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Normanton Retirement Home

Inspection report

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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

Normanton is a service that supports older people who may be living with dementia or mental health needs. It provides accommodation with personal care for up to 29 people. There were 29 people living at the home on the day of our inspection.

Rating at last inspection

At the last inspection, in June 2015, the service was rated Good. At this inspection we found the service remained Good.

Why the service is rated Good.

People continued to receive support which protected them from harm and abuse. Staff supported people in a safe way, monitored risks to their safety and were available when people needed help. People's medicines were managed and stored in a safe way, and they had their medicines without delay.

Staff skills were enhanced through training and meetings where their views were listened to. Staff were encouraged to develop their skills and take on additional responsibilities in the home. Some of the staff had worked there for many years providing people with a continuity of care.

People received care that was kind and compassionate. Care was personalised to the individual and delivered by staff that were respectful, trained, well supported and managed. This ensured people received an excellent caring service.

Relationships with families and friends were cherished and well established. This meant people were able to maintain and develop their bonds with people important to them. Friends and families also built relationships with other people living in the home.

Staff had been praised by relatives about the support they and their loved ones had received during the emotional time at the end of their loved one's life. People received care and support that was individual to them. Their support needs were kept under review and staff responded when there were changes in these needs.

People had opportunities to give feedback and make complaints about the care and support they received. They also had opportunities to make suggestions for improvements at the home and these were listened to.

People lived in a home where they felt confident to convey their feelings and opinions and felt comfortable to speak with staff and managers about concerns and issues that affected them. The provider had systems in place that continued to be effective in assessing and monitoring the quality of the service provided.

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Good ●

The service remains good.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Good ●

The service remains good.

Normanton Retirement 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 checked 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.

This was a comprehensive inspection, which took place on 26 July 2017 and was unannounced. The inspection team consisted of one 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 services for older people.

The home is required to have a registered manager in post. 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 2008 and associated Regulations about how the service is run. The registered manager demonstrated they were forward thinking and very person orientated.

Before our inspection we reviewed information held about the service. We looked at our own system to see if we had received any concerns or compliments about the home. We analysed information on any statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

Before the inspection visit, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This information helped us to focus our inspection.

We contacted representatives from the local authority and Healthwatch for their views about the home. We used this information to help us plan our inspection of the home.

We spoke with six people who lived at the home and six relatives. We also met and spoke with four staff and the registered manager. We viewed three people's care records and one person's medicine records. We also viewed other records relating to the management of the home.

We also 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.

Is the service safe?

Our findings

At our last inspection 'Safe' was rated 'Good'. At this inspection people who lived at Normanton Retirement Home continued to receive safe care.

People continued to be protected from abuse and harm. Everyone we spoke with told us they felt safe living at Normanton and with the amount of staff that supported them. One person said, "There are enough staff because there is always plenty of them around." Another said, "I feel safe; there is always somebody on duty." Staff had received training in how to keep people safe and protect them from abuse and discrimination. They understood how to report concerns and who to contact to ensure people remained safe. The registered manager understood their responsibilities in reporting and dealing with concerns. They would follow the local authority safeguarding procedures and notify CQC as required.

Risks to people continued to be managed in a way that protected them and kept them safe from injury. The support people needed was provided in a discreet way that enabled them to live their lives safely and maintain their independence. Care plans were in place to ensure people were protected from risk both within the home and when out in the community. Staff were aware of risks associated with people's care and knew the support they needed to help keep them safe.

People were supported safely and their needs met by enough staff. People told us there were always staff around to help them when they needed it. A relative explained why they thought their loved one was safe; "(Person) doesn't want to leave. They have never tried to escape from here even when they were mobile. When they were in their own home, they would leave and get lost. Then they moved to my house and they tried to leave my house. (Person) has never done that here, even with the door open. They have loved it here."

Many staff who worked in the home were long serving. Staff we spoke with confirmed the provider had requested their previous employers to provide references for them. They also stated they had not been allowed to start work until criminal checks on their background had been completed to ensure they were suitable to work with people who lived at the home. These checks are called disclosure and barring service checks.

People's medicines continued to be managed safely. People said that staff gave them their medicines at the same time each day. Staff said they checked each person's medicines with their individual records before administering them and records were completed correctly. Staff told us they were not allowed to administer people's medicine's until they had received the training they needed to do this safely, and their competency had been checked.

Is the service effective?

Our findings

At our last inspection 'Effective' was rated 'Good'. At this inspection people who lived at Normanton Retirement Home continued to receive effective care.

