

Ms Jo Ball

Crows Nest

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

About the service: The service was a large home, bigger than most domestic style properties. It was registered for the support of up to 12 people. Ten people were using the service. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

People's experience of using this service: The outcomes for people using the service reflected the principles and values of Registering the Right Support in the following ways; promotion of choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People told us they were well cared for; they said staff were kind and caring.

People told us they were safe living at Crows Nest. Staff had a good understanding of safeguarding and the whistle blowing procedure; they knew how to raise concerns.

There were sufficient staff to ensure people received the support they wanted. The provider followed safe recruitment practices.

Health and safety checks and risk assessments were carried out to ensure people were safe and to maintain a safe environment. Medicines were managed safely. Accidents had been and appropriate action was taken.

Staff received good support and had access to the training they needed. People were supported 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. People were supported to have enough to eat and drink and to access health care services when needed.

People's needs were assessed to identify how they want their support provided; this was used as the basis for developing personalised care plans.

People were engaged in a wide range of activities; some people accessed the local community independently.

People gave us only positive feedback about the registered manager. There were regular opportunities for people and staff to give feedback. Management completed checks to help ensure people received safe care.

More information is in the Detailed Findings section below. For more details, please see the full report which

is on the Care Quality Commission's (CQC) website at www.cqc.org.uk.

Rating at last inspection: Good (the last report was published on 1 September 2016).

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

Follow up: We will continue to monitor this service and inspect in line with our re-inspection schedule for services rated good.

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 Effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

Crows Nest

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, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspector carried out the inspection.

Service and service type: Crows Nest is a 'care home'. People in care homes receive accommodation and 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 was an unannounced inspection.

What we did: Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed all the information we held about the service, this included notifications of significant changes or events.

We checked for feedback we received from members of the public, local authorities and clinical commissioning groups (CCGs). We also checked Companies House records.

During the inspection we spoke with five people. We also spoke with the registered manager, the deputy manager and two care workers. We reviewed two people's care records, one staff personnel file, audits and other records about the quality and safety of the service.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- People told us they felt safe. They commented, "Yes, I feel safe. They [staff] look after us" and "I am safe."
- Staff confirmed the home was safe. One staff member told us, "They are very safe, we make sure they are safe."
- The provider had an agreed process for dealing with safeguarding concerns.
- Staff had a good understanding of safeguarding and the provider's whistle blowing procedure; they had not raised concerns. One staff member said, "I would use it [whistle blowing procedure] if needed" and "I am not frightened to raise concerns."
- Assessing risk, safety monitoring and management.
- Health and safety checks and risk assessments were carried; these helped to keep people, the environment and equipment safe.
- Staff had a good understanding of people's needs; they used this to support people sensitively to express themselves and avoid distress or anxiety. One staff member told us, "If we follow care plans they [anxiety or distress] can be avoided."
- The provider had plans for dealing with emergency situations; Personal Emergency Evacuation Plans (PEEPs) were in place to help evacuate people safely in an emergency.

Staffing and recruitment.

- Staffing levels were appropriate to meet people's needs in a timely way. People told us staff were available to help when needed; this included supporting people to go out. Staff commented, "Staffing levels are enough, there are always two on hand."
- The provider followed effective recruitment procedures, including completing pre-employment checks to ensure new staff were suitable to work at the home.

Using medicines safely.

- Medicines continued to be managed safely.
- Accurate records were maintained; these showed people received the medicines they needed.
- People had been supported, with oversight from medical professionals, to review the use of 'when required' medicines.
- Audits were completed to check staff followed the correct procedures.

Preventing and controlling infection.

- The home was clean, well decorated and well maintained.
- Infection control audits ensured high standards of cleanliness were sustained.

Learning lessons when things go wrong.

- Action had been taken following accidents to keep people safe.
- The provider monitored accidents; this ensured appropriate action was taken and lessons learnt.

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.

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.

- People's needs were assessed when they moved to Crows Nest; this included considering how people wanted to be supported and any needs relating to religion, culture and ethnicity.

Staff support: induction, training, skills and experience.

- Staff were very well supported and received the training they needed. Staff told us, "If I need any support it is there" and "I get loads of support. There is always someone there to help you if you get stuck with someone."
- Training, supervision and appraisals were up to date.

Supporting people to eat and drink enough to maintain a balanced diet.

- People were supported to have a healthy diet that met their individual needs and preferences.
- People were involved in deciding what meals were on the menu; they said the meals were good. People commented, "They ask us if we have ideas for the menu. The staff make them, they are nice. You get anything you want" and "We get plenty to eat and drink."

Staff working with other agencies to provide consistent, effective, timely care.

- People had emergency health care plans and a care passport; these gave a summary of their needs and other important information when people accessed other services.

