

NA SS Care Limited

Hadley House Nursing Home

Inspection report

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Tel: 02089077047

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10 December 2015

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We undertook this unannounced inspection on 10 December 2015. Hadley House Nursing Home is registered to provide personal care and accommodation for a maximum of 14 people, some of whom may have dementia or mental health needs. At this inspection there were 14 people living in the home.

At our last comprehensive inspection on 11 August 2014 we found two breaches of legal requirements. This is because the provider did not have effective systems for safe care and treatment and for monitoring the quality of care. After the comprehensive inspection, the registered provider sent us an action plan telling us how they would meet legal requirements. We undertook this focused inspection on the 10 December 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Hadley House Nursing Home' on our website at www.cqc.org.uk.

The home has a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements of the Health and Social Care Act and associated Regulations about how the service is run.

At this focused inspection, we found that the provider had followed their action plan and legal requirements had been met. Cleaning material and chemicals were kept locked away in a cupboard when not in use. The arrangements for the recording, storage, administration and disposal of medicines were satisfactory. The sharps box was not overfilled and was kept locked in a designated room. The premises were clean and tidy. Infection control measures were in place. There was a record of essential inspections of equipment and maintenance carried out in the home.

Staff were carefully recruited. There were sufficient numbers of staff to meet people's needs. Staff were aware of the safeguarding policy. They had received training and knew how to recognise and report any concerns or allegation of abuse. Risk assessments contained action for minimising potential risks to people.

We found that action had been taken to ensure the service was well-led. The provider had introduced a system of regular audits and checks to ensure that deficiencies are promptly noted and rectified. Staff worked well as a team and communication among them was good. Feedback from a visitor and people who used the service was satisfactory and indicated that people were satisfied with the quality of care 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 was safe. We have made this rating because of improvements the provider had made. Staff were aware of the safeguarding policy. They had received training and knew how to recognise and report any concerns or allegation of abuse.

Risk assessments contained action for minimising potential risks to people. There were suitable arrangements for the management of medicines. Staff were carefully recruited. There were sufficient staff to meet people's needs.

The home was clean and infection control measures were in place. There was a record of essential inspections and maintenance carried out.

Is the service well-led?

Good ●

The service was well-led. We have made this rating because of improvements the provider had made. People and a visitor expressed confidence in the management of the service.

The results of the last satisfaction survey and feedback from people indicated that there was a high level of satisfaction with the care and services provided. An action plan had been prepared following the survey. Staff worked well as a team and they informed us that they were well managed.

Audits and checks of the service had been carried out by the registered manager. This included medicines administration and health and safety checks.

Hadley House Nursing 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.

The inspection took place on 10 December 2015 and it was unannounced. The inspection team consisted of one inspector. Before our inspection, we reviewed information we held about the home. This included notifications and reports provided by the home. The provider had completed and returned to us 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.

We spoke with five people, and a visitor. We also spoke with three staff, the registered manager and the deputy manager. We observed staff interacting and supporting people in the communal areas of the home. We also visited other rooms of the home and these included the bedrooms and laundry room.

We reviewed a range of records about people's care and how the home was managed. These included the care records for three people who used the service, three recent staff recruitment records. We checked the policies and procedures and maintenance records of the home.

Is the service safe?

Our findings

At our previous inspection of 11 August 2014 the service was in breach of Regulation 12 HSCA 2008 (Regulated Activities) Regulations 2010 Safety and Suitability of Premises. This corresponds with Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Safe care and treatment). This is because the provider did not have effective systems for the safe care and treatment of people. We noted that some medicines that were no longer required had not been returned to the pharmacist for disposal in order to minimise the risk of staff administering medicines that were not currently required. A "sharps" box, designed for safe disposal of needles used for injections and blood tests was overfull and the lid could not close. We observed that cleaning substances that may be hazardous to health were not stored securely. These deficiencies were a risk to people's health and safety. At this inspection we noted that all the deficiencies identified had been rectified and suitable arrangements were in place.

Some people with dementia did not express their views to us. Others were able to speak with us and they stated that they were safe in the home and were satisfied with the care provided. One person said, "Yes, they are nice to me." This person nodded when we asked them if they felt safe in the home. Another person said, "Yes, I do feel safe. They do take care of me." A third person said, "It's quite nice here. Food is alright." A visitor informed us that people were well cared for and staff were "very good".

We observed that people were cleanly dressed and appeared well cared for. Staff were constantly present and interacted regularly with people. People were able to approach staff and moved about freely in the home.

