Akari Care Limited

Edgeley House Care Home

Inspection report

Edgeley Road
Whitchurch
Shropshire
SY13 4NH

Tel: 01948662832

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Ratings

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?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service:
Edgeley House is a care home in its own grounds registered to provide nursing and personal care for up to 60 people. It is located in the north Shropshire town of Whitchurch.

People's experience of using this service:
People told us the registered manager and staff were kind, friendly and caring and they felt safe.
There had been a change of registered manager since we last inspected. People were positive about the way the registered manager ran the home and the changes they had made.

People were safe and protected from abuse because staff assessed and managed risk. People were supported by staff who had been recruited safely, appropriately trained and supported. There were enough staff to support people and they had the skills, knowledge and experience needed to provide good care. People received their medicines as they needed. The home was clean and maintained and staff practised good infection control. The home and equipment had been maintained.

Staff supported people to eat healthy nutritious food and drink sufficient fluids and knew their likes and needs. They helped people to attend healthcare appointments to assist their health and wellbeing. The design of the home met people's needs. There were dementia friendly signs and equipment to help with orientation, daily living and socialisation. People were helped to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff assessed people's capacity to make decisions and supported them with decision making.

People were supported in a considerate and caring way and treated with dignity and respect. They received care that met their diverse needs and preferences. Staff involved people in planning their care and encouraged them to make choices.

Care was personalised and met people's needs and preferences. People followed activities they enjoyed. They were supported to air any concerns and the registered manager took action on these. Staff understood the importance of supporting people to have a comfortable, pain free and peaceful end of life. Their end of life wishes were recorded so staff were fully aware of these.

The registered manager, provided good leadership and motivated the staff team. People said they were asked for their views and these were taken into account. They were praising of the registered manager and staff team. The management team used a variety of methods to check the quality of the service and develop good practice. They worked in partnership with other organisations to make sure they followed good practice and people in their care were safe.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection:
At the last inspection the service was rated good (published 25 August 2016).

Why we inspected:
This was a planned inspection based on the rating at the last inspection.

Follow up:
We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. We may inspect sooner if any issues or concerns are identified.

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 effective?

Good

The service was effective.

Details are in our Safe findings below.

Is the service caring?

Good

The service was caring.

Details are in our Safe findings below.

Is the service responsive?

Good

The service was responsive.

Details are in our Safe findings below.

Is the service well-led?

Good

The service was well-led.

Details are in our Safe findings below.

Edgeley House 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. This inspection was planned to check 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
This inspection was carried out by an inspector, assistant inspector 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
Edgeley House 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:
The inspection was unannounced on day one and announced on day two.

What we did
Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports. We also sought feedback from partner agencies and health and social care professionals.□

We used the information the provider sent us in the provider information return. 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection, we spoke with seven people who lived at Edgeley House care home and five relatives. Where people had limited verbal communication, we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We spoke with seven members of staff including the registered manager, deputy manager, care and administrative staff, cook and regional manager.

To gather information, we looked at a variety of records. This included medicine records and three people's care records. We looked at information in relation to recruitment, staff training and supervision records. We also looked at other information related to the management of the service including audits, surveys and meeting minutes. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements. We walked around the building to check the home was clean, hygienic and a safe place for people to live and checked maintenance certificates.

Good

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

● Staff assessed and managed risk to ensure people were safe. People told us they felt safe. One person said, "They keep me safe, even from myself when I get upset. They are the best." A relative said, "We are so relieved [family member] is safe and cared for in here. The place is excellent as is the care and staff."

● Risk assessments provided guidance to staff. They understood where people required support to reduce the risk of avoidable harm.

● Staff supported people who had behaviour that challenged with skill and compassion. This helped reduce incidents and encouraged people to be involved in meaningful interactions. A relative told us, "The staff are always there and very attentive, know [Family member] and her behaviours and are able to ensure she stays calm and safe." Another relative told us, "Staff are very good at spotting and diffusing pressure points and they know what sparks people's behaviour and they manage it very well.

● The provider had procedures for staff to follow should there be an emergency and staff understood these.

Using medicines safely

● Medicines were generally managed safely and in line with good practice guidance. On day one of the inspection, we discussed improvements to information where people had covert medicines. This had been addressed by the following morning.

● The registered manager made sure regular medicines audits were carried out, and actions taken to address any issues.

● Staff told us they received medicines training and had regular checks to ensure they had the skills and knowledge to give medicines safely.

Systems and processes to safeguard people from the risk of abuse

● People were protected from the risk of abuse and avoidable harm. People said they felt safe and liked the staff. One person said, "The staff are just fab. They do look after us well."

● The provider had safeguarding systems and staff were aware of their responsibility to report any concerns. Staff had received training and understood what to do to make sure people were protected from harm or abuse.

