

Care For Your Life Ltd

Eastholme Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Eastholme Care Home is a residential care home providing personal care and nursing care to up to 31 older people, people with a physical disability and people living with dementia. At the time of our inspection there were 28 people living at the service.

People's experience of the service and what we found:

Staff provided people with safe care which reflected their risks and needs. The home environment was safe and clean and people told us they felt safe living there. People received their medicines as they should; some minor improvements were needed to ensure practices reflected national guidance. Staff had been recruited safely. They had completed the training needed to keep people safe and knew how to protect people from the risk of abuse and avoidable harm. Processes were in place to ensure lessons were learned when things went wrong.

The service was well managed. There was a culture of continuous learning and improvement, which ensured people received high quality, individualised care. Regular checks and audits were completed by management to ensure appropriate standards of quality and safety were maintained. People and relatives were very happy with the care provided and how the service was managed. Staff understood their roles and responsibilities and felt well supported by the registered manager. Community professionals who worked in partnership with the service told us staff knew people well and ensured people received any additional support they needed.

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.

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 the service was Good (published 4 January 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Eastholme Care Home 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.

Eastholme Care Home

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.

Inspection team

The inspection team consisted of 2 inspectors 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

This service 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. Eastholme Care home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We reviewed the information we held about the service, including the last inspection report. We contacted the local authority and Healthwatch for feedback about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 the service, what the service does 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 lived at the service, 5 relatives and 1 community healthcare professional to

gain their feedback about the care and support provided. We spoke with the registered manager, area manager, deputy manager, 5 care staff, 1 member of housekeeping staff and kitchen staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records, including 8 people's care records and a variety of medicines records. We reviewed staff training records and 2 staff recruitment files. We also looked at a variety of records related to the management of the service, including policies and audits.

Following our visits, we spoke on the telephone with 2 staff and contacted 3 community professionals who visited the service regularly for their feedback about the care provided.

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.

Using medicines safely

At our previous inspection we found some improvements were needed to the management of medicines, though there was no breach of regulation. At this inspection we found improvements had been made.

Some further minor improvements were needed to ensure processes reflected National Institute of Health and Care Excellence (NICE) guidance. For example, temperature recording for the medicines room and fridge needed to be improved and handwritten medicines administration records (MARs) had not always been signed by 2 staff to ensure they were accurate. The registered manager assured us the necessary improvements would be made.

- Staff had completed medicines training and their competence to administer people's medicines safely had been assessed.
- People told us they received support with their medicines as and when they should.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm. People felt safe living at the home and relatives told us staff provided safe care. One person commented, "I feel safe all the time and everything they do is to make me feel comfortable."
- Safeguarding incidents were managed effectively. Concerns were investigated and reported to the local authority and CQC when appropriate. Staff had completed safeguarding training and understood the action to take if they suspected abuse was taking place.

Assessing risk, safety monitoring and management

- Staff supported people in a way which reflected their needs and risks and helped them to stay safe. Risks to people's health and wellbeing were assessed and documentation was in place to guide staff about how to support people safely.
- The provider ensured the home environment was kept safe and any risks were managed appropriately.
- Everyone we spoke with told us staff provided safe care and support. One person commented, "I've not seen any accidents or near misses because there is a good awareness of health and safety."

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff available to meet people's needs and keep them safe.
- People and relatives told us staff were available when they needed them. One person told us, "Yes, there are enough staff. I never have to wait."

- The provider recruited staff safely. Appropriate checks were completed before staff started working at the service to ensure they were suitable to support people living there.

Preventing and controlling infection

- Staff followed safe infection prevention and control (IPC) practices to protect people from the risk of infection.
- The service was clean, and we observed staff demonstrating safe IPC practices during our visits. Staff had completed infection prevention and control (IPC) training.
- People and relatives told us the service was always clean and staff wore appropriate personal protective equipment (PPE) when providing support. One person commented, "I have showers regularly and have a nice clean room and bed."

Learning lessons when things go wrong

- The provider had processes to ensure lessons were learned and shared with staff when things went wrong or improvements were needed. For example, when concerns were raised by a visiting professional about the lack of detail in a person's care plan, the registered manager introduced further audits and additional staff training was arranged.

Is consent to care and treatment always sought in line with legislation and guidance?

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS).

- The provider was working in line with the Mental Capacity Act. People's capacity to make decisions about their care had been assessed and best interests decisions had been made in consultation with their family members or representatives.
- When people needed to be deprived of their liberty to keep them safe, the registered manager had applied to the local authority for authorisation.

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.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The culture at the service focused on providing people with high quality, individualised care which resulted in a good quality of life. One person told us, "Would I recommend this place? Yes, indeed. I am calmer and more energised since being here, which is a credit to all the staff." A staff member told us, "Staff treat people with respect, as if they were family. It's the culture of the home."
- People and relatives were very happy with the management of the service and the care and support provided. They told us, "The staff are soldiers of care and every single one of them gives 100% plus all the time" and "They treat everyone as special."
- Community professionals told us staff knew people very well and were able to identify quickly when people's needs changed. They referred people for specialist support when they needed it and followed any advice or guidance given.

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 provider had a duty of candour policy and understood their responsibilities under the duty of candour.
- Incidents were investigated appropriately, notified to CQC and the local authority and discussed with people and relatives in line with the policy.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had clear processes to ensure the quality of care provided at the service was monitored and to drive improvements. Audits and checks were completed regularly to ensure appropriate standards of quality and safety were maintained. This meant the provider had effective oversight of the service and any improvements that were needed.
- Staff understood their responsibility to provide high quality care. Staff roles were made clear during induction, training, competence assessments, staff meetings, supervision and annual appraisals. One staff member told us, "Staff here care for people as human beings. Person-centred care is important here, making people feel their best."
- Notifications were submitted to CQC when appropriate. A notification is information providers are required to send to CQC by law.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and relatives were involved in the development and improvement of the service. Their feedback was sought regularly through meetings, questionnaires and conversations, with full consideration for their equality characteristics. For example, where people were unable to give verbal feedback about their care, an understanding of their experiences was gained through other means, such as observing their body language and speaking with their family members.
- Regular staff meetings took place and staff told us they could make suggestions or raise concerns. They found the registered manager very approachable and supportive. One staff member commented, "Management are really good. They're really accommodating and supportive. I could speak with [registered manager] and I know it would be kept confidential."

Continuous learning and improving care

- There was a culture of continuous learning and improving care at the service, which helped to ensure people received high quality care from skilled staff. Learning from incidents was shared with staff and any poor staff practice was addressed appropriately.
- Staff had completed the training necessary to support people well. Their competence to support people safely, for example with moving or administering their medicines, had been assessed.
- The registered manager stayed up to date with good practice in a variety of way, including local forums, Government notifications and CQC and NICE guidance and updates.

Working in partnership with others

- The provider worked in partnership with others. We saw evidence of staff and the provider working closely with community health and social care agencies, to ensure people received any additional support they needed.
- Feedback received from all the community professionals we contacted was very positive. They told us people were well cared for. They found management proactive and keen to receive advice, to improve people's care.