

Hornby Healthcare Limited

Shoreline Nursing Home

Inspection report

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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

Shoreline nursing home is a care home which provides nursing and residential care to older people and young adults with physical health conditions and dementia. The home can support up to 43 people. At the time of the inspection they were 37 people living at the home.

Shoreline is a large adapted building over two floors. There are two areas of the home for people with nursing and residential care needs and there is one area for people living with dementia.

People's experience of using this service and what we found

People were safe living at the home. They received good care which met their individual needs. One relative said, "I'm very happy with [person's] care. I can't fault it. All of the staff are good. Nothing is ever too much trouble. Staff are very accommodating. They listen and are willing to try suggestions. Communication from the home is good."

The systems in place to make sure people received good care were effective. Leaders were open and transparent. Staff were skilled to deliver the right support to people, which ensured positive outcomes in relation to their care.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 10 April 2020). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 9 and 10 March 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when they would to improve safe care and treatment and governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions safe and well-led which contained those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Shoreline Nursing Home 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 ●

The service was well-led.

Details are in our well-led findings below.

Shoreline Nursing 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. 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.

Inspection team

One inspector carried out this inspection.

Service and service type

Shoreline nursing home 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

We gave a short period notice of the inspection. This supported the home and us to manage any potential risks associated with COVID-19.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and eight relatives via telephone about their experience of the care provided. We spoke with nine members of staff including the provider, registered manager, deputy manager and care workers. 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 reviewed a range of records. This included four people's care records and medication records. We looked at seven agency staff files in relation to checks completed prior to working at the home. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We requested additional information relating to checks of agency nurses.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At the last inspection of the home, the provider had failed to robustly assess and manage the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks to people were well managed at the home. Staff knew people well and they responded quickly when people's needs changed. Records to support the management of risk had significantly improved; staff said the records supported them to look after people.
- Staff were confident that people received good care. Staff told us, "Residents get good care because staff work together. We are a team. We have time to spend with people" and, "We treat everyone right and our approach keeps people safe. We love them."
- Relatives told us they were happy with the care people received. They said, "[Person] is brilliantly looked after" and, "[Person] is cared for. Staff ring me with updates. This gives me piece of mind."

Staffing and recruitment

- Records to support checks of agency staff needed to be improved. There were some gaps in the checks which were recorded to make sure staff had the right training and eligibility to work at the home. The provider put new procedures in place following our feedback.
- There were enough staff on duty to support people safely. Staff worked together to ensure people's needs were met. A relative said, "When I've visited, there have been enough staff around. I like the way they [staff] speak to [person]."

Systems and processes to safeguard people from the risk of abuse

- Good procedures were in place to ensure people remained safe. Timely action was taken when safeguarding concerns were identified.
- Relatives said people were safe and well cared for. One relative said, "I'm very happy with [person's] care. I can't fault it. [Person] has massively improved. It's how they [staff] are with [person]. I have confidence in them [staff]."

Using medicines safely

- Medicines were safely managed. Good procedures were in place to ensure people had access to their medicines. Records for medicines were up to date. Staff had completed training in medicines. Checks of competency to dispense medicines to people were up to date.

Preventing and controlling infection

- The home was clean throughout. A relative said, "Domestics do a good job and the home is always warm." Protective equipment was in place to support people and staff with the risks of cross contamination.
- Government guidance in relation to Covid-19 had been followed. Regular checks were taking place to make sure protective equipment was worn correctly.
- Relatives said they had confidence in staff to manage the risks of infection. Staff had kept relatives up to date when people had acquired an infection. They said they were happy with the action which had been taken.

Learning lessons when things go wrong

- The home had been proactive in their planning for covid-19. This included training for staff to take on additional responsibilities to ensure appropriate staffing levels were maintained.
- Accidents and incidents were reviewed. This analysis led staff to identify areas of good practice and make changes when needed.
- Continued development of the home had taken place since the last inspection. Improvements had been maintained.

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 requires improvement. At this inspection this key question has now improved to 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; Continuous learning and improving care

At the last two inspections of the service there had been a lack of oversight to ensure the safety of people using the service. Systems in place to monitor the quality of the service were ineffective. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Checks to monitor the quality of the home had been effective. The scope of recording within these checks needed to be further developed to show the detail of checks completed. Feedback about people's care had been positive and relatives said they would recommend the home.
- Staff said they felt supported to carry out their roles. Comments included, "We've done well during Covid. We felt prepared and always had plenty of PPE [personal protective equipment]. We managed staffing well" and, "Things have massively improved over the last few months. I feel better about coming into work. Communication has significantly improved."

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

- The provider had continued oversight of the home. Action plans had been effective in making continued improvements. Staff were actively involved in developing the home. The provider had been open and transparent with people, relatives, staff and professionals involved in the home.
- A strong staff team was in place. They were supported by leaders who were skilled to deliver a good service to people. Staff said, "I am very happy with how things are run at the home" and, "Everyone is much more relaxed. We have a good team. We make sure things are in place for residents to keep them safe."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Feedback had been sought and used to make improvements. People and relatives said they were happy with the care provided at the home. They had been kept up to date with changes which had been made.
- The home had maintained links with the local community. Continued relationships were in place with health and social care professionals involved with people.

