

November 2022

As part of our promise to the people who live here and their loved ones, we continue to work in partnership with families, to support the people who live at St Fillans to enjoy meaningful days and an excellent quality of care, comparable to that which our team would give to their own families.

We feel it would be helpful to summarise our response to the Care Quality Commission's (CQC) latest inspection report, following the inspection undertaken on the 21st, 22nd and 30th September 2022. The CQC report shows the home has been rated as 'Requires Improvement', which is not acceptable by the standards that the Excelcare group expects. The report does not reflect the home as unsafe, and positive aspects of the service have also been reflected throughout.

The objective of this letter is to clearly present the actions we have taken, and continue to take, to improve the quality of care and service delivery at St Fillans Care Home.

The care sector as a whole has faced unprecedented challenges and strong adjustments to working practices through the COVID-19 pandemic. Prior to CQC's visit, Excelcare's Essex Regional Team had conducted an audit of the home which had identified a number of key areas for improvement, which we had been working on together with the St Fillans team and supported by Excelcare's Central Support Office. Our improvement plan remains in place as we continue working to address these areas.

Whilst there are still areas where we need to improve at St Fillans; we wanted to give you the assurances that we are making advances and we will continue to do so until we can demonstrate sustained improvement.

We have in place at the home Anumol Thomas who has submitted her application to CQC to register as the Home Manager of St Fillans. Anumol has the full support of our Regional Team, including myself as Regional Director, the Responsible Individual for Excelcare's Essex Region, and Glenda Barker, one of Quality and Development Managers for the Region. Glenda has supported other care homes through the key improvements needed. The home is also being supported by key teams at our Central Support Office. It is through this support that we are confident that we will see improvements to both services and quality of life for the people who live at St Fillans.

Since the CQC inspection, we have reviewed our action plan to ensure we have addressed all areas highlighted. This plan is updated weekly to evidence progress that has been made. Below is a table of actions CQC requires us to improve on, and how we intend to implement this. Please be assured that we will continue to perform these quality assurance checks throughout in order to ensure each area remains compliant.

Report findings		Actions taken to ensure we improve in this area
<p><i>The Care Quality Commission asked us to ensure that: -</i></p>	<p>We properly assess the risks to people's health and safety.</p>	<p>CQC found no evidence people had been harmed, however failure to properly assess the risks to people's health and safety, placed them at risk of avoidable harm</p>
	<p>CQC found poor infection prevention and control practices relating to the wearing, storage and disposal of personal protective equipment (PPE).</p> <p>The cleanliness of the premises and equipment needed to improve, including the main and satellite kitchens.</p> <p>People's care records contained conflicting information which exposed them to the risk of not receiving safe care. Behaviour support plans did not provide sufficient guidance for staff on how to support people to manage times of distress and anxieties.</p>	<p>We took immediate action to purchase additional clinical bins, provide plastic wipeable boxes to contain PPE, and confirmed a full programme of cleaning had been completed, including a deep clean of kitchens. Guidance was provided to staff, and spot checks are being carried out to ensure the correct use of PPE, including wearing of masks.</p> <p>CQCs follow up visit on the 30th September confirmed actions had been taken to prevent the spread of infection and ensure the premises were clean.</p> <p>The cleanliness of the premises and equipment has been addressed with daily managers walk rounds and Quality and Development managers evidencing walk rounds. Any matters arising from these walk rounds are addressed immediately. A full programme of cleaning has been completed and will be maintained.</p> <p>We have ensured that care records including behavioural support plans provide guidance to the team to manage times of distress and anxieties. All people who are at risk of choking have had their care documentation and risk assessments reviewed to evidence preventative measures or risk reduction plans. This will include a wider view of care planning to ensure person centred information is consistent and linked to other plans and risk assessments. This will be monitored by the manager who will have oversight via internal home's care plan audits and by the regional quality and development team auditing of care plans and associated records for each person based on sampling. Additional equipment to support residents' social well-being has been ordered.</p>

Report findings	Actions taken to ensure we improve these areas
<p><i>The Care Quality Commission asked us to ensure that:-</i></p> <p>Governance systems are used effectively to identify and drive the required improvements</p>	
<p>The governance systems were not always being used effectively to identify and drive the required improvements. The IP&C audit had not identified the issues we found during the inspection. The dementia audit had not identified the issues we found, relating to the complex care unit, Charter. There was no clear direction for staff, and minimal attempts to divert people's behaviours using meaningful activities.</p> <p>People were not always supported to have choice and control of their lives. People's mealtime experience differed depending on which unit they resided. On Dutch and Castle units' people were supported to choose when, where and what they wanted to eat. In St Johns and Charter people were not always offered a choice of meal or drinks. Staff were observed assisting people to eat from a standing position and getting up and down during mealtimes doing other tasks. This did not make the mealtime a sociable experience.</p>	<p>Audits completed by the home manager will be authorised by the Regional Operations Director to allow for greater oversight. All audits completed will be done so with a critical oversight. Actions raised will be addressed in a timely manner.</p> <p>The home manager will continue to attend handovers and daily 11am meetings to check recorded support needs and audit actions are successfully communicated to the team.</p> <p>A revised managers daily walk round document has been implemented with the aim to review one suite/floor per day. In addition, a walk round document has also been implemented for the Regional Quality and Development managers to complete when visiting a home covering all areas including the environment. It is accepted that any actions from these walk rounds are documented on the homes internal action plan</p> <p>A full review of Charter Suite is underway in consultation with Essex County Council and the CCG to ensure the home can support all people living on this suite without the use of 1-1 care. This will allow the home to staff this suite with their own team members at a higher ratio to allow for continuity of care and positive interactions. Once this has been completed a full review of the environment on Charter and Dutch will take place to ensure these spaces are conducive to the needs of the people living there</p> <p>Team members will be allocated to individual residents where mealtime support is required in order to enhance the residents experience. Tables will be served one at a time. Discussion has been held with staff as a reminder to sit down with residents at mealtimes.</p> <p>A choice of cold and hot fluids is available and offered to all residents. A choice of meals provided will be offered to all residents within the home.</p>

Thank you for taking the time to read our letter, and please be assured that we are working hard to ensure that we meet Care Quality Commission requirements and to improve our working practices. We are monitoring our progress carefully, which is audited through regular visits from Senior Managers: our progress will also be monitored by the Care Quality Commission.

Since the CQC inspection we have also had an inspection by Essex County Council who feedback positively with regards to the home, we are currently awaiting their report.

In the meantime, the St Fillans team continue to support people and their loved ones to enjoy a life well lived and make special memories together. We can see the positive impact this has by the wonderful moments of smiles and laughter, which is shared on the home's Facebook page.

Thank you for taking the time to read our letter. We will continue to monitor our progress and we feel confident that our next CQC inspection will have a positive outcome.

If you would like to talk about any of the issues raised or would like to share any views or questions or concerns about the home; please feel free to email me at helen.bennett@excelcareholdings.com.

Yours sincerely

Helen Bennett

Helen Bennett
Regional Operations Director