

Yew Tree Care Limited

# Churchfields Nursing Home

## Inspection report

37 Churchfields  
South Woodford  
London  
E18 2RB

Tel: 02085592995  
Website: [www.churchfieldscare.co.uk](http://www.churchfieldscare.co.uk)

Date of inspection visit:  
27 January 2021

Date of publication:  
19 February 2021

## Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	<b>Inspected but not rated</b>

# Summary of findings

## Overall summary

### About the service

Churchfield Nursing Home is a residential care home providing personal and nursing care to 23 people at the time of the inspection. Most people living at the service were older people some of whom had dementia. The service can support up to 32 people.

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

Since our last inspection, improvements had been made with premises' safety. Actions had been completed to ensure the building was safe in the event of a fire, new flooring was being laid and the lighting was switched on throughout the home.

Risk assessments had also been completed for people at risk of falls and malnutrition in addition to people's health conditions. This included control measures, referral to professionals when required and monitoring the risks. People's nutrition and hydration risks were recorded appropriately, and staff followed care plans and health professional's advice.

Infection control procedures had been enhanced due to the risk of COVID-19 and we observed the service was clean and a cleaning schedule was in place. Personal protective equipment (PPE) was readily available and people and staff were tested regularly to help prevent the spread of infection.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 30 August 2019).

### Why we inspected

The inspection was prompted in part due to concerns received about the management of falls and nutrition and hydration. This inspection examined those risks. We found no evidence during this inspection that people were at risk of harm from this concern. We also looked at infection prevention and control measures. 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. Please look at the Safe question of this part of the report.

The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on specific 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Churchfields Nursing Home on our website at [www.cqc.org.uk](http://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?**

This key question has not been rated.

Details are in our safe findings below.

**Inspected but not rated**

# Churchfields 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.

This was a targeted inspection on a specific concern we had about the management of people at risk of falls and malnutrition. 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 one inspector and an expert by experience. An Expert by Experience (ExE) is a person who has personal experience of using or caring for someone who uses this type of care service. The ExE made telephone calls to people and their relatives after our inspection.

#### Service and service type

Churchfields is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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

We gave the service short notice on the day of the inspection. This was because we wanted to let the service know we were coming and also to get an update about the incidence of COVID-19 infection in the home.

#### What we did before the inspection

We reviewed the information we already held about this service. This included details of its registration, previous inspection reports and any notifications of significant incidents the provider had sent us. We

sought feedback from professionals who work with the service. We used all of this information to plan our inspection.

#### During the inspection

We reviewed a range of records. This included five people's care records and risk assessments. This also included food and fluid charts. We looked at infection control audits. We spoke with the provider, administrator and two staff.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found such as policies and actions plans. We spoke to four people who used the service, five relatives of people who used the service and two staff members by telephone.

# 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about. As part of this inspection, we also looked at the infection control and prevention measures in place. We will assess all of the key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

At our last inspection, we found some areas needed improving to keep the premises safe. We found the home was poorly lit and there was a notice stating lights to be switched off if not needed. We also found fire risk assessments actions not completed and fire drills not carried out regularly. During this inspection, we found improvements had been made.

- Actions arising from the fire risk assessments had been completed and weekly fire drills had been carried out. The lights inside the home was on throughout the home and new flooring had been laid. Premises safety checks had also been carried out by qualified professionals to ensure the premises were safe to live in. A relative told us, "I think my relative is safe in the home because they are always doing fire checks and cleaning constantly. They have upgraded the infrastructure. There are lots of care assistants and its extremely safe. [Person] has staff around [person] all the time."
- Risk assessments had been completed for people at risk of falls. Falls risk assessments included information on how to minimise the risks of falls. For people that required a falls sensor mat next to their beds to monitor their movement, we observed that this was in place. A staff member told us, "I find the risk assessments very helpful, it helps us to do our role. To minimise risk of falls, we have to make sure surroundings is clear and we have to keep an eye on [people] because they are fragile and vulnerable, so we monitor them especially when they are walking or standing. If there is any spillage, we have to clean so it does not trigger a fall." A relative told us, "I think the staff do an excellent job. I am quite impressed with them really."
- Risk assessments had also been completed for people at risk of malnutrition. People's weight were monitored monthly and where there were concerns, referrals had been made to dieticians. For people on fortified meals, a chart was in place to ensure they were receiving their fortified meals as required. People that required their nutrition's to be monitored, a food and fluid chart was in place, which was being completed accordingly. A staff member told us, "For people that find it difficult to eat, we have food and fluid charts. Normally, if we give anything, we have to record it. At the end, I do a total of what they had, if it is low, I inform the nurse and sometimes we give them nourishment, it contains all the nutrients, or we refer them to a professional."
- People told us that they received safe care. A person told us, "I feel the staff know me and my condition, they care for me." Another person commented, "I am fine here. The staff are very friendly and I am protected. I have no problems." A relative told us, "[Person] is well cared for, it's very homely and [person] is always included." Another relative told us, "I am absolutely over the moon, [staff] are such nice people. Everybody is nice but most importantly, they have the resident's interest in their heart. It's a lovely homely place. [Person]"

is so happy and well looked after."

#### 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 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 and relatives told us the home adhered to infection control practices. A relative told us, "The home is well managed and very clean." Another relative commented, "Yes, [person] has had infections but these have been managed well and the staff at the home have communicated well with me." A person commented, "When the staff come in to my room, they are usually wearing an apron and other PPE 24/7." A staff member told us, "We got more than enough PPE, we receive this every week. We have been trained on how to wear it."