A relative explained, "(Person) has had episodes of being confused. The staff have arranged for her to be seen by a mental health nurse. (Person) has seen the doctor a couple of times. They have been wonderful since. I would say that it is 75% to 80% improvement." People continued to receive good care and support from staff who had the skills and knowledge to meet their needs. People told us they thought staff were very knowledgeable and that they understood how to support them. Staff told us they received training and support that met people's individual needs. They had received training which helped them to understand and support people with their mental health needs. Staff told us they had plenty of opportunities to attend training and understood how developing their skills benefitted people living at the home. One staff member said, "We have opportunities to develop our skills to help people live better lives in a way that they wish."

Staff explained, "We have to look beyond a person's behaviour. There is usually a reason why behaviour changes. It may be anxiety about something or pain. If we address the cause then it's better long term for the person." Staff told us they had opportunities to reflect on their practice and discuss after incidents through regular one to one meetings with senior staff. They told us that during these meetings they received feedback on their practice and discussed their training requirements.

Staff assisted people to make their own decisions and were helped to do so when needed. We saw that staff didn't walk away from people until they had given them the time to respond. Staff gave people their full attention. When people lacked mental capacity to make particular decisions, staff took the required action to protect people's rights and ensure people received the care and support they needed. People told us that staff ensured they had their permission before they supported them with anything. Staff understood the importance of obtaining people's consent. The registered manager understood their responsibilities in monitoring people's ability to give informed consent.

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 2005. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Four people at the home were assessed as requiring a DoLS. The registered manager had submitted DoL applications for these people and had liaised with the relevant authority.

People continued to be happy with meals provided at the home and received support if required at meal times. A person told us, "The food is very good. It's always fresh and well cooked. If you are not satisfied you can take it back. I find it very good. You can have an alternative too." A relative commented, "(Person) always likes their food. It is very nice. I have seen staff help (person)." People were provided with enough to eat and drink. People told us they could choose what they wanted to eat each day even though there was a planned menu. We saw people had access to fresh fruit and drinks and had a sherry before lunch to stimulate their appetite. Staff told us everyone was encouraged to eat a well-balanced diet and supplements were

prescribed only when necessary.

People's health care needs continued to be met. A relative said, "As soon as there is anything the staff are on to it." Another said, "When (person) returned from hospital, a suitable pressure relieving bed was in place on their return. Staff sought guidance from a physiotherapist with regards to their treatment plan." People continued to be supported by staff to maintain their wellbeing. They had access to community healthcare services when they needed them, such as the district nurse and GP. Staff supported people to visit their doctors, consultants and other professionals and any on-going medical conditions were monitored appropriately.

Is the service caring?

Our findings

At our last inspection 'Caring' was rated 'Good'. At this inspection people who lived at Normanton Retirement Home continued to receive kind, compassionate care.

People living at Normanton told us they were highly content because they felt valued as individuals by staff and management. They told us that they felt that they really mattered. We observed a genuine, homely atmosphere in the service and people told us that this is what they liked about it. This was reinforced by a person that used the service who said, "The staff see us. We are people who are all very different and all requiring different help. But it is all done with such care and compassion."

We saw that staff spoke gently with people and supported them at a pace and manner that was appropriate to the individual. Staff explained to people what they were going to do before they supported them. This showed that people's emotional needs were recognised and dealt with, which demonstrated dignity and respect for the person's feelings. The registered manager and staff had developed an ethos and culture that valued people and treated them as individuals. One member of staff said, "We have to put ourselves in their position. Try sitting in their chair for a while and see life as they see it."

A relative commented, "They have respected (person), promoted their self-esteem and dignity at all times. Their care and support is individualised and personal." The care people received was very kind, caring and compassionate. We heard staff spoke with people in a caring, respectful and dignified manner. Staff used people's preferred names to address them, or used words of endearment to which people responded with smiles. There was a real connection between people and staff. We saw staff took time to listen to people, responded to their questions and interacted with people as they went about their tasks. Staff spent time chatting, laughing, joking and just being with people. We saw that touch, such as holding a person's hand or giving them a hug, was used by staff to reassure people and to make them feel valued. We saw that people enjoyed this interaction through the smiles and laughter they shared with staff.

A relative said, "(Person's) transition in coming here was sympathetic and excellent. The manager took (person's) coat and made them a cup of coffee and told us they would be fine. They made me and (person) very welcome. The transition was seamless. The manager has encouraged my relative to have lunch with (person) on Saturdays. I, because of my diet, sometimes bring my own food in. This was encouraged." Staff told us, "As we get to know a person, we learn what they like and dislike and what their preferred routine is and what to avoid. We share information to help us provide consistent care."

A relative said, "The food is excellent. (Person) eats it all. They had needed help. There's been no question that the help was there. (Person) has something to protect their clothes. They are now eating by themselves. My relative has lunch with (person) on Saturdays. It's something that the management asked about when (person) first came in and it's something that they have been keen to encourage that we continue." Another said, "We have had family meals in the conservatory for celebrations. (Person) has been supported by staff to attend a family get together in a local restaurant. Nothing is ever too much trouble. Staff go out of their way to ensure that (person's) needs are supported." We saw that support provided at lunchtime was

correctly paced to meet the needs of the individuals and ensured that people were supported to eat as independently as possible. Everyone we spoke with was very complimentary about the staff that supported them.

