

Uplands Care Centre Limited Uplands

Inspection report

27-31 Cobham Road Westcliff On Sea Essex SS0 8EG Date of inspection visit: 02 November 2021

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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

Uplands Care Centre Limited is a rehabilitation and nursing home that provides personal care to up to 23 people in one adapted building. There were 14 people receiving support at the time of our inspection.

People's experience of using this service and what we found People and relatives were positive about their experiences at the service.

Care and treatment were planned and delivered in a way that was intended to ensure people's safety and welfare. People were cared for safely by staff who had been recruited and employed after appropriate checks had been completed. Staff had received appropriate training. There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. Medication was dispensed by staff who had received training to do so.

The registered manager had put systems in place to monitor and provide good care and these were reviewed on a regular basis.

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 good (published 21 December 2018). At this inspection the service has improved to good.

Why we inspected Following the change of management at the service we had received a number of anonymous concerns about the management of the service. This inspection was in part to follow up on those concerns.

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 Uplands Care Centre Limited on our website at www.cqc.org.uk.

Follow up We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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
Is the service well-led? The service was well-led.	Good ●



Uplands 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team The service was inspected by one inspector

Service and service type

Uplands Care Centre Limited 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.

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 This 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 the information the provider sent us in the provider information return and updates they provided. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and three relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, physiotherapist and care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

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 the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. One person said, "Everything is brilliant here, much better that another place I stayed at." Another person said, "It is all very good here, no complaints."
- Staff knew how to keep people safe and how to raise concerns and externally through 'whistle blowing' to the local authority or CQC.
- •The registered manager was aware of their responsibility to raise safeguarding concerns to the local authority and would work in partnership with them to keep people safe.

Assessing risk, safety monitoring and management

- Risks assessments were in place to identify specific support needs people might need. Risk assessments identified if people were at risk of falls, pressure sores, malnutrition and choking and what staff could do to lessen these risks.
- The registered manager and provider employed a maintenance person to complete the general day to day maintenance at the service. There were regular audits of the environment to identify any issues that needed addressing.
- Regular maintenance checks were completed to ensure equipment was safe to use.
- A fire risk assessment had been completed for the service and each person had a personal fire evacuation plan. There were named fire wardens to facilitate an evacuation, and emergency telephone numbers were easily accessible.

Staffing and recruitment

- The registered manager told us they had been successful with recruiting new staff to the service. In the interim they had used regular agency staff who knew the service well.
- People told us that staff always answered their call bells when they used them. One person said, "When I press the call bell the staff come and if they are busy they assess if I can wait for a bit or if I say it is urgent they will see to me straightaway."
- There was an effective recruitment process in place. The registered manager checked staff recruited were suitable for the role they were employed for.

Using medicines safely

- People were supported to take their medicines safely.
- Staff had been trained to support people with their medicines and had their competency checked.
- Medicine records we reviewed were in good order. There were suitable systems in place for the storage, ordering, administering, monitoring and disposal of medicines.

• Regular audits were completed to check medicines were being managed safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

• The registered manager had systems in place to monitor complaints, accidents, incidents and safeguarding. They did an analysis of information and shared lessons learned with staff during meetings, daily handovers and supervisions.

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 the same. 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; 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

- There has been a new registered manager appointed at the service. They have been working with the provider to review the service and introduce changes they feel are appropriate for the running of the service.
- The registered manager told us they are keen for the service to continue running as a rehabilitation service delivering good care for people.
- The registered manager was clear about their role and how they are responsible for meeting regulatory requirements. They were also clear on their responsibility to act under duty of candour.

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

- People we spoke with were very complimentary of the staff and felt well supported at the service. One person told us, "The care is very good." Another person said, "The physio is brilliant, and the nurses and care staff nothing is too much for them. I am very impressed with all of the staff."
- The registered manager told us they had worked with specific staff members to appoint them as champions in certain areas such as infection control and safeguarding. This meant if a member of staff was a champion in that area they shared learning and gave staff guidance to improve practice.
- Staff we spoke with were positive about their roles and their focus was to provide good outcomes for people.

Continuous learning and improving care; Working in partnership with others

- The registered manager had systems in place to audit all aspects of the service and was keeping these audits under constant review to ensure they were fit for purpose and improved outcomes for people.
- Audits of care plans were very detailed and used as a learning opportunity to improve practice and had clear outcome expectations and timeframes for actions.
- Since being in post the registered manager had reviewed training and supported staff to engage in development opportunities by providing additional training courses. For example, two staff had been enrolled onto a leadership course and another member of staff told us they were also starting a management course in the new year.
- The service worked in partnership with other health professionals such as the GP to provide good outcomes for people.

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

- Care plans demonstrated that peoples equality characteristics were considered. The registered manager had recently completed a course on equality and diversity and was promoting this at the service.
- Care was frequently discussed and reviewed with people and their feedback obtained on their care and support needs.

• People and their relatives were also asked to complete feedback and survey's at the end of their stay at the service for the registered manager to review.