

Anchor Hanover Group

# Priors Hall Care Home

## 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

Priors Hall is a residential care home providing the regulated activity of personal care to up to 66 people. The service provides support to older people and people living with dementia. At the time of our inspection there were 41 people using the service.

### People's experience of the service and what we found:

The leadership of the service instilled a person-centred culture where people achieved good outcomes. People, staff and professionals felt the home was well-led. Governance systems were in place to identify risks and drive forward high-quality care to help people to meet their aspirations of greater independence. People and staff took part in regular reviews which led to continual improvements. Staff felt valued and supported by the management team and said this helped them to ensure people felt valued also.

Risks to people's safety were assessed and mitigated. People chose where they wanted to take positive risks to improve their independence. People were supported to take their medicines safely and were empowered to work towards doing this without support. Staff felt confident to recognise and report potential signs of abuse. People were not subject to unlawful restrictions. The home was clean and free from malodours throughout. Staff were safely recruited.

People 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.

Staff received training to enable them to support people effectively. The provider gave staff opportunities to complete enhanced training. The building was laid out in a way which promoted people's privacy and independence but gave opportunities for communal engagement.

Staff were kind and caring. People were supported to direct their own care and choose how they wished to spend their time. Each person had identified their goals and aspirations and staff helped them to work towards these.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The service was registered with us on 3 November 2022 and this is the first inspection.

### Why we inspected

The inspection was prompted in part due to concerns received about medicine management and staffing concerns. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from this concern.

## 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 ●

# Priors Hall Care 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 Health and Social Care Act 2008.

#### Inspection team

This inspection team consisted of 2 inspectors, 1 medicines 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.

#### Service and service type

Priors Hall 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. Priors Hall is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was not a registered manager in post.

#### Notice of inspection

The inspection was unannounced.

#### What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and

improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We reviewed care plans for 12 people. We reviewed 14 Medicine Administration Records (MAR) and records relating to accidents and incidents people had. We spoke with 7 people who used the service and 4 relatives. We spoke with 12 staff including the support manager, district manager, head of care and care staff. We reviewed a range of records that relate to the safety and governance of the service.

# 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 and avoidable harm

- People were protected from harm and abuse as staff received training in safeguarding.
- Staff understood how to recognise and report any concerns to managers and relevant professionals. One member of staff told us, "I would report any suspicion of abuse and neglect, directly to a manager, by both verbal and in written communication".
- Safeguarding incidents had been reported and investigated. Managers reviewed the information and used this to make improvements to the service and to help prevent reoccurrence.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- There was information in people's care plans to guide staff about how to keep people safe from harm.
- People were encouraged to take positive risks safely. This meant their freedom was promoted and they became more independent.
- Personal emergency evacuation plans (PEEPs) were in place with a copy kept in an emergency grab bag at the front of the service. Safety documents relating to fire assessments and checks on equipment were in place. Certificates were in place showing regular testing for the service lift, electric equipment and legionella testing.
- People were protected from the risk of infection as staff were following safe infection prevention and control practices. Staff had personal protective equipment which they used appropriately.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes. The provider carried out the necessary Disclosure and Barring Service (DBS) checks before staff commenced employment. The DBS provides information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to receive their medicines safely.
- People received their medicines including time sensitive medicines as prescribed and on time by suitably trained and competent staff. We looked at 14 electronic medicines administration records (eMARs) and did not see any gaps in administration without a documented reason.
- Care plans were person centred and updated regularly to reflect the needs of the residents. Additionally, there was comprehensive information available for staff to support people with complex medicines.

- Staff carried out the physical monitoring of people's conditions appropriately to ensure that medicines were effective and safe.
- The service worked alongside healthcare professionals to review medicines regularly and ensure they remained suitable and effective for people.
- People were supported to self-administer their medicines and risk assessments were carried to ensure they were safe.

#### Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The provider had systems to gather and review information from accidents, safeguarding incidents, people's feedback, complaints and staff experiences. Managers used the information to understand and learn lessons when things had gone wrong. They had implemented changes which had improved the safety and quality of the service.

#### Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.
- Relatives reported their satisfaction with visiting the service. One relative said, "We can come whenever we like, which helps not being stuck to set times".



# 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 for 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

- People's needs were assessed and care and support was delivered in line with current standards to achieve effective outcomes.
- The provider's pre-assessment of people's needs was comprehensive and gathered information from relatives and relevant professionals. People's protected characteristics under the Equality Act 2010 were considered. This included age, disability, gender reassignment and religion. People's choices, preferences and routines were reflected including individual goals and aspirations.
- People's needs were assessed with evidence-based assessment tools to safely assess their current needs. This included assessment to monitor people's skin integrity and moving and assisting.

Staff support: induction, training, skills and experience

- The provider made sure staff had the skills, knowledge and experience to deliver effective care and support.
- Staff completed training and had their competency assessed regularly.
- All staff completed an induction and did not work unsupervised until they and managers were confident they were ready.
- Staff were offered opportunities and encouraged to complete extra training where it was considered this may support them to meet people's needs and preferences more.

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

- People were supported to eat and drink enough to maintain a balanced diet.
- People chose what, when and where they ate and drank.
- People were referred to the GP, speech and language teams and dietitians where they experienced a change in swallowing or were losing weight.
- People's care plans reflected their prescribed diets and staff recorded when they gave people their food and drink.