The staff received a high level of praise from families for the way in which people were cared for at the end of their life. Community health professionals were involved to make this passage as easy as possible for people. This showed that the care provided had been caring and compassionate for both the individual and the family members.

Staff told us that they encouraged relatives to visit the home for tea and chat even after their family member was no longer living at the home. This was so that they could maintain relationships with people they had come to consider as friends and were able to share memories of their loved ones.

The service had a strong person centred culture. The ethos was that of an extended family. The caring attitude of the whole staff team reached out to the friends and relatives of the people that lived in the home. A visitor told us that they not only visited their family member but also spent time chatting with other people in the home because it was like 'A happy family'. People met and had conversations with a variety of people helping them to have a greater level of interaction with different people.

A relative explained, "They are taking care of the mental and physical wellbeing of all of us. (Person) is still (person). They have given (person) back to me. They have taken away the worst bits and given us them back. We lost this when (person) was at home." The registered manager understood the importance of family relationships and friendships for people and worked hard to help ensure these were maintained. A relative said, "There are numerous occasions when children from local schools come into Normanton. They have helped, along with the children of the manager, to make (person's) experiences there, enjoyable, fulfilling and happy. We saw pictures where relatives were involved in special celebrations such as Christmas, birthdays and activities. An activities plan for the week was displayed. We heard staff remind people of what was on for the day and invited them to join in by choice. This enabled relatives to plan their visits so that they could be involved in activities such as quizzes if they wished.

A relative told us, "It's a very special service and they make a real difference to people's lives for the better." We saw that people lived in a comfortable, homely environment that met their needs. The entrance hall was very welcoming with ornaments, pictures and easy chairs. A visitor told us of their relative not liking the décor in their room. This person had been helped to choose the décor and furniture and had the room refurbished to their personal liking.

The home was personalised with pictures and belongings of the people that lived there and the family that owned it. Family involvement was very important and the people enjoyed time with the provider's extended family. We saw that a culture of compassion and respect extended to friends and relatives.

The registered manager and staff had an excellent understanding of how the 'atmosphere' in Normanton was important to the people living there. They said this helped people with negative emotional states that could be experienced from having to move from their own house or from their mental health needs. For example, people may be experiencing fear, anger and anxiety. We were told how one person had come to the home using it as a day care facility. This enabled an easier transition for this person into full time care.

People's life histories were recorded and staff spoken with were aware of what people liked to do. We saw that staff had recorded what was important to people. For example, one person had stated that it was important for them to have a visit from their vicar in their 'final days'. People and their relatives told us that

they were involved in making decisions about care and that communications between them and the staff were good. We heard from conversations that people were encouraged to share details about their lives and skills with others. We saw that the staff also shared details of their life with people which helped them to feel valued and important enough to have this information shared with them. For example, we heard people ask about the family members of various staff. We also saw that people in their rooms had sensory support from caged birds. The person had enjoyed birds during their life and this helped to ensure comfort for them as they were now confined to bed.

One person said, "I am quite happy wearing this (tabard). It's protecting my clothes." People told us that their privacy and dignity was maintained. We saw that there were en-suite facilities attached to bedrooms so that people could be supported with dignity and privacy. We saw staff ensured doors were closed when personal care was taking place. We observed that staff always knocked on bedroom doors before entering. During meal times we saw that people were offered clothes protectors if they wanted. Staff assisted people and chatted about the things that interested them to make the mealtime a sociable and enjoyable occasion.

People were consulted about and involved in decisions about their care and this was recorded in their care plans. Each person had a key worker who co-ordinated their care, and looked after their wellbeing. They reviewed and updated each person's care plans with them regularly. A range of information for people and their relatives was provided in the home to inform and empower people to be involved in decision making.

Is the service responsive?

Our findings

At our last inspection 'Responsive' was rated 'Good'. At this inspection people who lived at Normanton Retirement Home continued to receive care which was responsive to their needs.

People continued to be involved in the planning and review of their care. This was flexible to their needs. One person told us, "We went through the care plan about six to eight weeks ago. We have a review in the office." A relative said, "There is a care plan in place for (person), which I am supported to view on my visits. I am updated by telephone, as and when required, when there have been necessary changes reflecting a change in (person's) needs." Another relative said, "(Person) has always been cared for. If they have had a restless night, they will insist on getting up. When (person) gets up early, they have never had to wait to get up." A member of staff told us, "The people who move in now are much more dependent than before. We aim to help people regain their independence where they can. That's a great achievement and it keeps me loving the job I do."

