

Monitoring Summary Record

Painswick Road Care Home Ltd

1-470456880

Location / Core Service address

Saintbridge House Nursing and Residential Home
189 Painswick Road
Abbeydale
Gloucester
GL4 4QQ

CQC continues to develop its approach to monitoring with a focus on safety, access and leadership.

We have reviewed the information and data made available to us about your service on 23/11/2022.

We consider that no further regulatory activity is indicated at this time. We reserve the right to keep this under review and it may be subject to change. Please note this is not an assessment for the purposes of section 46 of the Health and Social Care Act 2008.

This monitoring activity is part of our Monitoring Approach 21/22 and is not an inspection. Monitoring summary records are not inspection reports and are not published on our website. They are an account of our monitoring activity. We do not expect them to be shared publicly to give assurance on the quality of care you deliver.

This summary record outlines what we found as a result of our monitoring activity:

Present at the call was the Registered Manager (RM), the Deputy Manager (DM) and the Nominated Individual (NI- also based at the home.) At the time of the call there were 32 service users living at the home. We received feedback from eight relatives and one healthcare professional who were all very satisfied with the quality of care at the home. People were very happy with the skills, responsiveness, communication and kindness of the staff and management at the home. Thank you for sending in the documentation requested and clarifying where necessary.

We discussed the two recent safeguarding enquiries, and you explained the actions taken to improve practice. The staff involved had received additional support and

supervision. In addition, you had met with all the registered nurses to ensure they were up to date with best practice. We saw that staff are up to date with their safeguarding training.

You told us how risk is managed at the home. At the time of our call an external company was carrying out a Health and Safety audit. We discussed the risk of falls and the actions taken to prevent harm. You talked through the October 2022 falls audit, which showed there had been five falls. You said there were no themes arising from these, and no serious injuries. You sent us the risk assessment and care plan for the service user at risk of choking which detailed the measures needed to keep them safe. You said there were no altercations between service users currently but that in the past you have accessed the behavioural support team. They have recently helped you adapt the ABC charts to make them clearer and they trained the staff in their use.

You said that staffing retention has been good, and the home is fully staffed. Staffing numbers are 7 care workers and 1 Registered Nurse in the day and 3 care workers and 1 Registered Nurse at night. You explained how during the heatwaves in the summer you had employed extra agency staff on duty to help ensure service users had enough drinks to keep hydrated and help to keep them cool. You had created the roles of hostesses who help with breakfast and lunchtime, and this has had a positive impact on the mealtime experience.

You sent us the training matrix which showed the majority of staff are up to date with their mandatory training. You confirmed that any mandatory training that is out of date will be completed before the end of 2022. You also confirmed that for infection control, a face-to-face training day, with 2 sessions during the day has been booked to be completed before the end of the year. A further first aid training update will be booked for the beginning part of 2023.

An electronic care records system is used which is user friendly and time efficient. You said you are considering using an electronic system for medicines in the future. The DM talked through the last medicines audit, where she had identified minor issues only. Both the RM and DM carry out a medicine round each week to keep up to date with medicines in the home and any issues.

You told us there are 3 service users with DoLS and 6 applications are still with the local authority. We discussed the use of CCTV and the NI said there is a clause in the terms of conditions for new service users or their LPOAs to consent to its use. Staff have received training in the MCA and DoLS.

You informed us there are three dignity champions at the home who talk to staff about the expectations required. You meet and talk to service users every day and ask for their feedback. Service users who are able contribute to their care plans and families can also be involved. You said you are planning to more formally involve relatives in the care plan reviews. Families visit frequently and speak to you. Relatives confirmed in their feedback that they are involved.

We discussed the governance and quality monitoring in place. You said that there is an open- door policy and staff appreciate being able to speak to NI as well as the RM

and DM. You explained that you carry out audits at the home, covering a wide range of areas. You said that if there are actions from the audits they are written on the audit. We discussed the advantage of having one overall action plan which you will consider. Additionally, external audits are carried out by managers of other care homes in the group. The results of these are published on the website. You sent us a copy of the last external audit (July 2022), which was very positive. The NI said he attended regular board meetings.

You said that a positive achievement was having a settled team with good staff retention, refurbishment of some areas, with more to come), an increase of activities and working well as a management team of three. Over the next six months you plan for more activities, using the minibus more, introduction of the Care Home Advanced Practitioner role, and increasing the number of student nurses on placement at the home.