

Meridian Healthcare Limited

# Hyde Nursing Home

## Inspection report

Grange Road South  
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Hyde  
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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 12 October 2015. At that time we found there was one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the provider did not ensure there were always sufficient numbers of staff available to meet people's needs.

After the comprehensive inspection, the provider wrote to us to say what action they would take to meet legal requirements in relation to the breach. We undertook a focused inspection on the 23 March 2016 to check that they had followed their plan and to confirm that they now met the legal requirements.

During this inspection we found some improvements had been made to staffing with regards to the recruitment of ancillary staff, such as kitchen assistants and domestic staff. These new staff were in place to relieve care staff during the busy lunchtime periods. Additionally, recruitment to permanent care and nursing staff was on-going to remove the need for agency workers.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Hyde Nursing Home' on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Hyde Nursing Home is a purpose built care home and is registered to provide accommodation for people who require nursing and personal care. There are 60 bedrooms and the home is divided into three units; Godley Court and Newton Court provide nursing care for up to 35 people in total. Werneth Court is a unit providing nursing care for up to 25 people living with dementia. Godley and Werneth Courts are split over two floors, each with upstairs and downstairs areas. Each unit has a lounge, dining area and individual, en-suite bedrooms.

At the time of our inspection there were 51 people living at Hyde Nursing Home.

The home's registered manager had worked in the role since October 2015. 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 and associated Regulations about how the service is run.

The registered manager told us that they had recruited new care and nursing staff and still had 130 hours care staff vacancies to recruit to. This meant that the home was using fewer agency staff but this did not equate to a net increase in care and nursing staff levels on the three units. However, fewer agency and more permanent staff meant that carers were able to get to know people and their care and support needs.

People told us that staff were very friendly and one person told us that they did not feel that they had to wait

too long for assistance. However, another person told us that they often had to wait for assistance. We saw that staff were kind and caring whilst providing support.

Handover notes lacked information or were incomplete leading to insufficient information exchange between staff during staff changeover times.

We have made one recommendation for the registered manager to ensure handover notes are improved around information and legibility.

At our focused inspection on 23 March 2016, we found that a number of changes had been made and our observations on the day showed that the lunchtime experience overall for people who live at Hyde Nursing Home, had improved from the previous inspection.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

**Requires Improvement** ●

We found that there had been improvements in the lunchtime experience on the units that we observed.

Staff were kind and caring when providing support and assistance.

New kitchen assistants and domestic staff had been recruited.

Handover notes did not contain comprehensive information and some notes were illegible.

We found that the provider had taken action to recruit new staff but overall staffing levels remained the same.

Our rating for safe will be reviewed at our next comprehensive inspection.

# Hyde Nursing Home

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Hyde Nursing Home on 23 March 2016. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 12 October 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service safe? This is because the service was not meeting legal requirements in relation to that question.

The inspection was carried out by three adult social care inspectors and was unannounced.

Before we visited the home, we checked information we held about the service including the provider's action plan, contract monitoring reports from the local authority and notifications sent to us by the provider. Statutory notifications are information the provider is legally required to send us about significant events that happen within the service.

As part of the inspection process we observed how staff interacted and supported people at lunchtime and throughout our visit in various areas of the home. We spoke with four people who lived at Hyde Nursing home, the registered manager, the operations director, the assistant operations director, the cook, two kitchen assistants, two nurses and six care staff.

During the inspection we reviewed a variety of documents, including five people's individual care records, daily handover sheets, staff recruitment files, four weekly staff rotas and the dependency tool used by the home to calculate staffing levels.

# Is the service safe?

## Our findings

During our inspection of Hyde Nursing Home in October 2015 we found that the provider did not ensure there were always sufficient numbers of staff available to meet people's needs. This was a breach of Regulation 18 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in relation to staffing.

Hyde Nursing Home was required to send us an action plan to address the identified breach. They told us they would increase care staff levels on Newton unit and increase ancillary staff throughout the home to enable care staff to spend more time supporting people. In addition, the home told us they would be recruiting permanent nursing and care staff to lessen the use of agency workers.

During this inspection the inspectors observed the lunchtime experience; one inspector on each of the three units. Our observations upstairs on both the Godley unit and Werneth unit, found that people were being supported and encouraged to eat their meals, and staff were helping people who required full assistance. We found that people were spoken to appropriately with kind encouragement and people were given sufficient time to eat their meals. We observed positive and caring interactions between people and care staff. We checked a number of people's care plans and saw that they were being assisted to eat their meals in the way that had been specified in the care plan. This meant that people in these two areas received the required care and support during this lunchtime period and it was a positive experience for people.

We also observed care and support given at lunchtime downstairs on the Werneth unit. People were in their bedrooms, the lounge area and dining room eating their meals. There were two care staff covering this part of the unit during this time, and one registered nurse was responsible for the whole unit (upstairs and downstairs). We found that the lunchtime experience for people on this unit was busier than on the other two units and one person was very agitated and required attention from staff.