Adapting service, design, decoration to meet people's needs.

- The home was suitable to meet people's needs; as well as having personal space people could spend time with others in communal areas.
- People were supported to personalise their rooms. One person told us, "I have a lovely room, it is a big room."

Supporting people to live healthier lives, access healthcare services and support.

- People were supported to access external health care services when needed; this included specialist community nurses, consultants and GPs.
- Health professionals' recommendations were included in people's care plans; this ensured staff were following the most up-to-date guidance.

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.

- DoLS authorisations were in place as required; the registered manager monitored DoLS applications to ensure they were submitted on time.
- MCA assessments and best interests decisions were in place for any restrictions placed on people.
- Staff had a good understanding of people's communication needs; this enabled them to support people effectively with making daily living choices. This involved verbal communication and for some people visual strategies using pictures to help them make a choice.

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.

People were supported and treated with dignity and respect; and involved as partners in their care.

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

- People received good care from a considerate staff team. People told us, "It is nice this place", "The staff are nice, it is lovely here" and "All of them [staff] are good, they are nice."
- There were positive and caring relationships between people and staff; people were relaxed around staff and chatted with them in a friendly way.

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

- The provider made information available to people in various ways to aid their understanding, to comply with the Accessible Information Standard. For example, visual information was used effectively to help people communicate. For example, care plans contained pictures to help with people's understanding.
- Staff described how for one person symbols were used to help them identify the correct glasses to wear for sewing or watching TV.
- Staff understood people's preferred communication methods; this meant people could make decisions themselves with support from staff.

Respecting and promoting people's privacy, dignity and independence.

- People were treated with dignity and respect. One person told us, "I respect them and they respect me."
- Staff described how they adapted their practice to ensure people received dignified and respectful care that met their individual needs.
- Staff supported people to promote their independence. Staff mainly used prompts to encourage and guide people.
- People were involved in helping in the house. For example, this included doing some house work and meal preparation.
- Some people accessed the local community independently; other people chose themselves how they occupied their time. People commented, "I do a lot of stuff for the community. I do all sorts, like gardening. I tell them where I am going. Everybody helps me [in the local community]" and "I can do whatever I want to do each day."

Is the service responsive?

Our findings

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

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.

- People's care plans were personalised and detailed; they were written in an easy read format.
- Care plans described the support people needed with all aspects of their health and social care.
- Care plans were evaluated regularly to keep them relevant to people's changing needs.
- People were actively supported and encouraged to participate in meaningful activities that met their interests. People commented, "I like sewing and jigsaw puzzles. Saturday night we went to see [Abba tribute], I like dancing and all kinds of music" and "I do lots of things here." Activity planners were used to inform people of what they would be doing each week.
- People had plenty of opportunities to access the local community. People told us, "I go out with staff. I like to go to Morpeth. I go to the pub for a meal" and "I am going down the street later, I am going for bread. I am going with [staff member], she's alright."
- Staff supported people to achieve their longer-term goals. For example, some people were planning to have a holiday abroad later in the year.
- Staff supported people maintain contact with family members.

Improving care quality in response to complaints or concerns.

- People knew how raise concerns if needed. They said, "If I have any worries I have a word with the staff or [registered manager]."
- The provider had an agreed procedure for dealing with complaints.

End of life care and support.

- People could discuss their future care wishes if they wanted; these were then detailed in their care plans for future reference.

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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- Staff described a mutual feeling of being valued and respected.
- The home had a friendly, homely and welcoming atmosphere; staff morale and teamwork were positive. Staff members commented, "Everyone helps each other here, like a happy family" and "It's a nice place to be, everyone knows each other."

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

- The registered manager completed checks to ensure people received good care and staff followed safe practices.
- The registered manager was supportive and approachable. People commented, "She is nice, funny at times" and "[Registered manager] is okay, she is alright."
- Staff said they could speak with the registered manager anytime. They commented, "[Registered manager] is very approachable, I can approach her with pretty much anything."

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

- People were encouraged to give feedback. People could attend regular 'house meetings'; these were usually well attended. People had been consulted using an easy read questionnaire. They had given positive feedback about their care.
- Relatives had been sent a 'family and friends' survey; this covered areas such as activities, communication and the quality of care. Relatives had given very positive feedback.
- Staff could also share their views through attending regular staff meetings.

Continuous learning and improving care.

- The provider continued to operate a structured approach to quality assurance; this had been effective in identifying and addressing issues.
- The registered manager completed monthly checks focussing on quality and safety; action plans were developed to address any issues identified.

Working in partnership with others.

- Annual reviews involving people and other professionals held. This gave an opportunity to discuss what was what was working well and to identify if changes were needed.

- The provider worked with local commissioners to promote positive outcomes for people.