

Sisters of the Cross and Passion CIO

Cross and Passion Convent

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

About the service

The Sisters of Cross and Passion Convent offers residential and nursing care for up to sixteen people. People who live at Sisters of the Cross and Passion Convent are known as, Sister, followed by their religious name. All the Sisters belong to the same religious order. The Convent is situated overlooking Lytham Green and close to community facilities. Communal accommodation is spacious and individual bedrooms are provided with an en-suite facility. There were nine Sisters living at the Convent who were receiving support at the time of our inspection.

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

Sisters were safe and protected from abuse and avoidable harm. The registered manager identified risks, and this was documented to support staff and ensure the safety of the Sisters. Staff followed robust infection prevention and control procedures related to COVID-19 and other infections. Staff were recruited safely and deployed to suit specific needs of Sisters. Medicines were stored and administered as prescribed. The registered manager had systems to learn from incidents to further improve the safety of the service.

Sisters 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. Sisters had access to a range of healthcare professionals and services. Sister's diets and preferences were catered for and they enjoyed a variety of food on offer. Birthdays, feast days and special events were celebrated. The chef said, "I work for the Sisters and always ask if the food is alright. It is like a big family here." The home provided a comfortable and relaxed environment for Sisters and visiting relatives.

Sisters were looked after by kind and caring staff, who were patient in their approach and treated them with dignity and respect. One Sister told us, "I am very grateful to be here." Staff delivered person centred care and tailored their support to Sisters individual needs, promoting their independence.

Sisters received personalised care that was responsive to their needs and preferences. Activities were planned daily and Sisters could choose whether to participate or not. Sisters we spoke with told us they knew how to make a complaint if they had any concerns. Sisters end of life wishes including their preferred place of care were recorded and respected. All the Sisters were able to offer comfort and support through prayer and companionship when a Sister was at end of life and afterwards.

The management team had auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Quality assurance processes ensured Sisters were able to give their views of the service and improvements made when they were identified.

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

Rating at last inspection

This service was registered with us on 01 April 2022 and this is the first inspection.

The last rating for the service at the previous legal entity was good, published on 29 December 2018.

Why we inspected

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

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 found no evidence during this inspection that Sisters were at risk of harm. Please see the safe, effective, caring, responsive 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 Cross and Passion Convent 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Cross and Passion Convent

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

One inspector carried out the inspection.

Service and service type

Cross and Passion Convent 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. Cross and Passion Convent 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

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, Healthwatch and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with two Sisters who lived at the Convent about their experience of the care provided. We spoke with seven members of staff including the registered manager, deputy manager, care workers, housekeeping, handyman and the chef. We had a walk around the Convent to make sure it was homely, suitable and safe. We observed the care and support Sisters received. This helped us understand the experience of Sisters who could not talk with us. We reviewed a range of records. This included two Sister's care records and multiple medication records and we looked at two staff files in relation to recruitment. We looked at a variety of records relating to the management of the service, including policies and procedures.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The registered manager had systems to record, report and analyse any allegations of abuse. Staff had received training to recognise abuse and knew what action to take to keep Sisters safe, including reporting any allegations to external agencies.
- Sisters told us they felt safe living at the Convent. One Sister told us, "Yes, very much so, they are very careful about our safety." A second Sister commented, "Yes, I feel safe living here."

Assessing risk, safety monitoring and management

- The registered manager had assessed and recorded risk to keep Sister's safe. They had reviewed care plans to ensure assessments were up to date and risk assessed included mental health, mobility and any underlying health conditions.
- Each Sister had a personal emergency evacuation plan [PEEP]. A PEEP is a plan for a person who may need assistance, for instance, to evacuate a building or reach a place of safety in the event of an emergency.

Staffing and recruitment

- Systems were in place to ensure staff were recruited safely. A range of checks including references, disclosure and barring checks (DBS) had been requested and obtained prior to new staff commencing work in the service. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager ensured appropriate staffing arrangements were in place to meet the needs of the Sisters in a person-centred and timely way.

Using medicines safely

- Sisters received their medicines safely. Medicines were managed safely and stored securely at the correct temperatures.
- There were systems in place to audit medication practices and clear records were kept showing when medicines had been administered or refused.
- Where Sisters were prescribed medicines they only needed to take occasionally, guidance was in place for nurses to follow. This helped to ensure those medicines were administered in a consistent way.

