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The Yews

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

This comprehensive inspection was carried out on 19 October 2017. The inspection visit was unannounced.

The Yews is a residential care home which provides accommodation and personal care for up to 13 older people. The care home is situated in Kettering Northamptonshire. On the day of our inspection there were 13 people using the service.

At the last Care Quality Commission (CQC) inspection on 19 August 2015, the service was rated Good in all domains.

At this inspection we found the service remained Good.

The service had a registered manager. The provider for the service was also the registered manager. 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 and associated Regulations about how the service is run.

People continued to receive safe care. Staff had received training to enable them to recognise signs and symptoms of abuse and felt confident in how to report them. People had risk assessments in place to enable them to be as independent as they could be. Effective recruitment processes were followed by the service and there were enough staff to meet people's needs. People received their prescribed medicines as prescribed.

The care that people received continued to be effective. There were sufficient staff, with the correct skill mix, on duty to support people with their needs. Staff received an induction process and on-going training to ensure they were able to provide care based on current practice when supporting people. Staff were well supported with regular supervisions and appraisals.

People were supported to make decisions about all aspects of their life; this was underpinned by the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Staff were knowledgeable of this guidance and correct processes were in place to protect people. Staff gained consent before supporting people. People were supported to maintain good health and nutrition.

Staff provided care and support in a caring and meaningful way and people had developed positive relationships with them. Staff were caring and treated people with respect, kindness and courtesy. They knew the people who used the service well and people and relatives, where appropriate, were involved in the planning of their care and support.

People continued to receive care that was responsive to their needs. Care plans had been developed with

people and their families if appropriate to identify what support they required and how they would like this to be provided. People participated in a range of activities which kept them entertained and enabled them to follow their hobbies. People knew how to complain. There was a complaints procedure in place which was accessible to all.

The culture was open and honest and focused on each person as an individual. Staff put people first, and were committed to continually improving each person's quality of life. Quality assurance systems ensured people received a high quality service driven by improvement.

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.

The Yews

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.

We carried out our unannounced inspection visit of The Yews on 19 October 2017. The inspection team consisted of one inspector.

Before the inspection, we asked the provider to complete 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. We looked at previous inspection reports and notifications about important events that had taken place in the service, which the provider is required to tell us by law.

Prior to this inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We spoke with the local authority to gain their feedback as to the care that people received. We used all this information to decide which areas to focus on during our inspection.

We spoke with eight people who used the service and two relatives. We also spoke with a visiting health professional. In addition we had discussions with the provider/registered manager, the deputy manager and three care and support workers.

We looked at three people's care files to see if their records were accurate and reflected their current needs. We also reviewed two staff recruitment files, staff duty rotas, training records and further records relating to the management of the service, including quality audits in order to ensure that robust quality monitoring systems were in place.

Is the service safe?

Our findings

People told us they felt safe. One person said, "I really do feel safe. There is always someone around to help you." A relative commented, "[Name of relative] is in safe hands here. They do everything they can to make sure any risks are minimised." Staff told us, and records showed they had received appropriate training with regards to safeguarding and protecting people. One staff member told us, "If I had any worries or concerns I would report them straight away. I know it would be dealt with properly." Another commented, "Safeguarding is our priority. We need to make sure people are safe at all times.

People had individual risk assessments to enable them to be as independent as possible whilst keeping safe. They covered a variety of subjects including, moving and handling and tissue viability. One staff member explained, "Some people we support need help because they are at risk of falls. We make sure we observe them when they are walking and make sure there are no obstacles in their way." Staff told us, and records showed that the risk assessments in place were reviewed on a regular basis and updated when required.

The provider had a business continuity plan. This was to ensure people would still receive the care and protection they required in the event of evacuation.

Staff were employed at the service following a thorough recruitment procedure. One staff member said, "I had to get references and checks before I started." Documentation showed that the necessary employment checks had been completed before staff commenced work at the service. Rotas we viewed and our observations on the day showed there was enough staff with varying skills on duty to provide the care and support people required.

People's medicines were managed safely. One person said, "I get my medicines as I need them." A relative told us, "I don't have any worries that [relative] gets the right medicines when they need them." We observed medication being administered. This was carried out correctly and records were fully completed. Medicines were stored correctly in locked trollies.

Is the service effective?

Our findings

Staff had the knowledge and skills to carry out their roles and responsibilities. One person said, "The staff know what they are doing and they know how to help me." A relative commented, "The staff are very good. [Relative] gets the right amount of help when they need it." Staff told us that they were provided with appropriate support and training to enable them to carry out their roles. One staff member said, "My induction was good. I worked alongside an experienced staff member until I felt confident to work alone." Within the staff files we saw that staff had been provided with induction and on-going training. A second staff member commented, "The training is pretty good. We get what we need."

Staff told us that they were provided with regular supervision and felt well supported. One staff member said, "I find supervision useful and I can use it to talk about anything I need to." We saw records which showed staff received regular supervision.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We observed staff gaining consent throughout the inspection. For example people were asked if they wanted assistance, were ready for their medication or wanted their meal.

