

Futurewise Properties Limited

St Clare House

Inspection report

Bourne Street
Hull
North Humberside
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Tel: 01482229700

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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

St Clare House is situated in the centre of Hull and is within walking distance of the shops and amenities. The home is registered to provide personal care and accommodation for up to 29 older people, including those living with dementia. Each room is for single occupancy. There are sufficient communal areas, a garden and a car park.

St Clair House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

At our 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 ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

People were safeguarded from harm and abuse; any issues were reported to the relevant authorities to make sure people's rights were protected. Care and treatment was planned and delivered to maintain people's health and safety. Staffing levels and people's dependency were monitored to ensure there were enough staff provided to meet people's needs, in a timely way. Recruitment, medicine management and infection control were robust.

Staff undertook training in a variety of subjects and were provided with supervision and an annual appraisal. This helped to maintain and develop the staff's skills. People's dietary needs were monitored and reviewed, if staff were concerned advice and guidance was sought from health care professionals to maintain people's dietary needs. The service was well-presented, homely and maintained.

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

People were cared for by kind, attentive staff and their privacy and dignity was maintained. Information was provided to people in a format that met their needs. People's diversity was respected and promoted at the service. Confidential information was stored in line with data protection legislation.

People's care and support was monitored and reviewed. Health care professionals were contacted for help and advice and staff acted upon what they said to maintain people's wellbeing. End of life care was provided at the service.

Quality monitoring checks and audits were undertaken, any issues found were acted upon to make sure the service remained a pleasant place for people to live. People, staff and visitors were asked for their views and there was a complaints procedure if required. The management team implemented improvements to

benefit all parties.

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? The service remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good ●

St Clare House

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 was planned to check 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.

The inspection took place on 29 November 2018 and was unannounced. It was undertaken by one inspector and an Expert 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.

We used information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We looked at the notifications we had received and reviewed all the intelligence the Care Quality Commission (CQC) held to help inform us about the level of risk present and make a judgement about this service.

During our inspection, we looked at a variety of records; these included three people's care records, risk assessments and medicine administration records (MARs). We looked at records relating to the management of the service, policies and procedures, maintenance records, quality assurance documentation and complaints information. We also looked at three staff files, which included their training, supervision and appraisal records, as well as recruitment documentation and staff rotas. We spoke with the registered manager, five staff, the chef, five people who lived at the service and four visitors to gain their views.

Some people who used the service were living with dementia and could not tell us about their experiences. We used a number of different methods to help us understand the experiences of people which included the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experiences of people who could not talk with us.

We asked the local authority commissioning and safeguarding team about this service and we contacted Healthwatch a health care consumer champion prior to our visit.

Is the service safe?

Our findings

At the last comprehensive inspection, we found the service was safe and awarded a rating of Good. At this inspection, we found the service continued to be safe.

People we spoke with told us they felt safe living at the service. One person said, "Yes, I am quite safe here. I'm quite happy living here." Another person said, "It's nice living here, I am very safe."

Relatives we spoke with told us, "There are no problems with St Clare House; my relative is very safe here" and "[Names] property is safe here."

The provider had safeguarding and whistleblowing policies in place. Staff undertook training about protecting people from harm and abuse. Potential issues were reported to the local authority and the Care Quality Commission (CQC). This helped to protect people. Staff told us they would report safeguarding issues straight away. A member of staff said, "I would report any issues immediately."

Risks to people's wellbeing were assessed and monitored. For example, the risk of falls, malnutrition or developing pressure damage to skin due to immobility. Records confirmed staff gained help and advice from relevant health care professionals to help to maintain people's wellbeing. People were encouraged to maintain their independence with support from staff, even if there were risks present.

Staffing levels were monitored along with people's dependency needs. The management team made sure there were enough suitable skilled staff deployed in the service. Staffing levels were increased for people's hospital appointments and for social occasions. We observed people's needs were met in a timely way. Safe recruitment practices were in place to ensure people were cared for by staff who were suitable to work in the care industry.

Staff undertook training and supervision about how to maintain safe medicine management. People's medication administration records (MARs) were filled in correctly and their allergies were recorded. This helped to inform visiting health care professionals of any potential hazards. The registered manager undertook medication audits to make sure staff followed the provider's medicine management policy, any issues found were acted upon immediately.

