

The Old Rectory Limited

The Old Rectory Nursing Home

Inspection report

Rectory Lane
Capenhurst
Chester
Cheshire
CH1 6HN

Tel: 01513397231

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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

The Old Rectory Nursing Home is a care home providing personal and nursing care. There were 24 people living at the service at the time of the inspection most of whom were older people living with dementia and other age-related conditions. The service can support up to 35 people.

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

There had been significant improvements made to the management and oversight of the service. A new manager had become registered and a new management team had been deployed. Systems introduced to monitor and assess the quality of the service had driven improvement in the quality and safety of the service people received and the accuracy of records. People had benefited from changes to the environment and décor which made the service feel more homely and relaxed.

Staff at the service followed national guidance in relation to infection prevention and control and wore personal protective equipment (PPE) appropriately. The service was clean and hygienic, and people's relatives felt their loved ones were safe.

Staff had completed the required training that the provider considered to be mandatory. The recruitment of staff was safe and there were enough staff on duty to meet people's needs. People received their medicines when they needed them from trained nurses. Risks to people's health and safety had been assessed and mitigated and equipment had been serviced and maintained. Accidents and incidents were recorded and reviewed in order to minimise the risk of reoccurrence.

People's relatives spoke highly of the registered manager and staff team who they described as kind and caring. They told us they felt informed and that staff morale had improved.

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

Rating at last inspection and update

The last rating for this service was requires improvement (19 November 2020) and there were was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced focused inspection of this service on 21 August 2020. At which a continued breach of legal requirement was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve the governance of the service.

We undertook this focused inspection to check they had followed their action plan and to confirm they now

met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain the requirement and area of practice that needed to improve.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to 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 The Old Rectory Nursing Home on our website at www.cqc.org.uk.

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.

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.

The Old Rectory 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.

Inspection team

The inspection was carried out by one inspector.

Service and service type

The Old Rectory 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. A registered manager 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

We gave one hour notice of the inspection because we needed to ensure that we took into account any precautions in place due to the management of the COVID-19 pandemic.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

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 their action plan. We used all this information to plan our inspection.

During the inspection

We reviewed a range of records which included people's care records and medication records. A variety of records relating to the management of the service, including audits, health and safety checks and recruitment records. We spoke with the registered manager, clinical lead, two nurses, a team leader, a carer, the maintenance person, an administrator and four domestic staff.

After the inspection

We spoke with the relatives of three people about their views of the service. We continued to seek assurances from the registered manager who sent us copies of records including staff duty rotas, audit documentation and the dates of staff training and supervision.

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 requires improvement. At this inspection, this key question has improved to good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- Improvements had been made and staff were following national guidance for preventing and controlling the risk of infection. Staff were observed to be wearing PPE appropriately and sanitizing their hands after direct contact with people.
- The premises were clean and hygienic and cleaning schedules were being followed. Relatives and staff told us that the service was cleaner. One relative commented "The cleanliness does seem a lot better. I think they've made a positive change, fresher and cleaner. I do think it has improved from what it was two years ago". Another relative told us "Looks a lot smarter".
- Relatives told us they were screened for symptoms of Covid-19 and provided with PPE when they visited their loved ones. They also told us they needed to complete a rapid result Covid-19 test and have a negative result prior to their visit. One relative commented "How they operate with Covid is spot on".

Staffing and recruitment

- Sufficient numbers of suitably qualified and experienced staff were on duty to meet people's needs. Improvements had been made to the training schedule, which covered more courses, and to the number of staff who had completed this training.
- Staff and people's relatives felt there were enough staff on duty to meet people's needs. One relative told us "There is always someone about popping into people's rooms to check they are ok when I'm there". Another relative told us their loved one needed to be checked "At least once an hour" and told us they had seen the care plan and daily records which confirmed this was happening.
- Recruitment processes were safe.

Using medicines safely

- Improvements had been made to the records relating to the use of 'as required medicines'. Clear guidance as to under what circumstances these medicines could be administered had been introduced for staff to follow.
- Medicines were stored safely and administered on time. Medication administration records had been completed when medicines had been administered.

Assessing risk, safety monitoring and management

- Risk relating to the health and safety of people had been assessed and care plans developed to reduce those risks. One relative told us their loved one was at risk of falls and needed assistance to move. They told us since moving into the service they had not experienced any falls and had a pressure mat in place to alert staff in case they attempted to stand unaided.

- Checks were carried out on equipment and utilities to make sure they were in good working order and safe to use. Equipment had been serviced on a regular basis.

Learning lessons when things go wrong

- Accidents and incidents had been documented and action taken to reduce the risk of reoccurrence.

Systems and processes to safeguard people from the risk of abuse

- There were systems in place to keep people safe. Management and staff had a good understanding of what constituted abuse
- Referrals had been made to the local safeguarding team in line with local protocols when required.

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 as requires inadequate. At this inspection, this key question has improved to good. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

At our last three inspections the provider had not ensured that records were always up to date and accurate or that the quality assurance processes were effectively implemented and drove improvement. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Significant improvements had been made in the management presence and oversight of the service. In response to the outcome of our last inspection, a new manager and management team were deployed with immediate effect and new governance systems were implemented. One relative told us "Things are a lot better, there's more communication. The staff are still the same, but they weren't being led very well before".
- The systems in place to assess the quality and safety of the service people received and drive improvements were effective. A robust schedule of audits had been implemented, sustained and used to drive improvements in the quality of the service.
- Action plans had been formulated and followed to address any shortfalls identified in the records and the quality of the service.
- Staff had access to clear guidance to follow when supporting people. The relative of one person living with dementia commented "I was invited down to talk about my relatives care. They asked me about my relatives likes and dislikes. I saw the care plan and I'm perfectly happy with it".
- People and their relatives had been provided with the opportunity to give their views of the service through various channels. One relative told us, "They (the management team) got in touch when they first started and held a Zoom meeting. They are in touch all the time".

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

- The culture amongst the staff team and within the service was positive. Relatives and staff reported an increase in staff morale and the visibility of management within the service.
- Relative's spoke highly of the caring nature of the management and staff team who they trusted. One

relative commented "You can tell by the whole set up; it is positive. All I can say about the input from the Old Rectory is, it's been first class. They give my relative dignity and opportunity to have a laugh".

- The service made referrals to external health and social care teams when people's needs changed. This helped to mitigate risk and improve outcomes for people. One relative commented "My relative used to get infections all the time but not here, they get much better care here. It's a great weight off my mind".

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 worked closely with relatives and other stakeholders, keeping them informed of any accidents, incidents or changes in people's care needs.
- When incidents had occurred the CQC had been informed as required.