home from home." A visiting relative told us, "We were so lucky to find this home. The staff are very accommodating and we don't have to worry at all. The food is 100% and there are so many activities, I can't fault it at all." One member of staff said, "Whatever people need they get, nothing is too much trouble. It's all about them and making them as happy and healthy as possible."

Relatives told us they were always made to feel welcome and free to visit whenever they wanted. One relative said, "All the staff know everyone so well, it's wonderful."

Staff were aware of the importance in respecting people's rights to privacy and dignity. Staff used people's preferred names and staff knocked on people's doors before entering their bedrooms. When people received personal care staff made sure people's bedroom doors were closed. In communal areas staff were discreet when asking people if they needed support.

Staff had a genuine interest in the wellbeing of people. They checked with people how they were feeling and if there was anything they needed. We saw genuine affection between people and the staff. There were lots of smiles and laughter between people and staff.

Staff spoke very fondly of the people they cared for and they said they wanted to be able to provide the best possible care for them. Staff visibly enjoyed working at Southmead Rest Home. One member of staff said, "I just love it working here."

## Is the service responsive?

### Our findings

People and their relatives told us they were kept up to date about important matters that related to people's care and support. Staff were very observant, attentive to people and knew everyone very well. There were handovers at the start and end of each shift where staff discussed with staff coming on duty how each person had been that day. Staff told us they were always kept up to date regarding people's changing care needs.

People's needs were fully assessed and care plans reflected their current needs. The provider used an electronic care plan system that staff found clear and effective. People's care plans were written in a person centred way, gave clear direction and guidance for staff and reflected people's individual preferences and needs. For example, '[person] likes to independently get themselves ready for bed when they wish. They like the light off and the door shut. They like to get in and out of bed as they wish during the night but is reassured that they can ring the bell for help if they need to.' Another care plan included, '[person] likes to go to bed around 6 o'clock. ...and is assisted into bed with two care staff. [person] likes to have two pillows and a tissue under their pillow, the lights off and the door shut.'

Care plans included people's life histories which gave important information about how people had lived their lives and what was important to them. Staff knew about each person as an individual. For example, they knew people's occupations, their family members and friends, what and who was important to them and how they liked to spend their time. One person liked to go to bed very late and the registered manager had accommodated their wishes by re-arranging the staffing rota to enable staff to be available to support the person in the evening time.

The provider had employed a full time member of staff to promote and encourage people to take part in a variety of interesting activities which promoted their health and well being. The activity organiser spoke with passion and enthusiasm for their role. People had been supported to take part in river boat trips, visits to the quay, regular trips out into the community for shopping and visits to parks and gardens which they all enjoyed. There were things for people to pick up and do in the lounges. These ranged from books, rummage boxes, magazines, jigsaws and soft toys. There was a programme of activities each day and staff spent time with people on an individual basis and in groups. Examples of activities included visiting singers or entertainers, pet visits, reminiscence, sing along, residents meetings, arts and crafts, manicures, bingo and quizzes, and card and agility games. If people liked to have a certain magazine or newspaper these were made available to them and staff constantly checked people were happy and had everything they needed.

People and relatives told us they knew how to complain if they needed to. There was guidance available informing people how and who to make a complaint to if required. The provider's complaint policy gave the correct contact details for the local authority and local Government Ombudsman, should people need to contact them in the event of a complaint or concern. The manager told us they had not received any formal complaints since their last inspection and records reflected this.

The provider had been successful in gaining the Gold Standards Framework award (GSF). The Gold

Standards Framework is a nationally recognised independent training programme that provides training to care staff who care and support people at the end of their lives. Staff spoke very positively about the GSF programme and were proud of their achievements in gaining the accreditation.

## Is the service well-led?

### Our findings

The home had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Staff, relatives and people spoke positively about the owner and registered manager. There was a happy, open, supportive culture within the home with a clear management structure. Staff said, "We are a really good team here, everyone is so supportive of one another. The registered manager is always available for any advice and is always there for us whatever we need." A relative told us, "I can't fault it at all. [Person] loves everyone here, there's always so much friendly banter, it's wonderful." Another relative told us, "I'm simply delighted with everything."

Staff told us and records showed there were regular staff meetings and handovers to keep staff fully informed about things at the home. The registered manager told us they were proud of their staff team and how well people living at Southmead Rest Home were cared for by their staff. They said the new activities role had been very well received by all the people. They felt it had been so beneficial for everyone to have the opportunity to take part in interesting meaningful activities to increase their well being and social interaction.

People and relatives told us they were actively encouraged to give their views on the care and service they received from Southmead Rest Home. Records showed a satisfaction questionnaire had been completed before the last inspection and the registered manager told us they were due to send out an updated satisfaction questionnaire this month.

A range of audits to assess the quality of the service were regularly carried out. These audits included medication, infection control, care plans and health and safety checks. The registered manager also completed a system of spot checks which included unannounced night visits. These spot checks had not always been recorded, the registered manager confirmed they would ensure all spot checks would be fully documented following this inspection.

The registered manager spoke knowledgeably about notifications they had made to the Care Quality Commission, which had been completed as per the regulations.

The service had made links with the local community. Staff were preparing for the services annual garden fete and the local church held 'open house' sessions in the communal lounge. Students studying Health and Social Care career pathways from the local college and grammar school regularly volunteered to spend time with people to provide company and additional assistance when required.

The homes last inspection rating was displayed in the home and on the provider's website.