

Martlane Limited

Forest Place Nursing Home

Inspection report

Forest Place
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20 January 2021

21 January 2021

27 January 2021

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

Forest Place Nursing Home is a residential care home providing personal and nursing care for up to 90 people over the age of 65 years, with nursing and/or dementia related needs. There were 55 people living at the service at the time of our inspection.

There had been significant changes to the property since our last inspection. The Kingfisher unit had closed, and people had moved into purpose-built units, which included a new reception, training rooms and parking facilities.

In total the service had the potential to accommodate 120 people, however the provider had not yet requested to register the additional units, and the top floor was not yet in use.

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

The provider and registered manager had responded positively to feedback from the last inspection. Significant changes had been made, including an extensive building and refurbishment programme. As a result, people's experience of living at Forest Place Nursing Home had improved and staff were enabled to provide safer care.

The provider had supported the registered manager to develop systems to promptly and effectively pick up and resolve concerns. This had improved the understanding and management of risk, in particular around key areas of concern at our last inspection, such as safeguarding and pressure care. There was an excellent culture of learning and continual development.

There were enough staff to support people safely and the team was well organised. The registered manager was passionate about enabling staff to develop their skills and understand their role in the service.

People continued to receive medicines safely and as prescribed. We were assured that this service met good infection prevention and control guidelines.

People received personalised care from motivated staff who knew them well and supported them to achieve positive outcomes. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Relatives were largely positive about the care their family members received, though they described some anxiety because contact was affected by the COVID-19 pandemic. All staff worked hard to communicate and engage with relatives. We had positive feedback about how well the electronic systems supported this contact and communication.

All the professionals we contacted gave us positive feedback and told us they had good working relationships with staff and management which promoted people's wellbeing.

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 06 January 2020). The provider completed an action plan after the last inspection to show what they would do and by when to improve the governance at the service. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check the provider 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 contain 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 therefore remained requires improvement. This is based on the findings at this inspection.

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 coronavirus and other infection outbreaks effectively.

We also looked to see whether the infection prevention and control at the service met the required standard for it to be used as a designated care setting, to facilitate safe hospital discharges during the COVID-19 pandemic.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Forest Place 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.

Is the service well-led?

Good ●

The service was well-led.

Forest Place 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.

We looked to see whether the provider had made the necessary improvements highlighted at our previous inspection. We also 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.

The service had been identified for use by the Local Authority as a designated care setting in response to the Winter Plan for people discharged from hospital with a positive COVID-19 status. A separate report on the provider's application to become a designated setting can be found by selecting the 'all reports' link for Forest Place Nursing Home on our website at www.cqc.org.uk.

Inspection team

Two inspectors visited the service on 20 January 2021. An assistant inspector made calls to family members and staff to get their feedback about the service on 21 January 2021.

Service and service type

Forest Place 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

This inspection was announced. We gave 24 hours' notice, so that we could discuss how best to minimise

the risk of infection during our visit.

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 and professionals who work with the service. We used the information the provider sent us in the provider information return. 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. This information helps support our inspections.

We used all of this information to plan our inspection.

During the inspection

We focused on speaking with people who lived at the service and used observation to gather evidence of people's experiences of the service.

We spoke with the registered manager, the area manager, the lead nurse, who was also the clinical lead, six care or nursing staff and one activity coordinator.

We limited the number of records we looked at on site as we were minimising our time at the service. We also reviewed the improvements the provider had made to the property.

After the inspection

We arranged a phone call with the registered manager on 27 January 2021 to continue the inspection process. The registered manager, consultant and provider sent us information for review. We had telephone or email contact with nine family members and four staff. We had email contact from six health and social care professionals.

