

Malhotra Care Homes Limited

Heatherfield 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

Heatherfield Care Home provides accommodation, nursing and personal care to a maximum of 74 people. At the time of the inspection 67 people were receiving support across 3 separate units, specialising in nursing care, younger people and dementia care.

People's experience of using this service and what we found

Action had been taken since our last inspection to improve. There was a system in place to manage medicines. Records showed that medicines had been administered as prescribed. There were sufficient staff deployed to meet people's needs. Staffing levels had increased. The registered manager had identified that more staff were required due to unexpected behaviours.

Accidents and incidents were monitored to help identify if there were any trends or themes so action could be taken to reduce the risk of any reoccurrence. One health and social care professional told us, "I am always kept well informed of any safeguarding concerns, any concerns raised by family members and the manager always has a plan in place to reduce risk."

People spoke positively about the staff and living at the home. One person told us, "I would sum it up as excellent, there are no problems at all. To me it's wonderful, the staff are good, there are no problems with the staff, they treat you well." The provider sent us case studies to show how being at the home, with the support of staff, had led to an improvement in people's health, independence, mobility and wellbeing. This was also confirmed by the people we spoke with. Positive feedback was received from health and social care professionals about the staff and people's care and support. One health and social care professional told us, "They know about their patients, they invest in them and want the best for people."

An effective quality monitoring system was now in place. Checks were carried out to monitor all aspects of the service. Action was taken if any shortfalls were identified. There was a new registered manager in place. People, relatives and health and social care professionals spoke positively about her and the improvements she had made. We heard how she encouraged and promoted a culture of learning amongst staff.

A communication system was in place. Staff explained that handovers had improved, and staff meetings were carried out. Several relatives and health and social care professionals explained that more effective communication would be appreciated.

Staff worked in partnership with other health and social care professionals to help ensure people's needs were met. One health and social care professional told us, "They promote positive outcomes for people in relation to taking the residents out in the community...The staff are always pleasant and welcoming and seem to know the residents well."

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 this service was requires improvement (published 9 April 2022) and there were breaches of the regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of the regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions of safe and well-led which contain those requirements. For those key questions not inspected, we used the ratings awarded at the last comprehensive inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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

Heatherfield 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 Care Act 2014.

Inspection team

The inspection was carried out by two 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

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

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used all of this information to plan our inspection.

A provider information return was completed at the time of the inspection. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with 11 relatives, 1 visitor, 10 people and 17 staff including the nominated individual, director of care, head of compliance, registered manager, deputy manager, nurse, team leaders, senior care staff, care staff, maintenance operative, housekeeper and activities coordinator. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also received feedback from 12 health and social care professionals.

We reviewed a range of records. This included people's care records, medicines records and information relating to staff recruitment. A variety of records relating to the management of the service, including policies and procedures were also examined. We also reviewed evidence and information which the provider sent us electronically following our feedback.

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 this key question has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; learning lessons when things go wrong;

At our last inspection an effective system to assess, monitor and manage risk was not fully in place. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Risks were assessed, monitored and managed. Accidents and incidents were monitored to help identify if there were any trends or themes so action could be taken to reduce the risk of any reoccurrence. Staff had identified people who were at high risk of falls and implemented appropriate measures such as hydrotherapy, physiotherapy and one to one support to reduce the risk as much as possible.
- The provider sent us case studies to demonstrate how specific risks were managed which helped promote people's health and wellbeing. For example, one person had a complex medical condition. A hospital passport and risk assessment had been developed for when the person accessed the local community to ensure immediate action could be taken in the event of an emergency.

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 when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Systems and processes to safeguard people from the risk of abuse

At our last inspection we found that the provider's safeguarding system was not always operated effectively. Records did not always evidence what actions had been taken to ensure people were safe. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of

regulation 17.

- A safeguarding system was in place. Safeguarding concerns had been correctly reported to the necessary agencies. Staff had received safeguarding training and understood their responsibilities to report any concerns.

Preventing and controlling infection

At our last inspection, records did not always evidence that staff followed government guidance in relation to COVID-19 testing. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service. We signposted
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- There were no restrictions on visiting. Policies and procedure were in place to ensure that visiting was carried out safely.

Using medicines safely

At our last inspection, records relating to medicines were not always completed accurately. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- There was a system in place to manage medicines. Records showed that medicines had been administered as prescribed.

Staffing and recruitment

- There were sufficient staff deployed to meet people's needs.
- Staffing levels had increased. The registered manager had identified that more staff were required due to unexpected behaviours.
- Safe recruitment procedures were followed.

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 requires improvement. At this inspection, this key question has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care

At our last inspection an effective quality monitoring system was not fully in place. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. In addition, a system to ensure notifiable events and incidents at the home were reported to CQC was not fully in place. This was a breach of Regulation 18 (Notification of other incidents) of the Care Quality Commission (Registration) Regulations 2009. Enough improvement had been made at this inspection and the provider was no longer in breach of these regulations.

- An effective quality monitoring system was in place. Checks were carried out to monitor all aspects of the service. Action was taken if any shortfalls were identified. Staff explained that the registered manager was visible around the home. One staff member told us, "She walks up and down the corridors checking everything."
- Notifications of events at the home were sent to CQC in line with legal requirements.
- The registered manager encouraged and promoted a culture of learning amongst staff. The deputy manager was undertaking a Level 7 dementia course and the home was also going to be involved in a catering training pilot.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; working in partnership with others

At our last inspection an effective communication system was not fully in place. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- A communication system was in place. Staff explained that handovers had improved and staff meetings were carried out. Several relatives and health and social care professionals explained that more effective communication would be appreciated.
- Staff spoke positively about working at the home and the changes which had been made following the commencement of the new registered manager. One staff member told us, "She is very good - you'll see lots of improvements." The registered manager in turn explained how the improvements would not have been

possible without the great team of staff she had.

- People spoke positively about living at the home. One person told us, "They have given me my life back." Another person explained how happy they had been at being able to move into the home with their cat and the "freedom" that being at Heatherfield Care Home had given them.
- The provider sent us case studies to show how being at the home, with the support of staff, had led to an improvement in people's health, independence, mobility and wellbeing. This was also confirmed by the people we spoke with..
- Staff worked in partnership with other health and social care professionals to help ensure people's needs were met. One health professional provided feedback to the nominated individual following a successful admission to the home from hospital. They stated, "The exceptional knowledge and skilled care of [registered manager] and the team was above and beyond and I believe should be acknowledged." Another health professional acknowledged the positive effect which being at Heatherfield Care Home had upon people's mental health.

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

- Records were available to demonstrate how the provider had followed the duty of candour.