

Mr & Mrs Chottai

Aquarius Residential Care Home

Inspection summary

CQC carried out an inspection of this care service on 03 January 2018. This is a summary of what we found.

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?	Requires Improvement ●
Is the service well-led?	Good ●

The inspection took place on 03 January 2018. The inspection was unannounced.

Aquarius Residential Care Home is a care home. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Aquarius Residential Care Home provides accommodation with personal care for up to 20 older people. At the time of the inspection, 20 people lived at the home, however one person was in hospital. One person received their care and support in bed. People's nursing needs were met by visiting community nurses.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager had been off work for some time and had handed in their resignation. The provider had employed a new manager who was in the process of applying to CQC to become the registered manager. The new manager was present at the inspection.

The provider of the service had recently changed their legal entity. The change meant that this was

the first inspection for the new provider. However the service had been inspected before. We inspected the home on 22 and 24 November 2016, and rated the service requires improvement overall.

At our previous inspection on 22 and 24 November 2016, we found a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We asked the provider to take action and meet the regulation. We also made recommendations to the provider. We recommended that prescribed thickeners were appropriately stored to ensure people were safe at all times. We recommended that the provider followed good practice guidance in relation to topical medicines records. We recommended that the provider ensured that people's care needs were reviewed when their needs changed. We also recommended that the provider reassessed the systems and processes for monitoring water temperatures in the service.

The provider sent us an action plan on 09 January 2017, the action plan detailed that they had already made some changes and they were supporting staff to attend training and supervision sessions.

At this inspection we found improvements had been made. People and their relatives told us they received safe, effective, caring, responsive and well led care.

The provider followed safe recruitment practice. Essential documentation was in place for all staff employed. Gaps in employment history had been explored to check staff suitability for their role. There were suitable numbers of staff deployed on shift to meet people's assessed needs. It was not clear how the staffing levels were determined in the home. We made a recommendation about this.

Staff had attended training relevant to people's needs and they had received effective supervision from the management team.

Risk assessments were in place to mitigate the risk of harm to people and staff. Medicines had been well-managed.

People were provided with meaningful activities to promote their wellbeing. People accessed their local community their relatives and friends. Plans were in place to improve activities to enable people to access the community with staff support.

People had choices of food at each meal time. People had adequate fluids to keep themselves hydrated.

Staff had a good understanding of the Mental Capacity Act 2005 and supported people to make choices. Deprivation of Liberty Safeguards (DoLS) applications had been made to the local authority by the management team.

Staff knew and understood how to protect people from abuse and harm and keep them safe.

People were supported and helped to maintain their health and to access health services when they needed them.

Maintenance of the premises had been routinely undertaken and records about it were complete. Fire safety tests had been carried out and fire equipment safety-checked.

Staff were cheerful, kind and patient in their approach and had a good rapport with people. The atmosphere in the service was calm and relaxed. Staff treated people with dignity and respect.

People were supported to maintain their relationships with people who mattered to them. Relatives and visitors were welcomed at the service at any reasonable time.

People's care was person centred. Care plans detailed people's important information such as their life history and personal history and what people can do for themselves. People were supported to be as independent as possible. People's care records did not always detail that they had baths and showers as frequently as they had wanted. We made a recommendation about this.

People and their relatives had opportunities to provide feedback about the service they received. Compliments had been received from relatives through the completion of their surveys and through comments left in the provider's comments book.

People and their relatives knew who to talk to if they were unhappy about the service. No complaints had been received. The complaints information was not available to people in different formats or accessible versions to help them understand the information. We made a recommendation about this.

Relatives and staff told us that the service was well run. Staff were positive about the support they received from the management team. They felt they could raise concerns and they would be listened to.

There were quality assurance systems in place. The management team and provider carried out regular checks on the service. Action plans were put in place and completed quickly. Staff told us they felt supported by the management team.

The management team demonstrated that they had a good understanding of their role and responsibilities in relation to notifying CQC about important events such as injuries, safeguarding concerns and deaths.

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