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.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Prior to the last inspection we had concerns about the lack of oversight of skin tears and bruising. These concerns had now been addressed and there was a new recording system for internal safeguarding investigations. Staff worked well with the local authority to investigate any concerns. A professional told us, "Care staff and nurses in charge have always been very helpful and provide information that indicates that they know the adults they are caring for well."
- Relatives told us they were confident their family members were safe. A professional told us, "In my conversations with family members they have not been concerned with the care of their loved one and praised the staff."
- Learning lessons was now a key feature of the new internal systems. The clinical lead demonstrated this commitment during our visit. They had arranged a meeting with all senior staff to discuss why there had been a delay in reporting an unexplained bruise. They reviewed and altered the process to ensure any concerns could be investigated promptly.

Assessing risk, safety monitoring and management

- When we last visited, we found staff were not effectively supporting people who became distressed. At this inspection we found improvements in this area. Incidents of distress were monitored regularly by the registered manager or clinical lead, to ensure people received safe support when anxious.
- Care plans had guidance to staff on how to support a person who became distressed, and we observed staff followed advice in the care plans. A member of staff described how they had asked a family member to speak on the phone to a person who was distressed and refusing care. This contact had soothed the person who then accepted support from staff.
- Staff knew how to support people who were at risk of pressure sores. There were detailed care plans and monitoring systems in place and professionals had been involved where required.
- At our last inspection we raised concerns regarding fire prevention measures. A new fire system had been installed since the last inspection. The registered manager explained how this had improved safety. They showed us how the new system was able to show exactly which area a fire started, enabling staff to act promptly to keep people safe.

Using medicines safely

- People continued to receive their medicines safely and as prescribed.
- There was detailed guidance, reviewed by a GP, for people who were prescribed medicines to be taken as required. A nurse explained when and why a person had received this type of medicine, demonstrating a personalised and proportionate approach.
- The registered manager had arranged for a pharmacist to carry out checks of staff skills in administering

medicines, to support existing internal competency checks.

- Staff showed us the new medicine storage room, which was well-ordered and designed.

Staffing and recruitment

- Staff told us staffing levels had improved since our last inspection. A member of staff said, "If someone needs one-to-one support the manager arranges it straightaway and then sorts out the paperwork afterwards."
- The registered manager demonstrated a passion for developing staff skills. The new activity coordinator told us they were booked on specialist sensory training. There was a new training room available to provide improved training to staff, to help develop skills and promote effective team working. A member of staff told us, "I feel supported we are given the opportunity to learn more and to increase our knowledge."
- We observed a nurse supporting a person with complex needs and they demonstrated a skilled approach, providing personalised, enabling care.
- There were safe recruitment systems in place. A new member of staff told us they had not started working until all necessary checks had been completed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- People received personalised support to keep in touch with their relatives. Families and staff described different approaches, adapted depending on people's needs. For example, one person became distressed when they spoke "live" to their relatives on the phone, so staff and relatives swapped videos, which the person could watch and enjoy at their own pace.
- The provider promoted safety through the layout and hygiene practices of the premises. Many people now lived in the new property, which was much easier to clean and maintain.
- We observed staff wearing masks and other protective equipment, as required. A professional told us, "I have had no concerns about infection prevention and control on my visits and the staff are clear of the rules. The nurses have raised the use of Personal protective equipment (PPE) when the receptionist makes contact that I will be visiting."
- The provider's infection prevention and control policy was up to date and being implemented effectively. The provider was following national and local guidance and worked with external agencies to keep people safe, such as using technology to minimise risk of infection. A professional told us, "They have been very helpful during the COVID19 pandemic in facilitating the new ways of working such as the use of telephone and video."

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 inadequate. 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.

At our last inspection quality monitoring systems were not being effectively operated to ensure the quality and safety of the service delivered. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider and registered manager had taken effective action following the last inspection and there was no longer a breach of regulation 17.

