

St. Cecilia's Care Services Limited

St. Cecilia's Nursing 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

St. Cecilia's Nursing Home is a care home providing personal and nursing care to 35 people aged 65 and over at the time of the inspection. The service can support up to 44 people.

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

Due to a misunderstanding on the part of the provider, people living in the service were put at risk because in June 2021 the provider made a decision to move the previously approved Care Quality Commission (CQC) designated setting for COVID-19 positive people into a smaller setting. This smaller setting had previously been inspected by CQC in October 2020 and although it was approved as part of a larger setting, it was not intended to be used as a separate smaller setting. This five bedded setting did not meet the criteria for approval as it did not have sufficient infection prevention and control facilities. We have written to the provider separately about this matter. The five bedded setting is no longer to be used as a designated setting for people who have COVID-19.

Apart from our concerns about the five bedded setting, staff followed government guidance on the use of personal protective equipment (PPE). Equipment and the environment looked clean and hygienic and there had not been an outbreak of COVID-19.

Care plans and risk assessments were in place for people's support needs. These were reviewed regularly and covered people's health conditions.

The registered manager carried out regular checks and analysis of falls and incidents to ensure learning from events was undertaken. This meant risks to people's health and safety from repeated incidents were reduced.

People received their medicines on time and when they needed them. Staff had positive links with healthcare professionals which promoted people's wellbeing.

Staffing levels were consistent, and staff were confident they could meet people's needs. We observed staff being patient, kind and respectful towards people. Care was person-centred and staff had time to chat with people during the day.

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.

There was a registered manager in post: people and staff spoke highly of them.

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

Rating at last inspection

The last rating for this service was good (published 24 October 2018).

Why we inspected

We received concerns in relation to infection prevention and control (IPC) and the designated setting. As a result, we undertook 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.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for St. Cecilia's Nursing Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

St. Cecilia's 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 Care Act 2014.

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

One inspector carried out this inspection.

Service and service type

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

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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. 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 were unable to speak with people who were COVID-19 positive. Instead we looked at recent compliment cards completed by relatives and people who had returned home following their stay in the designated setting. We spoke with six members of staff including the provider's representative, registered manager, deputy manager, one nurse and two care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at three 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.

After the inspection

We spoke with the local authority about the closure of the designated setting.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- Due to a misunderstanding by the provider, staff and people were put at risk of infection. COVID-19 positive people were being admitted into and cared for within a five-bedded unit that was not a CQC approved designated service. The unit had previously been inspected in October 2020 and the lack of appropriate infection prevention and control (IPC) facilities on the unit meant it did not meet CQC's approval criteria.
- There was risk of cross infection between clean areas and the COVID-19 positive unit. Staff working on the COVID-19 positive unit were using the lift to move down to another floor for breaks and use of toilets.
- The cleaning schedules showed that the lift was being cleaned at specific times of the day, but not enough times to indicate it was cleaned after every use by staff.

We have considered the impact of this shortfall, and although there have been no COVID-19 infections in the service, this unit was not approved by CQC and should not have been used. We have written to the provider separately about this matter. If the provider wishes to reopen a designated setting, the service will need to be inspected again, in order for the setting to be approved.

- Apart from our concerns about the five bedded setting, the service followed government guidance on IPC.
- The equipment and environment looked clean and hygienic and staff wore PPE appropriately.

Systems and processes to safeguard people from the risk of abuse

- Staff protected people from the risk of abuse and ill-treatment.
- The provider had policies and processes in place for safeguarding vulnerable adults and staff had received training in this area.

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

- Care plans and risk assessments included guidance for staff about how to manage risks to people's health and safety.
- Staff made appropriate referrals to other healthcare professionals when people's needs changed to make sure people continued to receive safe care and support.
- The registered manager carried out thorough investigations when things went wrong and identified actions to prevent the same incidents from happening again. The provider had policies in place to support this practice.
- The environment and equipment were safe and maintained. Emergency plans were in place to ensure people were protected in the event of a fire.

Staffing and recruitment

- Staff were recruited safely.
- There were enough staff on duty to meet people's needs. We observed that the service was calm, quiet and well organised. People's requests for attention were dealt with quickly and staff were working in an efficient way. One relative commented, "Thank you for your considerable care and kindness to [Name]."

Using medicines safely

- Medicines were safely received, stored, administered and destroyed when they were no longer required. People were encouraged to manage their own medicines where they had those skills.
- Staff told us they received medicine management training and competency checks. One staff said, "I am learning new skills and feel more confident in my role."

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 promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; Working in partnership with others; 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

- In June 2021 the provider did not notify CQC, the local authority or CCG about their decision to admit and care for COVID-19 positive people in an unapproved designated setting. The five-bedded unit being used as a designated setting was inspected by CQC in October 2020 and did not meet the criteria due to a lack of IPC facilities. However, this smaller unit was part of a larger approved unit. The provider had not checked if they could use the smaller unit without it being used in conjunction with the larger 'approved' designated scheme.

Following our inspection of the service we spoke with North Yorkshire County Council and the specialist IPC team. They did a virtual assessment of the five bedded unit, but were unable to offer us sufficient assurances that people could be cared for safely and in a COVID secure environment.

We informed the provider they can no longer use the unapproved designated setting. We have written to them separately about this matter.

- Systems to monitor and assess the quality of the service were in place. Audits were completed and any actions were implemented and used to improve the service.
- The service had a welcoming and family orientated approach to care. Staff morale was high and the atmosphere in the service was warm, happy and supportive.
- Our observations were that people who used the service were treated with respect and in a professional manner.

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

- There was a warm and welcoming atmosphere in the home. Staff treated people with dignity and respected people's individual needs and preferences.
- Managers were a visible presence in the home and there was a clear organisational vision for providing high-quality care.
- The provider had policies in place to promote equality and diversity, which outlined the responsibilities of managers and staff.

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

- The provider involved people, their relatives and staff in the running of the service. Managers regularly communicated with staff through meetings and actively encouraged staff to share their ideas.
- People who used the COVID positive unit and relatives had sent compliments into the service. Comments included, "Thank you for taking care of me, without you things would have been bleak" and "Staff I spoke with were helpful, supportive and [Name] was well looked after."
- There were good links with other healthcare professionals and staff made appropriate referrals to ensure people received the right care and support.