People continued to receive personalised care and support. All the people we spoke with told us they enjoyed living at Normanton because they were supported the way they wanted to be. Staff asked them about how they wished to be supported to meet their personal and social care needs and they felt staff knew them and their wishes well.

People were supported to spend their time how they wanted to. A relative's comment was, "The activities are geared towards people's preferences; coffee mornings, word games, outings, summer fete and Church. All very usual things for (person) to be doing and they are great in managing this." Another said, "I visit twice a week. I visit in the mornings. I don't want (person) to miss out on activities in the afternoon. There are no restrictions at all. You can come anytime."

Staff cared about the fact that activities and community access were an important part of people's lives. People were supported and encouraged to engage in a variety of activities and some people still regularly enjoyed spending time independently out in the local community. During our inspection we observed some people being gently encouraged to enjoy a throwing game that became quite competitive. There was one person who said they did not want to participate. As the game began the activities staff asked the person if they wanted to participate. The person refused. Another two people played a round and the activities staff asked the person again if they wanted to play and they agreed. The activities staff put up a score on a white board and the people asked how much they needed to get to be in the lead when their turn came up. Others were sitting reading, knitting or enjoying chatting to other people. We saw that weekly activities were planned for people to participate in if they wished. We saw a pictorial record of people's activities they had engaged in. People had particularly enjoyed the children from a local school that came to read to them. Staff said they had been very interested as though a 'light had come on' within them. The pictures showed some people had been really engaged in this activity.

One person said, "They (church staff) collected me once to go to the church meeting. They (church staff) said they were going to take me to the church. But I've not been very well, so the staff are arranging for the

church to come here instead." The registered manager said that people's needs had changed and some who could previously access the community were no longer able to. With this in mind they tried to provide their favourite activity within the home. For example, a pub bar had been created which had enabled a person to meet up with friends and play cards and dominoes. This was just as they would have done previously at a local pub. Two years ago some people had enjoyed incubating chickens eggs. These eggs were now chickens providing some eggs for the home. People told us they had really enjoyed this experience. A member of staff brought their dog into the home every day. This had been a great success and people spoke of this dog with such fondness, especially when they cuddled them in their lap.

It was clear that the registered manager and staff had built good relationships with people who lived at the home and those important to them. A relative commented, "A year ago (person) was taken to hospital. (Person) was screaming and violent to anyone who came close to them. I called the manager at Normanton and they came to the hospital. As soon as the manager got there (person) completely calmed down. (Person) said I know where I am now. The manager handled it so well I couldn't have coped without her. (Person) completely chilled out when the manager got there. They handled it better than I can."

People told us if they had any complaints or concerns they would speak up and let staff know. One person said, "If there was anything staff are approachable. I know they will deal with it. There would never be any animosity. We have never had any concerns." People were encouraged to give their opinions on the care and support they received and told us they were listened to. There was a complaints procedure in place, which people had access to although they preferred to speak directly with staff and managers. Staff told us about the one to one time they spent with people as their keyworker. This was also an opportunity for people to express their opinions about their experience of the support they received. They and the person really valued this time and helped them carry out their keyworker role well.

Is the service well-led?

Our findings

At our last inspection 'Well-led' was rated 'Good'. At this inspection people who lived at Normanton Retirement Home continued to receive a service which was well-led.

A relative said, "I would highly recommend this place. It's the ambience. When I speak to people and I say where (person) is, this place is highly spoken of. Everyone who knows of it speaks highly of it." Another said, "The continuity, consistency and quality of the overall management of the service are second to none. I am aware how hard the management work to achieve this. They are tireless and dedicated and never too busy to speak with residents and their families." A key feature of this service was the daily contact the registered manager and provider had with the people that lived there. They knew people very well.

People told us they enjoyed being involved in the day to day running of the home through their 'resident meetings'. People told us they felt able to talk openly with the registered manager at the home. One person said, "You can always rely on them. If you want any questions answered they will answer them. They are nice and friendly. If you want anything they do it for you." Staff told us the registered manager was involved in the daily routine of the home and knew what happened on a day to day basis. Staff felt supported by the registered manager and senior staff. One staff member told us, "This home is run on the basis of a large family. It is very warm and a comforting place to live that is well run."

A relative said, "I think the way they say it to (person) is, this is a retirement home. You have retired here. It's how they treat people and their attitude that makes all the difference." We asked staff about the culture and values of the service. Staff told us that they all worked well as a team and respected one another. Staff also said that they thought highly of the people who lived in the home. One staff member said, "People are important. This is their life. It hasn't stopped because they came through our doors."

There were a number of systems in place to identify and rectify any issues with the quality of the service when they arose. There were also processes in place for regularly auditing areas such as medicines, infection control and the overall maintenance of the service. The care plans and other records we looked at were well maintained, up to date and stored securely.