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

- When we last visited the service, we found poor leadership and systems which meant quality checks and audits were not used to pick up concerns effectively. The staff team were not clear on their roles and responsibilities.
- The current registered manager had arrived at the service just before our last inspection and had started driving improvements immediately. Despite numerous challenges in 2020, the registered manager and provider had built on these early achievements to ensure people received consistent good quality care. During this period, improvements had been embedded and there was a commitment to ensure standards were sustained.
- The provider had arranged for a consultant to work with the management team to develop effective systems which supported senior staff to pick up concerns and take prompt action. The new systems had directly improved the safety and quality of care for people. For instance, staff received refresher training after an audit had picked up poor catheter care.
- The consultant had supported the management team to better understand their legal responsibilities and how to use best practice guidance to improve the quality of care. Senior staff reviewed all pressure care concerns to understand where things may have gone wrong and what actions to take to minimise risk in the future.
- Senior staff initially carried out all quality checks. The registered manager was developing staff skills so the responsibility for carrying out quality checks would gradually be shared across the team. This was an example of best practice and reflected the changing culture at the service.
- New technology was used creatively to record the support people received. As well as recording ongoing care, staff took photos when they were working with people which could be accessed by senior staff to help them monitor people's achievements and wellbeing.
- Since the last inspection, the provider had recruited new nursing staff who were working alongside the management team to sustain improvements. The registered manager had also strengthened the role of unit

managers and team leaders to improve coordination of each unit. A member of staff told us, "I have been given extra responsibility, it is great that the manager supports and encourages us."

- There had been an increase in administrative tasks since the last inspection. Care and nursing staff told us this was impacting on their ability to carry out direct care. There was one reception staff who also carried out administrative tasks. We discussed this with the provider who assured us they would review this resource to ensure staff were fully supported in their caring role.
- The provider was enthusiastic about growing the service and registering the new purpose-built end of life unit on the top floor. They told us they understood the importance of ensuring growth was sustainable and improvements were maintained.

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

- The provider had worked closely with the registered manager to ensure the property renovations promoted peoples' quality of life. The adaptations were carefully thought through and reflected best practice around sensory and dementia awareness. The new building had quiet areas which provided a peaceful alternative to the communal areas.
- To assist people with memory loss to locate their rooms, different areas were painted in contrasting colours and there were memory boxes by each bedroom door. The memory boxes had been filled with personalised mementoes, such as medals, family or pet photos, which could be used by staff to talk to people about the things which were important to them.
- Relatives gave us examples of good quality care which reflected a personalised approach. A relative described how, "The nursing care, dedication and support received from all the staff," had resulted in positive outcomes for their family member. Another relative told us about improvements in their family member's mobility since their arrival at the service.
- Staff worked well with external professionals to support people to achieve good outcomes. They had involved speech and language therapy and physiotherapy for a person, which enhanced their quality of life. A professional told us, "Care plans are person centred. The activity ladies are providing interactions, and some are creative and out of the box."
- We heard from six health and social care professionals and the feedback was extremely positive. Professionals described how well the service worked with them to make a difference to people's lives. One health professional said, "My colleagues and I find the nursing staff in the home attentive to detail and to have good organisation, helping us care for the residents."

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

- People were encouraged to get involved in the service in a person-centred way. We observed a person doing their washing up in a new kitchenette, while staff observed them to ensure they remained steady. Staff had carried out a risk assessment which considered how they could remain fully engaged, whilst minimising risks to their safety.
- Communication with families was good and personalised to reflect people's individual circumstances. A relative told us, "All the staff are marvellous and very nice and if I have a query it is dealt with immediately by the staff I speak to."
- Where appropriate, relatives could look at a person's electronic care plan system, for example, to see a photo of their family member enjoying a social activity. A relative told us, "It's a useful tool in absence of seeing my family member in person."
- Some relatives described their anxieties due to the limited visiting during the COVID-19 pandemic. This was particularly the case where families didn't access the electronic system. The registered manager and staff told us about extensive ways they tried to update families and provide reassurance about concerns.

- The registered manager had a passion for developing staff potential and teamwork. Some staff told us they found the change unsettling, but feedback was largely positive. A member of staff said, "There has definitely been an improvement since the (registered) manager started. They are a very good manager and so helpful."
- Brief staff 'flash' meetings took place four times a week to ensure staff were kept updated, such as about any new COVID-19 requirements, or new measures to continue to improve care. Minutes of meetings showed staff had clear guidance from senior staff, and so were clear about the direction the service was taking.