

# Condover College Limited

# Hall Bank Mews

## Inspection report

1-3 Hall Bank Mews  
Hall Bank, Pontesbury  
Shrewsbury  
Shropshire  
SY5 0RF

Tel: 01743790858

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29 January 2019

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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: Hall bank Mews is a care home that provides accommodation with personal care for up to 10 people. At the time of our inspection, there were 9 people using the service. The home is set out over two floors and split into three different living areas referred to as house one, two and three. Each area has their own dining room and communal area.

People's experience of using this service:

People were well cared for by staff who were kind and caring. Staff knew people well and they promoted person-centred care.

People were given choice about the way their care was delivered and staff encouraged people to be as independent as possible.

Staff were suitably trained and protected people from the risk of harm and abuse. People's specific health conditions were managed well.

People and their relatives were involved in the planning of their care which meant people received care that was individualised.

There was an inclusive culture within the service and people told us that the registered manager was approachable.

The service met the characteristics of Good in all areas; more information is in the full report

Rating at last inspection:

Good (Report published 18 August 2016)

Why we inspected:

This was a planned inspection based on the date and the rating of the last inspection.

Follow up:

We will continue to monitor the service through the information we receive.

## 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** ●

# Hall Bank Mews

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection took place on 29 January and was carried out by two inspectors.

#### Service and service type:

Hall Bank Mews is a care home. People in care homes receive accommodation and nursing or personal care. 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 looked at the information we held about the service. We reviewed the Provider Information Return (PIR). Providers are required to send us key information about their service such as what they do well and any improvements they plan to make. We reviewed notifications about events that had happened at the service, which the provider is required to send to us by law such serious injuries, deaths and safeguardings. This information helps us plan our inspections.

As part of the inspection, we spoke with one person who used the service. We spoke with two relatives, three members of care staff and the registered manager. We observed the support that people received in the communal areas to assess how they were supported by staff.

We looked at one care file and saw records that related to the management of the service such as audits and incident and accident records. We also looked at the way medicines were stored and managed.

# Is the service safe?

## Our findings

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

Good:  People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm and abuse.
- Staff had received safeguarding training and were clear about their responsibilities in relation to identifying and reporting abuse.

Assessing risk, safety monitoring and management

- Risks were managed in a safe way.
- Risk assessments were clear and concise and gave staff guidance to help them reduce the risk of avoidable harm.
- There were protocols provided for staff to enable them to mitigate the risks associated with people's specific health conditions such as epilepsy.

Staffing and recruitment

- There were sufficient numbers of staff to meet people's needs.
- One staff member said, "There is mostly enough staff. We have occasions where staff may ring in sick but these shifts are always covered."
- A relative said, "There are always several staff on-site when we visit and [person's name] always has support when they are out of the building."
- There was a robust recruitment policy in place to prevent unsuitable people working with vulnerable adults.

Using medicines safely

- Medicines were managed safely.
- Controlled drugs were stored and administered in line with the law and best practice guidance.
- There were protocols in place for 'as required' medications and for topical creams and homely remedies.

Preventing and controlling infection

- Staff were observed wearing personal Protective Equipment (PPE).
- There was an infection control policy in place.
- The environment was clean and odour free.

Learning lessons when things go wrong

- The registered manager had a system in place to log and review accidents and incidents.
- When incidents occurred, the registered manager took the appropriate action to address the issues to try and prevent future 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

Good:  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

- People's needs were assessed and reviewed regularly. This meant people received support that met their changing needs.
- A relative said, " We have regular reviews with the registered manager and the keyworker and we discuss all aspects of [person's name] care and their possible activities before the next review. As a result, we able to be closely involved in their care."
- The registered manager had introduced the roles of 'champions' for both staff and people using the service. For example, people had taken on the role of fire safety and hand washing champions and staff were champions of communication. The champion role was to promote and share best practice in their area of interest with others in order to provide the best outcomes for people.

Staff support: induction, training, skills and experience

- Staff received a full induction programme prior to supporting people.
- A staff member said, "The training here is really comprehensive; there is a lot of face-to-face training and some on line training too."
- Staff supervisions were held on a regular basis. This gave staff the opportunity to discuss their learning and development needs and identified areas for future learning.

