

Care UK Community Partnerships Ltd

The Potteries

Inspection report

187 York Road
Broadstone
Dorset
BH18 8ES

Tel: 03333210929

Date of inspection visit:
06 December 2022
13 December 2022
21 December 2022

Date of publication:
27 March 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

About the service

The Potteries is a care home providing personal and nursing care to 60 people at the time of the inspection. The service can support up to 80 people.

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

Right Support:

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.

The registered manager made a point of being available for people, relatives and staff to speak with. People and staff told us they found the management team, including the registered manager, approachable and supportive.

The provider and the management team at The Potteries listened to what people said about their experience of their or their loved one's care there and what they wanted to happen. They acted on what people said. People were encouraged to make their wishes and preferences known.

Right Care:

People looked comfortable with staff and welcomed their company. They told us they felt safe at the service. Managers and staff understood their responsibilities for safeguarding adults and children.

Staff went about their work calmly and confirmed staffing levels enabled them to provide the care people needed. Staff had the skills required to support people safely and effectively and people had confidence in their abilities. Pre-employment checks helped ensure only suitable staff were recruited or were provided by employment agencies.

People received the care they needed to manage risks safely and in line with their preferences. Medicines were managed safely. The premises and equipment were kept clean and in good order.

Right Culture:

Staff and managers at all levels adopted a caring approach, focusing on people as individuals. This was inherent in the way staff spoke with people and about them.

People had input into planning activities programs and enjoyed the activities provided. There was a member of staff whose role was to foster links with local community organisations

The management team worked openly and constructively with local authority and NHS commissioning and safeguarding teams. Close working with health and social care professionals in relation to people's care was routine.

The registered manager used the provider's quality assurance processes to make sure the home continued to work safely and effectively with people, listening to their wishes and respecting their preferences.

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

Rating at last inspection

The last rating for this service was good (published 20 December 2019).

At our last inspection, in safe and well-led, we recommended the registered manager and provider reviewed how they assessed safe staffing levels, adopted national guidance in relation to 'as necessary' medicines and listening to staff at staff meetings. At this inspection we found the provider had acted on these recommendations and had made improvements.

Why we inspected

We received concerns in relation to call bells, staffing levels and the management of medicines. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe 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 The Potteries 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Potteries

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was undertaken by an inspector, a pharmacist 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

The Potteries 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. The Potteries 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 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 a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and NHS care commissioners. 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 spoke with 6 people who used the service and received feedback from a relative about their experience of the care provided. We spoke with 10 members of staff and 3 agency staff. The staff spoken with included the registered manager, suite managers, care workers and facilities and housekeeping staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included 3 people's care records and multiple room records and medication records. We looked at a staff file in relation to recruitment and staff supervision, staff rotas, training records and a variety of other records relating to the management 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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection we recommended a review of the use of the provider's staff dependency tool at The Potteries. The provider had made improvements to staffing.

- Staff went about their work calmly and confirmed staffing levels enabled them to provide the care people needed. Staffing levels day and night met or exceeded the levels set through the provider's dependency tool, which was reviewed following clinical meetings. A member of staff commented that staffing levels had improved since the inspection in 2019, with agency staff deployed when needed.
- Staff answered call bells promptly and were quick to respond if they noticed someone might need assistance. People told us they sometimes had to wait when they called for assistance. The registered manager routinely monitored call bell response times, investigating any lengthy delays in care. They regularly spoke with people about how quickly their call bells were answered.
- Staff had the skills required to support people safely and effectively and people had confidence in their abilities. A care worker commented, "The training here is marvellous" and said they were prompted to keep their training up to date. Staff had training in key topics, such as moving and handling, when they first started employment for Care UK and at set intervals following this.
- Staff had undertaken training about learning disability and autism, which is a national requirement. The provider had made this training compulsory.
- Pre-employment checks helped ensure only suitable staff were recruited or were provided by employment agencies; a person commented, "They don't just take anyone off the street. They vet them well." Checks included Disclosure and Barring Service (DBS) checks and taking references or checking that employment agencies had done so. (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

At our last inspection we recommended the provider adopts national guidance in relation to PRN (as required) medicines. The provider had made improvements.

- People received their medicines in a safe way.
- When medicines were prescribed on a 'when required' basis, there were protocols to guide staff when doses should be given. Detailed, personalised protocols were in place for most PRN medicines, although a few had not been added to the electronic system or did not have person-specific details recorded. The registered manager was prompt to address this when brought to her attention.

- Staff had been working to improve the way time-specific medicines were managed and an alarm system was in place to help make sure these were given at suitable times.
- There were suitable arrangements for storage, recording and disposal of medicines. This included those needing extra security, and cold storage.
- Staff had updated training in safe medicines handling and had competency checks to make sure they gave medicine safely.
- Medicines audits were completed, and we saw that areas for improvement were identified and actions recorded. Any incidents were reported and investigated to try to prevent a recurrence.

Systems and processes to safeguard people from the risk of abuse

- People looked comfortable with staff and welcomed their company. Everyone we spoke with said they felt safe at The Potteries. A person commented, "I am very safe here" and someone else told us they felt safer at The Potteries than where they had lived previously.
- Managers and staff understood their responsibilities for safeguarding adults and children, having had compulsory initial and update training about this.
- The registered manager and her team remained transparent in identifying and referring safeguarding concerns to the local authority. They worked with the local authority to ensure people's safety.