The registered manager told us that they had recruited more kitchen assistants to help provide cover during lunchtimes so that care staff could concentrate on providing full assistance to people. The role of the kitchen assistants was to provide cover to Werneth and Godley units, and their tasks included laying tables, plating up food and washing dishes. This was one of actions that Hyde Nursing Home told us they had put in place in response to our findings during our last inspection in October 2015 where we found there were not enough staff to assist people at mealtimes.

During this inspection, we spoke to staff about the introduction of new kitchen assistants to help with lunchtimes. We received a mixture of responses when we asked if this assistance had improved the level of care and support for people. One member of staff told us, "There's no help on Werneth at tea time", and another staff member told us that mealtimes are challenging, but this has improved now that they have kitchen assistants.

We saw that the activity co-ordinator also assisted at lunchtime on Werneth unit and we observed one kitchen assistant help to serve food on this unit. However, during the three separate lunchtime observations

by the inspectors, we did not see assistance provided by the kitchen assistants in all areas. For example, the inspector making observations upstairs on Godley unit saw one kitchen assistant deliver gravy to the unit but did not see any other additional assistance given. However, the people having lunch were served their lunch or assisted in a timely way to eat their meal.

We spoke to the cook and two kitchen assistants who told us that one assistant covered both floors of Werneth unit for an hour at lunchtime and another assistant covered both floors of Godley unit for an hour at lunchtime. We asked the cook and both kitchen assistants to tell us the kitchen staffing arrangements for the day of the inspection. We found that the two kitchen assistants each provided assistance to the two floors of Werneth and Godley; however, we found that in addition they also covered another separate unit attached to the home. Grange View is a 40 bed NHS intermediate care unit that is housed within Hyde Nursing Home and shares the kitchen and kitchen staff. The kitchen staff told us that they delivered food to Grange View and heat-probed it on arrival at the unit. This meant that two kitchen assistants were providing lunchtime support to four dining areas within Hyde Nursing Home and also supplying meals to Grange View.

As part of our focused inspection, we followed up on the home's action plan addressing sufficient care and nursing cover for the dependency levels of people living at Hyde Nursing home. We spoke with the registered manager and assistant operations director about how dependency levels were calculated to ensure that there were sufficient numbers of staff to care for the people living at the home.

The registered manager and area manager told us they used an electronic dependency tool to calculate staff numbers required to cover each unit. Although the home assessed the dependency levels of people and scored them accordingly, this dependency tool used a simple ratio to determine actual staffing levels on each unit. The registered manager told us that they monitored dependency levels on a daily basis and increased staffing levels accordingly if required. For example, if someone was particularly poorly they would provide additional staff cover.

We looked at the home's recent rotas to review staffing levels and found that the home made use of agency staff on a regular basis. The rotas we inspected showed that the majority of nursing staff were from an agency. Additionally, we found on the day of our inspection on Newton unit, that all three staff were from an agency and only one staff member had previously worked at Hyde Nursing home. This meant that non-permanent staff may not get to know the regular support needs of people who live there. However, the registered manager told us that they do attempt to block book agency staff to try to ensure the same agency staff are used. One person told us that there have been quite a few changes in staff and this does not go down well with older people. They told us, "You get used to the same ones and they get to know you". One staff member we spoke with told us that it can be hard on shift if someone is on sick leave, but the management do arrange cover, they told us, "However, if it's an agency nurse, it's difficult".

The registered manager also told us that they were currently actively trying to recruit new permanent care staff and, at the time of our inspection, had 130 hours of care vacancies to recruit to. We saw efforts had been made by the home to attract staff and ensure successful recruitment. Additionally, as per the national trend, the home had a shortage of permanent registered nursing staff. However, they were waiting for the required documentation for two new nurses who were due to start imminently. When we asked about improvements to staffing levels, one staff member told us, "It's getting better, much more permanent staff; using less agency".

Documents we reviewed showed us that the home had recruited new laundry staff, domestic staff and a new housekeeper. We saw that domestic staff were visible on the units and were providing assistance when

required, for example, we saw someone spill a drink on the floor of the dining room and a nearby cleaner was able to safely clean this up promptly. Care staff told us that domestic staff often helped out on the units and we observed one cleaner was setting tables for teatime downstairs on Godley unit. This meant that the increase in ancillary staff was visible on the units and ensured a timely response when required.

We looked at a number of documents during our inspection, including daily staff handover notes for each of the three units within Hyde Nursing home. The daily notes are used by care and nursing staff to ensure that accurate information is shared between the day and night shifts. We reviewed these documents and found that they were incomplete, difficult to read or lacked information. We found that on one shift the only details recorded were "settled", in the majority of the day records and all the night records were blank. This meant that staff would not be able to form an effective overview of the current needs of people for whom they would be providing care that day or night. Insufficient and incorrect information may lead to a person not receiving the correct care and support required.

We recommend that the registered manager ensure that handover notes contain pertinent and legible information to ensure effective information exchange between staff shifts. Staff need to be fully updated and aware of the current care and support needs of each person for whom they will be caring for each shift.