

Gradestone Limited

Harmony House Nursing Home

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Harmony House Nursing Home is a care home providing nursing and personal care for up to 33 people. The service provides support to adults living with mental health conditions. At the time of our inspection there were 26 people using the service.

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

This was a targeted inspection that considered the leadership and culture of the service, the management of people's privacy and finances, people's welfare and staff training.

People told us they were happy at the service. Infection prevention and control processes had improved, but further and sustained improvement was needed. Systems were in place to manage people's money safely and safeguard them from abuse.

The provider was working on improving training. Some staff said induction support could be improved, and the provider said they would review this. People were supported to have diets they enjoyed.

People spoke positively about the leadership of the service. Some staff said they were not always supported to give open feedback to the registered manager.

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 25 January 2023) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made in infection prevention and control practice and the provider was no longer in breach of regulations in relation to that. The other breaches of regulation were not reviewed during this inspection.

Why we inspected

We undertook this targeted inspection to check on specific concerns we received about the leadership and culture of the service, the management of people's privacy and finances, people's welfare and staff training. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all

areas of a key question.

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.

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

Recommendations

We have made a recommendation about the provider's staff feedback systems.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service effective?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Harmony House 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 Health and Social Care Act 2008.

This was a targeted inspection to check on specific concerns we received about the leadership and culture of the service, the management of people's privacy and finances, people's welfare and staff training.

Inspection team

2 inspectors carried out this inspection.

Service and service type

Harmony House Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Harmony House Nursing Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service about their experience of the care provided. We spoke with or gathered feedback via email from 14 members of staff including the registered manager, nominated individual, care and domestic staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check concerns we had about the management of people's privacy and finances and people's welfare. We will assess the whole key question at the next comprehensive inspection of the service.

Preventing and controlling infection

At our last inspection effective infection prevention and control systems were not in place. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12 in relation to infection prevention and control, though further and sustained improvement was needed.

- The provider had started redecorating and renovating the service, which would repair damaged paintwork and defective chair coverings. This allowed more effective cleaning to take place.
- Communal corridors had been cleared of clutter, which allowed them to be cleaned more effectively.
- Visiting was taking place in line with current government guidance.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to ensure people's finances were managed safely. Records were kept to monitor people's finances and ensure they were not abused.
- People told us they were happy and treated well at the service. One person told us, "The staff are really good and go out of their way to make sure we are alright. You couldn't ask for better."

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the effective key question at this inspection.

The purpose of this inspection was to check concerns we had about people's welfare and staff training. We will assess the whole key question at the next comprehensive inspection of the service.

Staff support: induction, training, skills and experience

At our last inspection we recommended the provider review their training policy in line with current best practice to ensure all relevant training is delivered and knowledge and understanding can be demonstrated. The provider had made improvements, but further and sustained improvement was needed.

- The provider was reviewing staff training to ensure staff had the knowledge and skills needed to carry out their roles.
- Staff joining the service received induction training. Some staff we spoke with said this process was not always effective at ensuring staff had the knowledge and confidence needed to do their jobs. We spoke with the registered manager and nominated individual about this, who said the induction process would be reviewed.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink from a menu that reflected their choices and preferences. People said they enjoyed the food at the service.

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 our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check concerns we had about the leadership and culture of the service. We will assess the whole key question at the next comprehensive inspection of the service.

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

- Systems were in place to ensure people's privacy was usually protected in line with regulatory requirements. However, staff sometimes used their personal telephones for work purposes. We discussed this with the nominated individual and registered manager, who said new work telephones had been purchased and were being set up for staff use.
- People spoke positively about the management of the service and said they were happy living there. One person told us, "It's champion here."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Most staff we spoke with said there was a positive culture in the home. For example, one member of staff told us, "I think the management is excellent. The management listens and takes action on the concerns of the staff and residents." However, some staff felt they were not always able to approach the registered manager or provider to discuss their concerns, or that if they did these were not acted on.

We recommend the provider reviews their feedback systems to ensure all staff are engaged and able to contribute their views.