Infection prevention and control measures were robust. Staff were provided with personal protective equipment such as gloves and aprons to help them maintain infection control.

The registered manager and provider monitored all aspects of safety at the service. If incidents occurred, corrective action was taken to prevent any further re-occurrence. Fire safety and maintenance checks of equipment and utilities were undertaken.

Is the service effective?

Our findings

At the last comprehensive inspection, we found the service was effective and awarded a rating of Good. At this inspection, we found the service continued to be effective.

People told us they received effective care and support. One person said, "The staff always have time to help me wash and dress." Another person said, "My needs are met."

People's needs were assessed before they were offered a place at the service. This allowed people to ask questions and undertake a visit to St Clare House. Staff used this information to develop person-centred care records. People were monitored to make sure their needs were met. The providers policies and procedures were available to staff and these were kept up to date to make sure staff had current good practice guidance to use.

Staff undertook regular training in a variety of subjects, for example, fire safety, infection control and dementia care. New staff completed a period of induction supported by senior staff to develop their caring skills. National Vocational Qualifications in care were offered to staff to enhance their skills.

People had their dietary needs assessed and monitored. The chef and staff were aware of people's preferences and needs. People who required prompting or assistance to eat and drink were helped by patient attentive staff. If people were losing weight or had difficulty swallowing, help and advice was sought from relevant health care professionals. People told us, "The food is good" and "The food is very nice you can choose what you have." We observed the lunchtime experience for people and saw there was a calm relaxed atmosphere, everyone ate at their own pace. The Chef spoke with people encouraging them to eat. Staff were attentive and asked people, "Are you alright?" and "Are you enjoying it?"

The registered manager and staff maintained effective communication with the local authority commissioning and safeguarding teams and with people's health care professionals. Staff supported people to attend appointments if their relatives were not able to undertake this role.

We observed staff encouraged people to live their lives and maintain their independence, even if there were risks present. Staff assisted people as necessary. For example, a member of staff observed a person who had forgotten their walking stick; they walked with them to get their stick.

There was level access throughout the service and a lift to the first floor which, promoted people's independence. Pictorial signage was in place to help people find their way round. Bedroom doors had numbers on them and outside some people's rooms, hand painted memory aids were present. For example, a ballet shoe for someone who used to dance and an anchor for a retired fisherman. Reminiscence aids were present in the service, for example there was an old fashioned sweet shop and bakers display. There were secure gardens and patio areas for people to use. The service had a welcoming homely atmosphere.

We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA),

whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. Staff assessed people's mental capacity. If people lacked capacity to consent to their care and make their own decisions, best interest meetings took place with relatives and with relevant health care professionals. This helped to protect people's rights. We observed staff supported people to make their own decisions such as, where to eat and what they wished to do. A member of staff said, "We always give people choices."

Is the service caring?

Our findings

At the last comprehensive inspection, we found the service was caring and awarded a rating of Good. At this inspection, we found the service continued to be caring.

People told us they were cared for; the staff knew them well and they were treated in a kind and caring manner. We received the following comments, "Everyone here is so nice to us. I have been here a long time", "Staff are so cheerful, so kind and caring. I have never seen a grumpy member of staff" and "There is no discrimination at St Clare House, everyone is treated the same."

Relatives confirmed the staff were caring and kind. A relative said, "The staff know who we are. We visit every day. They always make us welcome and offer a coffee when you come through the door. I can leave here happy in the knowledge my parent is being looked after. That gives me peace of mind." Another said, "I have had no stress since my parent has been here, knowing they are well cared for. I give the place 10 out of 10 and would recommend it to anybody."

We saw staff spoke with people who used the service with kindness and compassion. They acted swiftly to support people if they became anxious or unsettled. We observed staff kneeling to gain eye contact with people and they used gentle, appropriate touch to aid good communication which helped to reassure people. We observed people participating in doll therapy (holding a doll or toy to gain emotional comfort) this enhanced people's wellbeing. People were treated as equals and their diversity was respected.

Information was provided to people in a format that met their needs and in line with accessible information legislation. For example, one person spoke Chinese, so staff had written phrases in Chinese and had picture cards to aid effective communication. Family were contactable if staff required further assistance to interpret their needs.