Preventing and controlling infection

- We were assured the registered manager was preventing visitors from catching and spreading infections.
- We were assured the registered manager was meeting shielding and social distancing rules.

- We were assured the registered manager was using PPE effectively and safely.
- We were assured the registered manager was accessing testing for Sisters using the service and staff.
- We were assured the registered manager was promoting safety through the layout and hygiene practices of the premises. One Sister told us, "Just rub your finger anywhere, you will not find a speck of dust."
- We were assured the registered manager was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

The registered manager supported visits for Sisters in accordance with government guidance. Sisters were able to have relatives stay in separate accommodation within the grounds of the Convent.

The Convent had been awarded a five-star rating following their last inspection by the 'Food Standards Agency'. This graded the service as 'very good' in relation to meeting food safety standards about cleanliness, food preparation and associated recordkeeping.

Learning lessons when things go wrong

- Accidents and incidents were recorded and reviewed by the registered manager to identify any learning which may help to prevent a reoccurrence.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care

- Sister's care needs were fully assessed before they received support. This information was used to develop comprehensive care plans which were reviewed regularly.
- The registered manager sought professional advice when required to achieve the best possible care for the Sisters.
- The registered manager respected Sister's rights to remain as independent as possible for as long as possible and tailored their support to reflect this.
- The registered manager respected Sisters' decision not to consistently follow best practice guidance related to their care and treatment.

Staff support: induction, training, skills and experience

- The registered manager put arrangements in place to ensure staff delivered a high-quality service. Staff told us most mandatory training was computer based but face to face training was being reintroduced. One staff member told us they were looking forward to the first aid training in the onsite training room as they had heard it was very in depth. A second staff member said, "[Deputy manager] is on the ball with the training."
- All new staff completed an induction process when they started working at the Convent. This included shadowing experienced colleagues as part of their new role.
- Sisters felt staff were very able to support them. One Sister commented, "We are very well looked after, and staff are very patient."

Supporting people to eat and drink enough to maintain a balanced diet

- Sisters were supported to have a balanced diet. One Sister told us, "We get more than plenty and lots of choices. The chefs vie with each other to do well." One staff member said, "The Sisters love their food. It's like a Michelin starred restaurant. There is a menu with choices, but they can have what they want. The food is plentiful."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Care plans showed regular contact with health professionals. Sisters were supported to attend hospital and G.P appointments. Specialist advice and guidance was sought as required.
- The registered manager spoke with community-based health professionals regularly. Weekly virtual 'ward rounds' took place weekly to assess if any care and support was required.

Adapting service, design, decoration to meet people's needs

- The Convent was free from obstacles to support Sisters independence.
- The registered manager had allocated rooms to promote infection prevention best practice.
- The registered manager had created infection prevention stations throughout the Convent to increase compliance with infection control measures, reducing the risk of cross contamination.

Ensuring consent to care and treatment in line with law and 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- We found, where restrictions had been placed on Sisters liberty to keep them safe, the registered manager worked with the local authority to seek authorisation to ensure this was lawful and that any conditions of the authorisation were being met.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- It was apparent there was a caring culture embedded at every level of the organisation where Sisters were valued and respected as individuals. One staff member said, "What the Sisters have done in the past for people is now paid forward in the care they receive." A second staff member said, "You can give the Sisters that 100% care here."
- The Sisters told us they were treated with care and respect and our observations supported this. One Sister told us, "They [staff] do their best, they are very thoughtful and very helpful."

Supporting people to express their views and be involved in making decisions about their care;