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

- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.
- People were supported to live healthier lives, access healthcare services and support.
- There were systems in place to support people to access healthcare support as and when they needed or

wanted this.

- Staff identified when people were unwell and referred them to healthcare professionals promptly.

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

- People's individual needs were met by the adaption, design and decoration of the premises.
- People chose how their living area was decorated with their own belongings.
- People had access to communal areas where they met for activities and socialising. There was a choice of different communal areas, include outside space as well as areas where people could enjoy their privacy. The layout of the premises promoted people's independence.
- People had the equipment they required to assist with their moving and handling, such as wheelchairs, hoists and slings which were regularly checked for safety

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- People's abilities to make their own decisions were assessed and constantly reviewed. People were supported to make decisions in their best interest. Staff respected people's choices, even when they may have thought the decision unwise.
- Where people were subject to DoLS these were adhered to.
- Mental capacity assessments were carried out where applicable. Where people lacked capacity to make specific decisions, this was documented clearly and best interest meetings were held to record decisions about people's care with the least restrictive options. Staff supported people to be as safe as possible, whilst respecting people's wishes.
- People's records included the names of others, including family members, who were involved in decisions relating to care. Records included where a person's family member had a lasting power of attorney (LPA) for decisions relating to health and welfare and/or property and financial affairs to ensure the appropriate people were involved in any decisions.

# 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 for 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

- People were supported by staff who were kind and caring. Staff knew and respected people's diverse characteristics. People were empowered to celebrate their individuality.
- People and relatives told us staff were kind to people. One person said, "[The staff at Priors Hall Care Home] are kind and involve family in everything. They keep bringing us those biscuits too".
- Staff were proud to work with people and strived to support them to achieve their goals. One staff member said, "We have a good team. Staff get to know people and take time with them."

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

- People were supported to express their views and make decisions about their care.
- One person said, "I have total freedom to choose what I do and where I go".
- People and their relatives worked with staff to create their care plans and reviewed these regularly.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted. People were supported to maintain their mobility and make choices about their care. One member of staff told us, "I prioritise proper communication, listen to individual preferences, involve [people] in the decision, and maintain a strong commitment to respecting their privacy. Encouraging independence in daily activities is a key aspect".
- Where guidance for staff was included in people's care plans, these records were written with people, reviewed and signed by people to demonstrate they agreed.
- Staff told us they always maintained people's dignity. For example, when supporting people with their personal care.

# 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 for 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

- People were supported as individuals, in line with their needs and preferences.
- People were involved and directed how they wanted to be supported and what they wanted to achieve from their care.
- Staff understood people's needs and preferences, they knew them well and helped facilitate people to do what they wanted. One person told us how staff would hold up the clothes they wanted to wear each day so they could see them and make their decision.

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.

- The provider was meeting the Accessible Information Standard.
- People's communication needs were understood and supported.
- People were asked how they preferred to receive information and their needs and wishes were respected.

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

- People were supported to maintain relationships, follow their interests and take part in activities that were relevant to them.
- People were encouraged to take part in activities at all times of the day. Staff offered people the option to join in with music sessions, cooking groups, spending time with animals and quiz's.
- One relative told us, "We can take [our relative] out with us for walks and [they] love the choir and dancing things [at Priors Hall Care Home]. [Staff] hold a [religious] service every month.

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- Complaints were reviewed and used as an opportunity for continual improvement.
- Where a complaint had been received these were investigated objectively and any lessons learned were cascaded amongst the staff team.

#### End of life care and support

- People were supported at the end of their life to have a comfortable, dignified and pain free death.
- People had care plans that detailed what is important to the person and their families, taking into account their cultural and religious needs.
- People were supported by staff who had received training and were experienced in providing end of life care. Staff sought support from health professionals to help control people's symptoms and administer medicines as 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.

This is the first inspection for 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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People told us that Priors Hall Care Home was well-led and they achieved good outcomes from the support they received. One relative said, "We can go and talk at the office. [Recently] they called us for a family meeting and care plan review".
- Staff were proud to work there and told us that people were at the heart of the service. One staff member said, "This is a good place to work for. What I enjoy about my job is being able to help our wonderful residents and ensure they life is brighter".
- Managers and senior care workers ensured staff knew and understood people's life histories and guided staff to empathise with the challenges they faced, both current and in the past. This had led to people's being happier, calmer and able to move towards greater independence.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Managers had implemented a system of quality checks. These had identified themes and trends and areas for improvement and actions taken to improve the quality and safety of people's care.
- Managers reviewed incidents, safeguarding and complaints to understand what had happened to prevent recurrence. They took action to improve staff understanding and make changes to improve the quality of people's care.
- Staff received regular supervision and attended staff meetings where they were encouraged to provide their feedback. One member of staff told us, " I can make suggestions or raise an issue. I've had to do both in the past and I was closely listened to".
- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- People and their families provided feedback about the care during reviews. Information was used to improve the service. Staff had implemented suggested changes made in the relative's Feedback.

- The provider had submitted the relevant statutory notifications.

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 provider understood their responsibilities under the duty of candour.
- The duty of candour was met. Managers were open with people, their advocates, professionals and staff when things went wrong and ensured action was taken.

Working in partnership with others

- The provider, managers and staff worked in partnership with others.
- Positive working relationships had been established with other health and social care professionals. This resulted in good care and support possible for people with any issues arising being immediately addressed.