

Malhotra Care Homes Limited

Heatherfield Care Home

Inspection report

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Cramlington
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Date of inspection visit:
18 January 2021
19 January 2021
20 January 2021

Date of publication:
17 February 2021

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

Heatherfield Care Home provides accommodation, nursing and personal care to a maximum of 74 people. At the time of the inspection 63 people were receiving support across three separate units, specialising in nursing, younger people and dementia.

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

Medicines were generally managed well. People received their medicines in a timely manner and as prescribed. We did find some minor issues which we have made a recommendation about.

Infection control procedures, including those related to COVID-19 were appropriate and the provider planned to further review these, including training. The service was clean and tidy.

Safe staff recruitment procedures were in place. Any staffing issues were addressed by the registered manager. The provider had a training programme in place and staff support procedures.

Enough staff were on duty throughout the inspection, although we noted some shortages had been present in recent months due to COVID-19 and staff sickness. A recruitment programme was on going.

People felt safe and safeguarding procedures were followed by staff. Accidents and incidents were reported appropriately and notified to the relevant authorities.

People and their relatives reported staff to be kind and caring.

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.

The provider had a range of quality assurance checks in place and together with the registered manager used these to monitor the service provided.

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

Rating at last inspection

The last rating for this service was good (published 18 May 2018).

Why we inspected

We received concerns about staffing levels and care not being provided effectively. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained as good. This is based on the findings at this inspection. Please see the safe and well led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Heatherfield Care Home on our website at www.cqc.org.uk.

Follow up

We will 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.

Heatherfield Care 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.

As part of this inspection we 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.

Inspection team

This inspection was carried out by one inspector and one Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Heatherfield 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 unannounced.

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.

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 communicated with 13 people during our visit either in person or by telephone and contacted 13 relatives by phone. We spoke with the registered manager, chief executive officer, director of operations, an operations manager, head of compliance and contacted 28 care and ancillary staff to gain their views. We communicated with two social workers, one district nurse and a member of the clinical commissioning group (CCG).

We reviewed a range of records, including six care records and multiple medication records. We looked at four staff files in relation to recruitment, training and performance. A variety of records relating to the management of the service, including staff rotas and dependency tools, policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were generally managed safely. People told us they received their medicines as prescribed. One person said, "Yes, I know all about my medicines and it is all satisfactory."
- There was no impact on people, but we found a few medicines issues. This included staff not following correct procedures regarding thickeners on one unit. Thickeners are usually powders added to foods and liquids to bring them to the right consistency for people with swallowing difficulties. Medicines risk assessments were not all in place as required. We discussed issues found with the provider at feedback.

We recommend the provider review medicines management procedures in line with best practice guidance.

Staffing and recruitment

- Safe recruitment practices were in place to ensure only staff who were suitable to work with vulnerable people were employed.
- There was enough staff to meet people's care needs. We scrutinised rotas and staff dependency tools to establish staff numbers were correct to meet people's needs. We received mixed views regarding staffing levels from people, relatives and staff. One person said, "They were in a bad way over Christmas, people ringing in sick all the time so the ones here were rushing about and didn't have time to breathe. They must walk a hundred miles a day, it seems a bit better since Christmas." Another person commented, "Yes, there are always enough staff." It was recognised that due to COVID-19, there had been some difficulties in recent months, the registered manager monitored this closely.
- A recruitment drive was in place to fill any shortages, including activities staff. The director of operations said the company was committed to ensuring enough staff were in place and would continue monitoring the situation closely.

Preventing and controlling infection

- The provider had effective procedures in place to avoid risks posed by infection, particularly regarding COVID-19. Staff training had been completed to keep people safe and refresher training was to be completed to ensure staff continued to follow best practice.
- Staff wore personal protective equipment (PPE) correctly and social distancing at break times was maintained. Stocks of PPE were plentiful.

Assessing risk, safety monitoring and management

- People had personalised risk assessments which gave clear guidance to staff on how to support people to mitigate any risks identified. We discussed with the management team, a very small number which would benefit from additional information which they said would be reviewed.

- Each person had a personal emergency evacuation plan which detailed the level of support required to evacuate them safely in the event of an emergency.
- Safety and equipment checks were regularly completed.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and people looked comfortable at the service. Relatives confirmed this and one said, "To the best of my knowledge the care is really good, we Skype and there is no mention of a problem with care." One person told us, "Yes [feel safe], including COVID precautions."
- Staff knew how to recognise the signs of potential abuse through training they had received and knew how to report and record their concerns.

Learning lessons when things go wrong

- Accidents and incidents were recorded and reported. They were reviewed by the management team and checked for any patterns or ways improvements could be made to reduce them.
- The chief executive officer confirmed they shared any internal learning with staff teams across all of their homes.

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 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.

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

- Staff were dedicated in providing person centred care to people. One person said, "They [care staff] are brilliant. I feel that they are more friends than staff."
- Person centred care records were in place to show staff how people preferred to have their care needs met. Some people were unable to move on their own accord and staff were required to reposition them to ensure good circulation was maintained. We observed staff undertaking this task, but it was not always recorded fully. We raised this with the management team who addressed it immediately and were to further review this with the staff team.
- The registered manager and management team assisted us throughout the inspection.

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; Continuous learning and improving care

- The provider understood their obligations in relation to duty of candour, including being open and transparent when incidents had occurred.
- Quality assurance processes were in place to identify areas for improvement. We discussed the minor issues we had found during the inspection with the provider and they confirmed that any issues found had been addressed immediately. They also said they were going to review systems and take any learning to further improve the service, which included sharing across other services within the company including those rated as outstanding.

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

- The registered manager had been in their current post for approximately seven months having previously been the deputy manager at the service. The provider confirmed a new deputy manager had recently been appointed and was due to start soon. The service was supported by a strong provider management team.
- Staff handovers were detailed to ensure any key information was passed on between shifts.
- Staff were supported to learn and improve their skills and knowledge. One staff member said, "Training has been good."
- The registered manager had oversight of people's care needs. Care records were in the process of being further reviewed to ensure they were fully up to date.
- The registered manager reported any legally notifiable incidents to the CQC and local authority.

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

- People's individual characteristics were considered when planning for their care and support.
- Visiting was not carried out as normal due to the government restrictions and current lockdown in place. This had proved extremely challenging for some people and their families. The provider had installed secure areas within the café area of the service and window visits still carried on. Staff supported people and their relatives with video calls to each other to enable engagement to continue whilst keeping people safe.
- Staff felt supported and staff meetings had taken place, although due to COVID-19 not as regular as usual. Staff felt they would benefit from further meetings being held. We shared this information with the provider to address.
- Feedback from relatives and people had been requested to further develop the service. One relative commented, "The management have shown their professionalism at all times. The carers are doing a wonderful job." Another commented, "We received regular facetime (video calls) calls and videos of (person) participating in activities."

Working in partnership with others

- Staff at the service worked in partnership with local GP's, community and specialist nurse teams, local authority staff and other external healthcare professionals to ensure good outcomes for people.