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

- People were supported to ensure they received a healthy and balanced diet.
- People planned their own menus based on their preferences and nutritional needs.
- People had food 'taster sessions' so that new foods could be introduced and trialled to ensure there was a variation in the menus that people were planning.
- Where people had specific dietary requirements, food was prepared and served in line with people's care plans.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked well with each other and with other professionals to ensure people received effective and timely support.
- Staff were part of a 'handover' that took place before the start of each working shift. This meant that key information could be shared amongst staff to ensure that people received care that was consistent.
- The service promoted the use of key workers. This meant staff were directly responsible for ensuring that people's health and social care needs were met.

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

- The service design and layout met the needs of people using the service. For example, we saw where adaptations had been made to the stairs of one part of the building so that people could mobilise safely on the stairs and maintain their independence.
- People's rooms were personalised with their own items in order to create a feeling of belonging within the home.
- We observed people sitting in a sensory room that had been created with monies obtained through fundraising. The garden area had also been re designed with input from people and their relatives.

Supporting people to live healthier lives, access healthcare services and support

- People had access to healthcare. The service supported people to attend healthcare appointments and medical advice was sought for people as and when required.
- On the day of our inspection, people were receiving support from a visiting physiotherapist.

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 Act 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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Staff told us that they supported people to make decisions for themselves. One staff member said, "We always assume someone has capacity until it is proven otherwise."
- Where people lacked the mental capacity to make decisions for themselves, assessments were in place and we saw evidence where best interest decisions had been made for people in consultation with relatives and other professionals.
- Applications to the Local Authority had been made under DoLS to ensure that where people were being restricted of their liberty, this was done lawfully.

## 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

Good:  People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People we observed express emotions that indicated that they were happy. One person said, "I am so happy" as they were engaging with a member of staff.
- A relative said, "[person's name] response to staff shows us that they are happy and feels safe." Another relative told us, "I am one hundred percent happy with the care that [person's name] receives; the care is just wonderful."
- There was an Equality, Diversity, Human Rights (EDHR) policy in place. The service took into consideration some of the protected characteristics under the Equality Act 2010 such as disability, race and religion where relevant. The registered manager told us that they did not specifically ask people about sexual orientation and preferences but would consider this for people where appropriate in the future.

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

- People were encouraged to be involved in their assessment and care plan reviews. We saw review meeting minutes that evidenced that people were present for this process.
- A relative said, "Twice yearly we have a review and we are all invited, everyone is there."
- People were also encouraged to participate in house meetings to contribute to the way their home was run.
- Where people could not communicate verbally, information was available for people in different formats using pictures and symbols. The service promoted the use of Makaton amongst all staff as a way of communicating with people. There were pictures of Makaton signs around the home, for example, in the kitchen there were signs for drinks and food.
- Staff supported people to express their feelings about situations to try and bring about positive change. For example, one person was supported to rebuild a relationship that had broken down.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect.
- We observed staff speaking to people and asking for their consent before supporting them with care tasks.
- One staff member said, "I treat people as I would expect to be treated myself."
- Staff told us how they respected people's privacy and encouraged people to be as independent as possible. One staff member said, "We close doors when we are supporting people and make sure there are minimal staff in the room." Another staff member said, "We let people do as much as they can for themselves." During the inspection, we observed staff supporting people as they had described to us.

## Is the service responsive?

### Our findings

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

Good: □ People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received care that was person centred to meet individual needs.
- Care plans were detailed and guided staff about how people wanted to be supported in line with their wishes and preferences.
- The provider told us that "Communication is imbedded in all that we do." The registered manager told us how they had worked with the Speech And Language Therapist (SALT) to identify new ways of communicating with people with a sensory loss. During the inspection, we observed a staff member offering objects to a person such as toast and cereal so they could make their breakfast choice by feeling the packaging of the items of food.
- A member of staff told us, "I am in charge of the day opportunities rota; I make sure there is always something for people to do."
- Time was spent with people and their relatives to identify things that were important to people in order to achieve positive outcomes. For example, some of the people using the service had begun to walk dogs as part of their activity programme and a band was invited into the home to entertain people.
- Staff supported people to fulfil their hobbies, interests and ambitions such as going to the zoo, going to a festival and attending a giraffe experience. These were documented in learner profiles and 'dreambooks' that helped identify what was important to people. This practice supported people to have fulfilling lives and to undertake activities that were meaningful to them.