Staffing and recruitment

● There were sufficient, suitably recruited staff to meet people's needs. The provider followed safe systems for recruitment of staff and carried out checks before new staff were employed. This reduced the risk of appointing somebody unsuitable.

● We saw there had been changes in the staff team and registered manager since the last inspection. Staff

told us care and teamwork had improved with the guidance of the registered manager.
● People told us there were enough staff to meet people's care and social needs without rushing them. One person told us, "They [staff] let me take my time and wait to give me a hand." A staff member told us, "We have the time to encourage people to do for themselves with us here to help."

Preventing and controlling infection
● Staff followed infection control practices to reduce the risk of infection. They used disposable gloves and aprons when they supported people with personal care. This helped reduce the risks of cross infection.
● Staff had received infection control training which gave them the skills and knowledge to help protect people from the risk of infection.

Learning lessons when things go wrong
● Staff learnt from situations that did not go as well as they should. The management team reviewed accidents and incidents, so lessons could be learnt, and the risk of similar incidents reduced.
● The management team were aware of their responsibility to report any concerns to the relevant external agencies.

Good

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's outcomes were consistently good and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law
- Staff carried out thorough assessments that focused on the person, so they received the care and support they needed. These involved the person and their representatives.
- Staff reviewed and updated care plan records with people when changes occurred, so they identified people's current needs.
- Staff applied learning effectively in line with best practice. This assisted them to provide care that met people's needs.

Supporting people to eat and drink enough to maintain a balanced diet
- People received a choice of food and drink to help them maintain a balanced diet. People told us they liked the food. One person told us, "We get to choose what we want to eat." A relative said, "I am very impressed with the quality of the food here and the snacks particularly the fruit platter – which people enjoy, the yoghurts and the milkshakes which always have fruit in as well."
- Staff assessed people's dietary needs and provided nutritional support and guidance. A relative commented, "Puddings are fortified as are the milkshakes which are always available. Staff monitor food and fluid intake closely." Staff told us, "How do you expect elderly frail individuals to thrive and to heal after a fall if their nutrition isn't good?"
- Staff had received training in food safety, were aware of and supported people in safe food handling practices. We saw they supported people respectfully and effectively at mealtimes.

Supporting people to live healthier lives, access healthcare services and support and staff working with other agencies to provide consistent, effective, timely care
- People were supported to access health and social care professionals promptly to help support their health needs. A relative said, "The staff are very thorough. They don't wait, action is always taken to make sure residents are comfortable."
- The staff team worked closely with health and social care professionals, provided relevant information and followed advice to ensure people's needs were met.
- Staff helped people to live healthy lives, including by good healthcare, eating healthy food and doing gentle exercise. This helped to ensure people's health needs were met.

Adapting service, design, decoration to meet people's needs
- The design of the home met people's needs. The building was homely and comfortable and there were safe and secure garden areas, so people could go outside as they wanted.
- The environment was dementia friendly with specialised equipment, personalised bedroom doors and

signs to assist people with finding their way about. The registered manager had created an indoor bus stop, a café and a pub in the home. They also planned to develop a sensory area to provide further interest and stimulation for people.

Staff support: induction, training, skills and experience
● People received good quality care because staff had received induction and training relevant to their role and updated their skills and knowledge.
● The management team provided support and supervision to staff to help them provide effective and up to date care. Staff told us they were approachable and available for advice. All staff spoken with said they received very good support from the registered manager.

Ensuring consent to care and treatment in line with law 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 Act 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 Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

● People's rights were respected. The staff team provided care that was following the MCA. Staff made applications to deprive people of their liberty appropriately and any conditions on authorisations were met.

Good

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff respected people's rights and differences. We saw people were relaxed and comfortable in the company of staff. A relative told us, "Staff reassure [family member] and she settles and seems to trust them. I am impressed and touched by care and kindness given."
- Staff knew people's individual likes and dislikes and supported and responded to people's diverse needs. People told us they liked the staff who looked after them. One relative told us, "The care here and staff are excellent they are all so very kind to everyone and undertake their duties with real care and attention." Another relative said, "Staff are very quick to respond to people's needs, I think they are so responsive because they know the residents well and can anticipate their behaviour, so they do prevent a lot of issues."
- People's preferences and the support needed to maintain their individuality, diversity and independence were recorded in their care plans and helped staff to deliver the right support.

Supporting people to express their views and be involved in making decisions about their care

- Staff encouraged people to express their views and opinions and supported people to make choices and decisions. They were involved in planning how their care was given. Where people had limited communication, or chose to include them, their families or representatives were also involved in decision making. A relative told us, "We visit frequently but they still contact us if there is any change in [family member's] condition or behaviour and we appreciate this. We trust them absolutely with [family member's] care and well-being. It is very reassuring that their communication is so effective."
- People could contact independent advocacy services if they wanted guidance and support, or for an advocate to act on their behalf. This meant people could have an independent person to assist them in decisions.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful of people's privacy, dignity and independence. They were supportive and sensitive to people's needs. We saw one person started to undress in the lounge. Staff promptly and calmly managed this, supporting them sensitively and maintaining their dignity.
- Staff were sensitive and respectful when talking about the people they supported. People's care records were kept securely and their confidentiality respected.

