

Eversley Care Home Limited

Eversley Rest 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

Eversley Rest Home is a residential care home providing personal care to 23 people aged 65 and over at the time of the inspection. The service can support up to 28 people.

The home provides accommodation across two floors. People have access to various communal areas and a secure garden area. The home supports people with a range of needs including support for people living with dementia.

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

The governance systems in the home had improved and people's care was reviewed in a more effective and robust way.

People were protected by the risk of harm by staff who had received training and were confident in speaking up, if concerned. People were supported by sufficient numbers of staff who understood people's risks and how to support them appropriately.

People received their medicine on time and the correct infection prevention and control measures were in place. We were assured the provider was following national guidance in response to the COVID-19 pandemic.

A culture of learning lessons when things went wrong was observed and people, staff and relatives were able to contribute to discussions about what was needed. The provider understood their regulatory responsibilities and acted upon their duty of candour.

The culture in the home was positive and we saw evidence of continuous improvement and working with other professionals.

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 10 October 2018)

Why we inspected

We received concerns in relation to staffing levels and the potential impact that had. 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 the same. 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 COVID-19 and other infection outbreaks effectively.

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.

Eversley Rest 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

The inspection was carried out by two inspectors.

Service and service type

Eversley Rest 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. However, they were in the process of deregistering and a new manager was in the process of registering. The registered manager 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

Prior to the inspection we reviewed information we held about the service since the last inspection. 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.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with seven members of staff including the provider, manager, senior care workers, and care workers. We observed people and staff within the communal areas interacting with one another.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. We also looked at a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Eversley Rest Home and were protected from the risk of abuse. One person said, "I feel quite safe living here."
- The provider had effective systems in place to manage safeguarding concerns and ensure investigations were completed promptly. Notifications were submitted to the relevant bodies and any outcomes were shared with the staff team as needed.
- Staff received training in safeguarding adults from abuse and could explain how to recognise and report anything which concerned them. One staff member told us, "I am aware there is a whistleblowing policy in place, and we could go to other agencies if we were not happy with how the managers dealt with something." This meant people could be confident staff knew how to speak up if something was wrong.

Assessing risk, safety monitoring and management

- Risks to people's safety were assessed and risk reduction strategies were implemented by the staff team. For example, people were observed being hoisted safely and in line with their care plan. Staff were able to describe who needed support with dietary needs and access to a specialist diet. This demonstrated staff were aware of people's individual needs and how to keep them safe.
- Checks to the safety of the building and any equipment used were carried out on a regular basis. This included checks to fire safety, electrics, water temperature and window restrictors. Where issues were identified plans were in place to remedy. For example, a chair to support people get in and out of the bath needed replacement. We received confirmation the chair was on order and would be replaced shortly.
- Emergency equipment was located around the home such as call bells, fire evacuation chairs, and first aid supplies. This ensured people and staff had access to equipment which would help them in an emergency.

Staffing and recruitment

- People were supported by sufficient numbers of staff. At the last inspection we found the staff dependency tool was not being consistently used. At this inspection we found the tool was being used and the hours delivered were often above what the tool suggested. This showed us the staffing levels were being calculated based on people's presenting needs.
- One person told us, "There is always enough staff around to help us." Some staff told us they would like more staff, but all confirmed people had their needs met within the current ratio. One staff member said, "It is busy, but we are never short of staff and people always get their needs met."
- Staff were recruited following the application of recruitment checks which included looking at their character, background and qualifications. We found one new recruit who had not documented their full employment history. The provider acted immediately and acquired this information. This ensured only staff who were suitable to work with vulnerable adults were employed.

Using medicines safely

- At the last inspection we were not confident the medicine audit process was identifying medicine errors. At this inspection we found there was a more robust audit process which did identify if any medicine errors had occurred. When errors had occurred, investigations took place and the appropriate action was taken to ensure errors were not repeated. One staff member told us, "We monitor the medicines closely and we follow up on any issue we find straight away."
- People received their medicine from staff who were trained in safe administration and received regular competency checks to ensure their practice remained safe. We observed staff spending time with each person to ensure they took their medicine safely and did not feel rushed in anyway. One person told us, "Staff are always on time with my medicine and keep track of what I need."
- People's medicine was stored securely, and all the necessary processes were in place to ensure people's medicine was kept in line with national guidance. For example, temperature checks and controlled drug counts were completed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
 - We were assured that the provider was meeting shielding and social distancing rules.
 - We were assured that the provider was admitting people safely to the service.
 - We were assured that the provider was using personal protective equipment (PPE) effectively and safely.
 - We were assured that the provider was accessing testing for people using the service and staff.
 - We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
 - We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
 - We were assured that the provider's infection prevention and control policy was up to date.
- People, relatives and staff had been asked their view of how the home was managing during the pandemic. Feedback received was positive regarding the home's cleanliness, training and access to PPE. A visitor's pod had been installed in the property to enable people to maintain contact with others. This meant the home was working within national guidance to ensure people were safe.

Learning lessons when things go wrong

- Reviews took place when something went wrong, and action was taken to mitigate the risk of future harm. Staff reported on actual incidents as well as near misses and informed families and professionals when something happened. This demonstrated an openness which allowed others to share their views on what should happen next.
- We found accident and incident forms were analysed by the management team and records maintained of actions required and when these needed to be completed by. For example, when retraining was required for staff or new equipment ordered. Staff were able to explain to us the process the managers followed and how they were updated when changes were made.

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.

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

- At the last inspection we found the governance processes in place were not always robust. At this inspection we found significant improvements had been made.
- The governance systems used ranged from observational audits of mealtimes to care plan audits, health and safety checks, and accident form reviews. The provider identified necessary actions and ensured these were completed in a specified time scale.
- Both the provider and the manager demonstrated a clear vision for the service. Both commented on how well they worked together and shared similar priorities for moving forward. This meant there was a shared view on quality performance and focus for the future.

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

- People were observed settled in their environment and the atmosphere was calm and relaxed. People were able to socialise together and interact with staff. One person said, "It's very nice here, the people are nice, and staff can't do enough for you." Another person said, "The staff are all very nice here, there isn't one I don't like."
- Staff told us they found the managers approachable and the culture in the home was good. One staff member said, "I am happy working here, I enjoy it and am treated well."

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 was aware of and acted upon their duty of candour. We reviewed accident and incident forms and saw evidence of families being contacted when things went wrong.

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

- People, relatives and staff were kept engaged with the service and their feedback was sourced via various avenues. At the time of inspection questionnaires had recently been sent to all and we reviewed the feedback received. One relative commented that since the new manager had been appointed, they receive regular updates on their relative's health and wellbeing.
- People confirmed they were asked their views on a regular basis. One person told us, "They do meetings and surveys and give us lots of opportunity to feedback."

- Staff confirmed they were also consulted and had the opportunity to speak with managers whenever needed. One staff member said, "We are always listened to and I have no concerns."

Continuous learning and improving care

- We found several examples of continuous learning and improvements to the care people received. The increased governance in the home highlighted improvements which had been undertaken. These included increased supervisions, the sharing of best practice, and the purchase of new equipment.
- Plans were in place for future improvements based on suggestions made by others. For example, a hot food trolley was to be ordered following feedback from people about mealtimes. This evidenced the processes in place were focused on increasing the quality of care people received.

Working in partnership with others

- The provider worked in partnership with others. We saw frequent references to external agencies who worked alongside people and supported the home in general.
- One professional told us, "The management team follow guidance and seem open to suggestion. We have worked well together." This meant people were able to receive joined up care and consistent support from all those involved in their care delivery.