The service had suitable arrangements in place to ensure that people were safe and protected from abuse. Staff had received training in safeguarding people. They could give us examples of what constituted abuse and they knew what action to take if they were aware that people who used the service were being abused. They informed us that they could also report it directly to the local authority safeguarding department and the Care Quality Commission (CQC) if needed. The service had a safeguarding policy and staff had details of the local safeguarding team and knew how to contact them if needed. The policy still had reference to informing the previous regulator (Commission for Social Care Inspection instead of the Care Quality Commission). The registered manager stated that this would be updated.

Risk assessments had been prepared and these contained guidance for minimising potential risks such as risks associated with pressure sores and smoking. Personal emergency and evacuation plans were prepared for people and these were seen in the care records.

We looked at the staff records and discussed staffing levels with the registered manager. On the day of inspection there was a total of fourteen people who used the service. The staffing levels consisted of the registered manager and four care staff during the morning, three care staff during the afternoon and evening and two care staff during the night. There was a trained nurse on each shift. Staff we spoke with told us that there was sufficient staff for them to attend to their duties. People and a visitor informed us that there were sufficient staff and they were satisfied with the care provided.

We examined a sample of three records of staff. We noted that staff had been carefully recruited. Safe recruitment processes were in place, and the required checks were undertaken prior to staff starting work. This included completion of a criminal records disclosure, evidence of identity, permission to work in the United Kingdom and a minimum of two references to ensure that staff were suitable to care for people.

There arrangements for the recording, storage, administration and disposal of medicines were checked. They were satisfactory. The temperature of the room where medicines were stored was monitored and was within the recommended range. There was a record confirming that unused medicines were disposed of. The home had a system for auditing medicines. This was carried out by the registered manager. There was a policy and procedure for the administration of medicines. There were no gaps in the medicines administration charts examined. People we spoke with told us they had been given their medication. The "sharps" box was not overfull and the lid could close properly.

There was a record of essential maintenance carried out. These included safety inspections of the portable appliances and electrical installations. The fire alarm was tested weekly to ensure it was in working condition. The last fire drill was carried out in July 2015. The registered manager stated that another drill would be scheduled soon.

The premises were clean and no unpleasant odour was noted. Staff we spoke with had access to protective clothing including disposable gloves and aprons. The home had an infection control policy. We visited the laundry room and discussed the laundering of soiled linen with the registered Manager. She was aware of the arrangements for soiled and infected linen.

Is the service well-led?

Our findings

At our previous inspection of 11 August 2014 the service was in breach of Regulation 10 HSCA 2008 (Regulated Activities) Regulations 2010 2010 Assessing and monitoring the quality of service provision. This corresponds with Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good Governance. We noted that checks had not found the areas of risks to people's safety that we observed concerning the storage of cleaning substances that may be hazardous to health, and arrangements for safe disposal of medicines and of needles used for injections and blood tests. These deficiencies placed people at risk of harm. At this inspection we noted that deficiencies identified had been rectified and suitable quality monitoring arrangements and checks were in place.

People who used the service and a visitor expressed confidence in the management of the home. The visitor said, "Staff are very good. The home is well managed." Compliments were also received from relatives. One relative wrote, "Thank you for the excellent care you have provided over the past years for my relative." Another relative wrote, "You care for them as individual people."

We observed that staff worked well together and went about their duties in an orderly manner. Concerns expressed at our last inspection regarding arrangements for medicines and storage of substances harmful to health had been responded to the action plan for rectifying them had been followed. There was a clear management structure. The registered manager was supported by a deputy manager.

Care documentation contained essential information and were up to date. There was a range of policies and procedures to ensure that staff were provided with appropriate guidance to meet the needs of people. These addressed topics such as infection control, safeguarding and health and safety. Staff were aware of these policies and procedures and followed them.

Audits and checks of the service had been carried out by the registered managers and the deputy manager. These included regular checks on cleanliness, medicines, hot water and maintenance of the home. At the inspection we saw evidence that monthly audits had been carried out

The home carried out annual satisfaction surveys of the service and care provided. The latest survey indicated that there was a high level of satisfaction with the care provided and the conduct of staff and the manager. An action plan had been prepared following the feedback received.

Staff informed us that communication among staff and from management was good and they were aware of their roles and responsibilities. Monthly staff meetings were held and we noted that staff had been updated regarding management and care issues. Staff were aware of the values and aims of the service and this included treating people with respect and dignity and ensuring that people were well cared for and protected from harm.