Good

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

At the last inspection this key question was rated as requires improvement. At this inspection it had improved to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

● At the last inspection care plans had not always been personalised. On this inspection care plans had been updated so they were personalised and reflected each person's abilities, needs and wishes. This provided guidance about people's needs and choices and how these were best met.

From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their carers.

● The registered manager was aware of the accessible information standard. This ensured people with a disability or sensory loss were given information in a way they could understand. Care plans identified in detail each person's communication abilities and difficulties. Staff knew each person's way of communicating and understood their non-verbal gestures and expressions.

● Staff encouraged people to communicate their choices and decisions and supported them to have as much control and independence as possible. One person said, "I can more or less do what I want, I just tell [staff] and they help if I need it."

● People said there were regular activities including dominoes and board games in the home's pub, afternoon teas in the home's café, art and crafts and gardening. The local nursery children visited regularly to spend time with residents which all looked forward to. There were frequent visits from PAT dogs, small zoo animals and a PAT Shetland pony. The Shetlands pony visited during our inspection. People were delighted to see it and responded enthusiastically to its presence. The registered manager had received a donation of a giant tablet with several apps aimed at people living with dementia. We saw people really enjoyed using this and even people who usually sat without being involved with other people joined in with it.

Improving care quality in response to complaints or concerns

● People we spoke with felt safe expressing any concerns. Complaints information was available for people and their representatives. They said they would discuss with the registered manager or staff if they were not happy or had issues. They were confident any concerns would be dealt with quickly and any changes needed would be made. No complaints had been received since the previous inspection. One person said, "It is great, and I have no complaints."

● We saw staff were guided in managing complaints. They told us they used issues, complaints or concerns as a learning opportunity to improve the service.

End of life care and support

● People could stay in the home supported by staff they knew when heading towards the end of life. People's end of life wishes were recorded so staff knew how to meet these.

● Staff understood the importance of supporting people to have a comfortable, pain free and peaceful end of life and provided thoughtful and sensitive care. They also supported the person's family, other residents and each other. A relative whose family member was heading towards the end of life told us, "We are very happy with the care provided and don't want them to go anywhere else. It is perfect here and we are totally happy with everything."

Good

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 the last inspection this key question was rated as good. At this inspection this key question 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.

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

● The service was well-led. The registered manager who had been in post around a year, provided good leadership and motivated the staff team. One person told us, "She has done loads of good things to make it better here. We have more things to do now." A relative told us, "The manager has really turned things around here in a good way. [Family member] came in here 18 months ago and I wasn't impressed. It is completely different now. She has really improved things for everyone. She has a lovely kind caring manner and is a great leader by example."
● The service was organised and there was a clear staffing structure and lines of responsibility and accountability. The management team had an effective system of monitoring and carried out frequent checks on the quality of the service.
● The management team followed current and relevant legislation along with best practice guidelines. They understood legal obligations, including conditions of CQC registration and those of other organisations.
● Ratings from the previous CQC inspection were displayed in the entrance of the home.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on duty of candour responsibility
● The management team were open and transparent and put people at the centre of the service. People told us they were easy to talk with and available when they wanted to talk.
● The registered manager was aware of and met her responsibilities regarding the duty of candour. She had notified us of any significant incidents as required. This showed the registered manager had been open and honest when incidents happened.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics
● The registered manager involved people and their representatives in their care and any changes in the home. They used a range of methods to seek people's views, taking account of people's preferred ways of communicating.
● They listened and responded to the views of those involved with the home. People told us they made time to talk with them, welcomed feedback about the way the home was run and took action in response to any comments or concerns. One relative said, "[The registered manager] interacts with everyone and has made a real difference to all of our lives. It's awful as a relative if you are worrying all the time about their care and

we most certainly are not worried."
● Staff told us the registered manager had an open door and listened to any suggestions or concerns. They said they had regular team meetings and other opportunities to share ideas and comments about care. A staff member said, "The manager is excellent and has made many improvements. Everyone works as a team with the focus on giving good care. Nothing is too much trouble for anyone at all."

Continuous learning and improving care
● The registered manager focused on frequently reviewing and improving the service. They reviewed accidents and incidents to see if lessons could be learnt and shared these with senior management and the staff team.
● The management team had systems to check people were getting good care and the home was run well. They acted on any findings from audits to help them further improve care.
● The management team were referencing current legislation, standards and evidence-based guidance to achieve effective outcomes.

Working in partnership with others
● The management team maintained good working relationships with partner agencies. This included working with commissioners and health and social care professionals.
● Staff, under the guidance of the registered manager, worked in partnership with other organisations to make sure they followed current practice and provided safe care.