Improving care quality in response to complaints or concerns

- The provider complaints policy was accessible for people and was visible in the entrance to the home.
- The service had not received any formal complaints.
- A relative told us, "I feel confident that I could use the complaints policy and my concerns would be dealt with."
- People were encouraged to use the complaints procedure as necessary and we saw different formats available including pictures of happy and sad faces so people could use these as a guide to express how they were feeling.

End of life care and support

- At the time of our inspection, there was no one receiving end of life care and support.
- People and their relatives had the opportunity to discuss this as part of their care planning but some people had declined to participate in this area of discussion.
- People had been supported to deal with loss and grief as they experienced it.

# 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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- Since the last inspection, there was a new registered manager in post.
- The registered manager had developed systems and strategies to build and improve upon the governance and leadership within the service which as a result improved the person centred culture within Hall Bank Mews.
- This inclusive culture and ethos put people at the centre of the service. There was a sense of belonging in the home and we observed warm and positive interactions between staff and people.
- The registered manager was dedicated to providing high-quality care. They said, "I couldn't be prouder of the staff here and everything we have achieved."
- Relatives we spoke with were consistent in their views about the service. A relative said, "[Registered manager's name] has turned that place around. It was wonderful before but now it is even better. [Registered manager's name] just has a respect for staff and they respond by providing great care; it is just wonderful." Another relative told us, "We have a high level of confidence in the quality of the company at all levels. The registered manager and their team are really good at providing [person's name] with a really enjoyable life."

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

- The registered manager undertook monthly audits to monitor the effectiveness and the safety of the service. They said, "We take actions to address issues when they are identified."
- We saw that the registered manager had responded to a shortfall that was identified during the audit process and had taken the necessary steps to address the issue. This confirmed what the registered manager had told us.
- The registered manger was aware of the requirements of their registration. The ratings of the service were displayed in the home and we had received notifications about events as they happened at the service.

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

- Staff supported people to communicate their needs and wishes and this was recorded in 'learner profiles'.
- People attended house meetings to discuss important matters and share their views about how the service was run.
- Staff had regular team meetings. The registered manager said, "I do a quiz at the end of each meeting on

the topics we have discussed and occasionally other professionals will come to the meetings to talk to staff."

- Staff were supported by the registered manager to enhance their own skills, knowledge and development. Appraisals and one-to-one supervisions gave staff the opportunity to discuss their practice.
- Through sharing good practice initiatives and mentoring, one staff member had been promoted to deputy manager and other members of staff had been put forward for interview for team lead roles.
- One staff member had been nominated and went on to win the Colleague of the Year award 2018. The registered manager stated that this was due to the support that the staff member had given both the people using the service and staff.
- Relatives received annual questionnaires to complete as a mechanism to gain feedback on the service. The questionnaires we viewed demonstrated responses ranging from outstanding in some areas such as promoting expectations and ambitions through to good and satisfactory responses.

#### Continuous learning and improving care

- The registered manager was committed to driving improvement for people using the service. The working practices that had been put in place at Hall Bank Mews were used as an example and shared with the provider's other services at an annual conference to improve and sustain quality across all of the services.
- The registered manager told us that they used the Care Quality Commission (CQC) website to look at elements of outstanding practices and then shared these with staff to strive for an outstanding rating of care.
- The provider had produced a 'guide to outstanding care' to enable the registered manager to demonstrate how their working practices met this rating. The registered manager told us that the guide was in process of being completed but was still in draft form. The registered manager said, "The providers always support me; I am still learning but I am committed."

#### Working in partnership with others

- The service had developed some good community links although one member of staff told us, "We could do better at integrating people into this community more."
- The service had begun working with the local nursery following feedback from a relative expressing that one person enjoyed the company of children. The registered manager said, "It has been great seeing the children engage with the people of Hall Bank Mews; it teaches us all about equality."