People's preferences, likes and dislikes for their care and support were recorded and staff were aware of this information. Their changing needs were monitored by staff who provided appropriate care and support with the guidance of relevant health care professionals.

People made decisions about their care and were involved in reviewing their care, if they chose to be involved. People's care plans were individualised, detailed and contained information about their life and family histories which helped staff to reminisce with them.

Staff maintained people's privacy and dignity. Personal care was provided to people in bathrooms or in bedrooms behind closed doors. Staff knocked on people's bedroom doors before entering. We saw staff addressed people by their preferred name and friendly banter took place which people enjoyed.

Is the service responsive?

Our findings

At the last comprehensive inspection, we found the service was responsive and awarded a rating of Good. At this inspection, we found the service continued to be responsive.

People told us the staff responded to their needs and got help for them if they were unwell. One person said, "I just tell the staff and they get a doctor straight away." Another person said, "Staff get the doctor out if I am poorly. An optician came out to see me and gave me these new glasses." Relative's told us, "Staff know my relative's needs so well" and "My parent is no longer independent, staff do everything for them."

Staff contacted health care professionals if they were concerned about people's wellbeing and acted upon their advice. A health care professional told us, "The staff follow my guidance and supervision. They ring the office if they have any concerns. The registered manager and staff are knowledgeable and approachable; they are always helpful." People's care records confirmed they saw opticians, dentists, speech and language therapists, GP's district nurses and hospital consultants to maintain their wellbeing.

People had an assessment of their needs undertaken by staff. People asked questions and visited the service with their relatives to see if they felt the home was suitable for them. Staff gathered information from the local authority and discharging hospital to make sure people's needs were known and could be met. All this information was used to create person-centred records. People's, likes, dislikes and preferences for their care and support along with their physical, psychological, emotional and social needs were recorded. This information was understood by the staff who supported them. People's records were updated as their needs changed. Staff were informed about changes in people's needs at the start of each shift to ensure people received the right care.

There was a complaints policy in place. This information was provided to people in a format that met their needs. People told us they would raise a complaint. We found when complaints were received they were investigated and this information was used to enhance the service provided. A relative said, "Any complaints I would put in writing and hand them to the manager. Without a doubt, the manager is fantastic."

End of life care was provided at the service. Staff worked with health care professionals to make sure people had a pain-free and dignified death. The registered manager told us they followed people's wishes for their end of life care. We saw compliments had been received from people's relatives about the care provided to their relations. One read, "We could not get through the last few weeks without you all. You gave our mum so much love and care; you were all amazing. Thank you so much from the bottom of our hearts."

Is the service well-led?

Our findings

At the last responsive inspection, we found the service was well-led and awarded a rating of Good. At this inspection, we found the service continued to be well-led.

The service had a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

People who used the service were satisfied with the care they received. One person said, "I like the owner, they have been here a long time. Another said, "The manager is very good." We received the following comments from relatives, "I know the owner, they always come and say 'Hello'. I think the home is well-run", "I am sure it is well-managed. I have never seen anything here I was not happy about" and "The manager here is fantastic."

The provider had systems in place to make sure staff were supported to deliver good support to people. People who used the service and staff were valued for their diversity and the service was run to make sure people remained satisfied with the service they received.

People's views were sought through informal discussion, resident and relative's meetings and surveys. Feedback received was acted upon, for example, more wall art had been requested and was created to aid people's reminiscence. We saw people gave feedback to the registered manager when speaking with them.

There was an open and transparent culture and a positive ethos at the service. Staff told us they were proud to work at the service and support people who lived there. Staff told us the service was well-led and they felt valued. A member of staff said, "I love it here, the manager is firm but fair."

Staff meetings were held. Staff said they could speak with the registered manager or provider at any time. Minutes of staff meetings were produced for those who could not attend.

Staff undertook activities to benefit people living at the service. For example, we observed a substantial display of gift-wrapped Christmas raffle prizes and hand-made birthday and Christmas cards on sale. These had been made by the Activities Co-Ordinator with all profits going towards the St Clare Residents Social Fund.

A full range of checks and audits were undertaken to monitor the quality of service provided. The registered manager and staff worked with other agencies to ensure people received the care they required.

The management team kept up-to-date with good practice issues and developments in the care sector to follow the current law and legislations. The management team worked positively with the local authority commissioning and safeguarding team and with CQC.