People told us they enjoyed the food. One person said, "We get good food and we get a choice' – soups, casseroles and stews. I can't fault it." Another person told us, "The food is lovely. We are very lucky. I get all the food I want and I don't have to do the washing up. I have the best of everything." Within the care plans we saw that there was documentation in relation to people's dietary needs and the support they required with maintaining a healthy diet.

People had access to healthcare professionals and their health care needs were met. One person told us, "If I feel unwell the staff will get the doctor to see me." A relative told us how their family member had been unwell recently and explained the steps the service had put in place to support them. They told us, "The care is very good and I know if there are any concerns they will contact the GP." People's care records confirmed that they received medical attention when they needed to. One visiting health professionals told us, "The staff are very knowledgeable. I can't fault them. The staff know when we are coming and there is always someone to help if we need it."

Is the service caring?

Our findings

It was obvious from our observations that people were treated with kindness and compassion. One person said, "They are very nice people – lovely. We have a lot of laughs and jokes with each other." One relative told us, "The staff are brilliant. It's very homely and welcoming. I have peace of mind not just for me but for [relative] as well. I ask [relative] if they are happy and they always tell me, 'I am so happy'."

We found that staff worked hard to make people and their relatives feel cared for. One staff member told us, "The best thing about working here is the residents. Everyone is different and has something special to offer." A second member of staff commented, "It feels like we are one big family." These sentiments were echoed by everyone we spoke with. Staff were able to tell us in depth about each individual, for example their likes and dislikes, backgrounds and family. We saw that staff spent time with people, either sitting chatting or whilst carrying out tasks. A relative commented, "We have become friends of the home. We have made friends with the staff and built up relationships with them. It's a proper home from home."

A visiting healthcare professional told us, "This is the best place. I would recommend it."

The provider told us that there was an advocacy service available for anyone who needed it.

Staff we spoke with understood about confidentiality. They told us they would never discuss anything about a person with others, only staff, but in a private area so they would not be overheard. Files were kept in a locked cabinet in the office.

We saw people's privacy and dignity was kept at all times, for example being spoken to appropriately and when being assisted with meals or care. Staff had an understanding of privacy and dignity. One staff member said, "We make sure the doors are shut, we close the curtains and ensure people are always covered with a towel."

Is the service responsive?

Our findings

People received support that was tailored to them as individuals. One person told us, "I have my own routines and the staff respect that." A relative said, "[Name of relative] gets such good care. It's all very much based around what [relative] wants. The staff do respect people's choices here." A staff member told us, "Everything is person centred. We make sure people get the care they need exactly how they want it." People's support needs had been assessed and care plans developed based on people's needs and preferences. The things that were important to people were recognised. People were supported by staff who understood their specific needs and how to support them in the ways that they wanted to receive care.

Care plans showed a full assessment had been completed prior to admission. These had been followed by a care plan that showed people's strengths as well as the support they required. We saw that people's life histories had been obtained with each person and their family where appropriate. Care plans had been written in a personalised way for each individual and were reviewed regularly. The provider was in the process of putting care plans onto a new electronic system. This wasn't completed at the time of our inspection and the provider told us hard copies would be maintained until the process was completed.

People were supported to follow their interests and take part in social activities. It was clear from the facilities provided and the activities in place, that the provider recognised this as an important part of people's lives. One person told us, "I love the activities. It's good fun." A relative commented, "There is always something going on."

There was a complaints procedure in place. One person told us, "I have nothing to complain about but if I wasn't happy I would go straight to [name of provider]." One staff member told us, "We are a very small service so things get sorted on a day to day basis and don't have time to fester." Everyone we spoke with told us they had not had cause to complain but would do so if they thought it necessary. The complaints log showed that no complaints had been received in the last two years. However there were procedures in place to deal with complaints effectively.

Is the service well-led?

Our findings

The registered provider was also the registered manager and they were registered with the Care Quality Commission. People, relatives and staff expressed confidence in how the service was run. One person told us, "[Name of provider] runs a good home. We see them every day." Another person commented, "This is one of the best homes. [Name of provider] is very approachable and always available to talk to. I think we are very lucky to have found this home."

Staff told us they were supported by the provider and the deputy manager and could speak with them openly. Staff meetings and supervisions had been held on a regular basis. One staff member said, "We are very well supported here by the management. We are listened to and can raise our views and any new ideas."

The provider was aware of the day to day culture of the service. Staff told us they were approachable, visible and spoke with all of the people who used the service. We observed this on the day of our visit.

The provider used annual questionnaires to gather people's views. Where comments had been made the provider had responded to them and the actions taken had been recorded. This demonstrated that people's views were listened to and acted upon, ensuring people had a voice.

Quality assurance systems were in place to help drive improvements. These included a number of internal checks and audits. These helped to highlight areas where the service was performing well and the areas which required development. This helped the provider to ensure the service was as effective for people as possible.