

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Tixover House

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We inspected the following standards as part of a routine inspection. This is what we found:

Consent to care and treatment	✓	Met this standard
Care and welfare of people who use services	✓	Met this standard
Meeting nutritional needs	✓	Met this standard
Management of medicines	✓	Met this standard
Supporting workers	✓	Met this standard
Assessing and monitoring the quality of service provision	✓	Met this standard

Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 10 April 2014, observed how people were being cared for and

checked how people were cared for at each stage of their treatment and care. We talked with people who use the service, talked with carers and / or family members and talked with staff.

What people told us and what we found

We considered our inspection findings to answer questions we always ask;

- Is the service safe?
- Is the service effective?
- Is the service caring?
- Is the service responsive?
- Is the service well-led?

This is a summary of what we found-

Is the service safe?

Systems were in place to make sure that managers and staff learned from events such as accidents and incidents, complaints, concerns, whistleblowing and investigations. This reduced the risks to people and helped the service to continually improve.

We saw that the provider had made significant improvements to protect people from the risks associated with receiving care and treatment since our last visit. There had been a significant decrease in pressure sores and an improvement in the management of people at risk of malnutrition.

People were cared for in a clean and hygienic environment. We found that the environment was extremely clean and well maintained.

CQC monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. This means that when people have their liberty deprived in order to keep them safe, this was only done following a best interest assessment carried out by the local authority DoLS team. At the time of our visit there was nobody using the service who required a DoLS authorisation. The majority but not all staff had received training about DoLS.

Only staff who had received the required training had responsibility for managing people's medicines. We saw that safe and proper procedures were in place for the storage, administration and disposal of medicines.

The staff rota was decided by taking people's care needs into account when making decisions about the numbers, qualifications, skills and experience required. This helped to ensure that people's needs were always met. We saw that the use of agency staff was high. Staff reported that this did have a detrimental effect on people who used the service because these staff were less familiar with people's needs and preferences and with day to day routines.

Is the service effective?

People told us that they were happy with the care that had been delivered and their needs had been met. It was clear from our observations and from speaking with staff that they had a good understanding of the people's care and support needs and that they knew

them well. One person told us "I get on really well with staff". Another person said "Staff have a very good attitude and are very helpful"

Staff had received appropriate training to meet the needs of the people living at the home.

Is the service caring?

People were supported by kind and attentive staff. We saw that staff showed patience and gave encouragement when supporting people. People who used the service appeared relaxed and at ease with the staff supporting them. One person told us that staff were flexible and would change routines to suit their preferences.

People's health and care needs were assessed before they moved in. Each person had a care plan in place for each identified need. There was very limited evidence to show that people who used the service had been involved in the care planning and review process. Some care plans and risk assessments had not been reviewed for some time.

People's relatives told us they were always made welcome. One relative had lunch at the home every day.

Is the service responsive?

People had access to activities that were important to them and had been supported to maintain relationships with their friends and relatives.

People completed a range of activities in and outside the service regularly. The home has its own adapted minibuss, which helped to keep people involved with their local community.

People knew how to make a complaint if they were unhappy. People told us that staff would listen to them and take appropriate action.

The registered manager had recently held a meeting for people who used the service, their relatives and for staff. This meeting known as a 'community meeting' provided a forum for communication and obtaining feedback.

Is the service well-led?

Staff had a good understanding of the ethos of the home and quality assurance processes were in place. The registered manager and other members of the management team were approachable and accessible to people who used the service, their relatives and to staff.

The provider's regional manager visited the service at least once a month to carry out audits. These included speaking with people who used the service. People were consulted before changes were made.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.