Respecting and promoting people's privacy, dignity and independence

- Sister's individuality was promoted. One staff member told us, "They [Sisters] don't have a routine. You can't structure the day because they are the structure. It's what they want." A second staff member stated, "Whatever the request, the answer is always yes."
- Sister's views were gathered formally through meetings and questionnaires and informally through day to day conversations. These requests and actions included requests to change the menu, change the crockery and to attend church services out of the local area.
- Sisters received person centred support. We observed staff engage with Sisters with impairments in a manner that promoted their dignity and included them in the daily activities within the Convent.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Sisters received personalised care, which met their current and changing needs. Records were written in a person-centred way with the involvement of the Sister. Care records were regularly reviewed and showed changes were inputted where necessary.
- The registered manager took a flexible approach to meeting Sister's needs and preferences. This included providing one to one bereavement support to sourcing private occupational therapy sessions to promote mobility which combatted social isolation. After their cat passed away, one Sister's mental health benefitted from spending time with a staff member's dog that was a regular visitor.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Staff were seen to adapt their approach depending on who they were supporting. Staff carried picture cards to support Sisters who were hearing impaired. They also had a small portable white board to write on so they could share information in a dignified manner. When necessary, staff entered Sisters reality if they were confused and communicated in a way that provided comfort and reassurance.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The Sisters received support to maintain their spiritual relationships. Due to the pandemic they had the option to watch daily Mass together in the chapel via the internet on a large screen tv or remain in their bedrooms and watch on laptops or computer tablets.
- The Sisters and staff celebrate feast days. These are days when the day is dedicated to a saint and includes a celebratory meal. Staff also mentioned they organised themed meals where they, staff, dress up. One staff member commented on their fancy dress, "It is a laugh and the Sister's enjoy it."
- The Sisters had the opportunity to invite relatives who did not live locally to visit and remain in separate accommodation within the Convent grounds.
- The Sisters had the opportunity to participate in activities. Staff told us Sisters enjoyed several activities but did not always attend preferring to spend time in their rooms. One staff member said, "The Sisters are very independent, but we do a lot of one to one support. Sitting with the Sisters and chatting." We noted there was a hair salon on site and open four times a week plus pamper days. One Sister had received a

package on the day we visited as a result of their internet shopping. As restrictions have been relaxed Sisters were shopping in their local community.

Improving care quality in response to complaints or concerns

- A complaints policy was in place. Sisters and staff expressed confidence that they could raise any issues or concerns the management team and that these would be addressed.

End of life care and support

- End of life and after life care was central to the spiritual wellbeing of the Sisters. The registered manager held comprehensive information on Sisters preferences for their end of life support and religious observances to be completed after they had died. The registered manager shared when a Sister reached end of life, the other Sisters of the convent provided prayers and companionship. One staff member told us, "I am very aware of how to meet someone's end of life support. Here, it's very spiritual, the Sisters complete a vigil. It is a spiritual journey, it's a celebration in death. They get all their prayers and spiritual and mental needs met from the Sisters. It's lovely."

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.

This is the first inspection of this newly registered service. This key question has been rated 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

- Sisters and staff reported a positive culture that was enabling, supportive and helped to ensure that they felt valued. One Sister told us, "They [staff] are very, very patient. I don't think they could be better. They are excellent."

One staff member said, "It is lovely here, great management, I couldn't fault it. The managers will help you, and they listen." A second staff member commented, "This is the best care home I've ever worked in. If I need something doing, it gets done. I don't want to leave here ever."

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 was aware of their responsibilities under the duty of candour, that is, their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm.

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

- The management team were clear about their role and responsibilities. They ensured they were appropriately trained and kept abreast of developments in the health and social care sector. They understood the regulatory requirements of their role and had notified the CQC when required of events and incidents that had occurred at the service.

- Effective and continuous governance was well embedded into the running of the service with a strong framework of accountability to monitor performance and risk leading to the delivery of a high-quality service.

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

- Systems were in place to check the quality of service, to identify potential concerns and areas for improvement. Sisters were able to 'WhatsApp' the registered manager with their questions, views or observations. WhatsApp is a messaging system that uses the internet to send messages, like texting.

- The registered manager managed their workload, so they spent time with the Sisters and in the communal areas of the convent. One Sister told us, "[Registered manager] walks round the convent. She meets with the staff when we are in Mass." A second Sister commented, "She [registered manager] is very generous with her time."

- The registered manager had twice daily handover meetings for staff when shifts changed. This allowed staff to be updated on relevant information related to the care and support requirements of the Sisters.

Continuous learning and improving care

- The registered manager and deputy manager had kept up to date on policies, procedures and best practice guidance and had been responsive in implementing changes to drive improvements and keep the Sisters and staff safe. One staff member told us, "I am glad [registered manager] took over. I have noticed positive changes."

Working in partnership with others

- The management team and staff worked effectively with health and social care professionals to meet Sister's needs.
- Sisters and management supported their local community during the pandemic and continued to do so afterwards. The registered manager told us, "We support local small business such as the butcher, farm and local fruit and veg shop. The Sisters like the local produce."