Assessing risk, safety monitoring and management

- Care plans took account of people's individual risks, which were assessed and reviewed monthly, or in response to changes or incidents. Risks assessed included falls, moving and handling, the use of bed rails, vulnerability to pressure ulcers, malnutrition and risks associated with health conditions.
- Staff were informed about people's risks through the computerised care planning system. Any changes were flagged up at handovers or through staff communication systems.
- People received the care they needed to manage risks safely and in line with their preferences. Staff were alert to changes that could indicate someone was at increased risk, such as changes in their mood or mobility.
- Environmental risks were managed safely. There were up to date risk assessments and management plans in relation to the premises, including fire safety, water safety, gas and electrical safety. Specialist contractors inspected and maintained at appropriate intervals aspects of the premises and equipment such as gas and electrical safety, fire protection measures, passenger lifts and other lifting equipment.
- There were arrangements to ensure people were safe in an emergency, such as a fire or utility failure. People each had a personalised emergency evacuation plan, which was regularly reviewed and kept up to date.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider's approach to visiting aligned with government guidance. At the time of the inspection, people could receive visitors whenever they wished without restriction.

Learning lessons when things go wrong

- Staff reported accidents, incidents and near misses. Managers reviewed each one to ensure everything necessary had been done for people's safety and welfare. This included learning for individual staff or staff teams.
- The registered manager reviewed accidents and incidents monthly to identify any emerging trends. The provider had oversight of accidents and incidents through the registered manager's monthly reporting as well as individual higher risk concerns escalated by the registered manager.
- Where appropriate, the learning from things that went wrong was shared with people and staff and measures put in place to help prevent a re-occurrence.

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.

The rating for this key question has remained good. This means the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

At our last inspection we recommended the provider clarified the purpose of staff meetings and ensured staff were aware of how they can raise issues and contribute ideas. The provider had made improvements.

- Every couple of months there were meetings for all staff, at which they discussed good practice and developments at The Potteries. There were more frequent meetings for some departments, to discuss and plan their work. There were also twice-daily catch-up meetings for all managers.
- There were also meetings for residents, which had become more frequent in recent months, and for relatives. Minutes of these meetings reflected discussion about people's views of the home and improvements they would like to see. Residents often discussed food and activities; a resident had commented, "I've been very surprised at how much is going on. I'm very happy here."
- The provider and registered manager had valued the safety and wellbeing of staff. This included holding regular wellbeing meetings and ensuring staff had access to current wellbeing information and benefits. It also included holding staff appreciation events and providing staff with tokens of appreciation, such as birthday presents and cards, snacks and feel-good treats.
- The provider issued satisfaction surveys for people, relatives and staff. The service had scored highly in these, with the relatives' satisfaction survey for March to August 2022 yielding the top score in the region and ranking within the provider's top 10 nationally. The registered manager acted on concerns or improvements identified.
- The management team worked openly and constructively with local authority and NHS commissioning and safeguarding teams. Close working with health and social care professionals in relation to people's care was routine.

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

- The registered manager made a point of being available for people, relatives and staff to speak with. Staff told us they found the management team, including the registered manager, approachable and supportive. A person who used the service said, "Yes, I know the Manager and she is very approachable."
- The registered manager took complaints and grumbles seriously. A relative told us the management team had addressed their concerns "with good grace".
- Staff at all levels, including the management team, had a caring approach, focusing on people as individuals and providing care accordingly. They got to know people and were well informed about people's

individual needs. The registered manager had received positive feedback about this, including, "The calm management of the home in which residents come first pervades every level and [person] loved their chats with the cleaner, the maintenance person and the person who brought her clean clothes" and "You [staff and managers] operate with such professionalism and order and yet are still so personal, humane and genuinely like a family respecting and really caring for individuals."

- The registered manager, deputy manager and suite (floor) managers spent time daily on each of the three suites, speaking with people, staff and visitors and generally observing what was going on.
- Staff were aware of the provider's whistleblowing procedure. This was well publicised, for example, on staff notice boards.

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 recognised and had when necessary acted on the duty of candour.
- Investigations into accidents, incidents and complaints were open and honest.
- Managers and staff informed people and their families about things that had gone wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Managers and staff understood their roles and responsibilities. The registered manager and staff had regular supervision with their managers to discuss how they felt about their work, any issues or concerns and their training and development needs.
- The registered manager had oversight of the service through a program of audits, the results of satisfaction surveys and monitoring accidents, incidents and concerns, including compliments and complaints.
- The provider had a clear governance structure that provided effective oversight of how The Potteries was performing. This included monitoring the registered manager's quality assurance processes through quality visits, satisfaction surveys and regular reports from the registered manager.
- The service had developed and improved its provision during the challenging conditions of the COVID-19 pandemic. Where areas for improvement were identified, the management team addressed these and shared learning with staff as appropriate. This included changing to a different employment agency following concerns about the performance of agency staff from the agency previously used.
- The Potteries had won the provider's national award for its most improved home in 2022. This was based on performance data including customer feedback, quality ratings, colleague satisfaction and commercial performance. It had also had success in competitions and awards run by external organisations involved in the care sector.
- The service had notified CQC of significant events and incidents, which is a legal requirement. The rating from the previous inspection was displayed on the provider's website.