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Eagle House Care Home

Inspection report

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Overall summary

Eagle House Care Home provides personal care and support to up to 40 older people some of whom are living with dementia. The service is centrally located in the town close to local facilities. On the day the follow up inspection took place, there were 23 people living in the service and two people using the day care service.

This inspection was unannounced and undertaken on 7, 8 and 25 January 2016. We had previously inspected the service in September 2015; it was rated as Requires Improvement overall but we issued three requirement notices for breaches in regulations for staffing, maintenance of the environment and governance. We also issued a warning notice for the breach in regulation for maintaining standards of hygiene (this was a continued breach as concerns were first identified at the inspection in January 2015). The acting manager sent an action plan in response to this inspection telling us what measures the registered provider was going to take in order to address the issues. The inspection visit was to check the improvement action taken in respect of staffing and standards of hygiene had been sustained, that staffing levels were sufficient to meet the needs of people who used the service and Eagle House was clean and fresh. The findings of this inspection have not changed the service's overall rating; however it did improve the rating of the specific question 'Is the service Safe?' from 'Inadequate' to 'Requires Improvement'.

The service is required to have a 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 2008 and associated Regulations about how the service is run. The registered manager was not present during our inspection. The deputy manager had been appointed to the role of acting manager in May 2015 and was present throughout the inspection.

We found improvements had been made to the standards of cleaning and hygiene throughout areas of the service and further improvements were made during the inspection. To support more effective hygiene practices in the service, we found new furniture, furnishings, bedding and flooring had been provided. A new quality audit tool and more comprehensive cleaning schedules and systems of daily checks had been put in place which helped the acting manager to monitor the standards of hygiene in the service and identify any shortfalls.

The care staffing levels were further reviewed and increased during our inspection and we found there were sufficient staff on each shift to meet people's individual needs and support them safely. New dependency assessments had been introduced and the information was used to inform the staffing calculations. One person

Summary of findings

was now provided with one-to-one support. The domestic hours had been increased and new care, domestic and laundry staff had been recruited. Two new senior care staff had been appointed and 16 (supernumerary) hours were provided to senior care staff

to assist the acting manager with her role. The acting manager confirmed they were in the process of recruiting a new activity co-ordinator to facilitate the activity programme.

We are keeping these areas under review and monitoring them to make sure the improvements are consistent over time.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

We saw improvements had been made, and have changed the rating from inadequate to requires improvement for this key question; however we could not rate the service higher than requires improvement for 'safe' because to do so requires consistent improvement over time. We will check this during our next planned comprehensive inspection.

Improvements had been made to the standards of cleaning in all areas of the service. More comprehensive cleaning schedules and systems for checking the home was clean and hygienic had been put in place. Additional domestic hours, new furniture, flooring, bedding and equipment had been provided.

Staff were employed in sufficient numbers to meet people's assessed needs. The lunchtime meal service had improved. An activity co-ordinator was being recruited.

Requires improvement



Eagle House Care Home

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 was planned to check whether the registered provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008. The findings from this inspection did not affect the overall rating of the service, which was 'Requires Improvement', however it did improve the rating of the specific question 'Is the service Safe?' from 'Inadequate' to 'Requires Improvement'.

The unannounced follow up inspection was undertaken by two adult social care inspectors.

We spoke with the acting manager, registered manager of a nearby service operated by the registered provider, two domestic staff, laundry assistant, cook and kitchen assistant, six care workers, two senior care workers and a maintenance person.

We also spoke with two people who used the service, five relatives and three visiting health care professionals about the staffing levels and standards of hygiene at the service.

We toured the premises and checked documentation in relation to staffing rotas, care records, food safety records, cleaning schedules and quality audits.

Is the service safe?

Our findings

People we spoke with told us they liked the staff and there were enough staff to help them. Comments included, “They [the staff] are all nice and helpful. Yes, I think there are enough staff” and “The staff are very busy but they have time to help me when I need them.”

We asked people visiting the service about the staffing levels and standards of hygiene. Comments from relatives included, “We have found it excellent. Always staff to hand at any visits. Mealtimes always appear very busy though”, “Staff always make themselves available, they are very patient, caring and welcoming”, “Think it’s spotlessly clean”, “Generally satisfied with the cleaning”, “Haven’t noticed more staff about”, “Can’t believe the changes in the home, very positive changes”, “I think there are enough staff now, they can keep an eye on the people that wander around and those that get upset. The home is clean, I haven’t noticed any smells”, “Staffing is better now and it is much cleaner, the cleaner does a good job the staff need to monitor people to make sure they don’t spill things over the floor- that’s the problem.”

Comments from healthcare professionals included, “Could do with a bit of a face-lift in some areas, rooms are usually tidy and odour free. Staff are very helpful”, “This home is very busy but staff make time to support our visits” and “It’s much cleaner and odour control has improved a lot. They do need bigger clinical waste bins.”

At the last inspection on 2 and 7 September 2015, we found the systems to protect people who used the service from risk of infection were still not effective. This meant there was a continued breach in Regulation 12 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2014. Areas of the home were dirty, malodorous and unhygienic and we issued a warning notice. Following the inspection we contacted the community clinical nurse specialist for infection prevention and control (IPC) who visited the service and completed a detailed audit on the 15 October 2015. They found shortfalls in 13 of the 18 areas they assessed. An action plan was put in place and the clinical nurse specialist revisited the service and completed a further audit on 20 November 2015. Overall, they found significant improvements had been made and plans were in place to address some areas of outstanding action.

At this inspection we found many improvements had been made since the last inspection in September 2016. The policies and procedures for IPC had been reviewed and revised in October 2015. Staff had completed refresher training in IPC. We found equipment such as wheelchairs, hoists, commodes, bed pans; urinals and crash mats were clean. A regular steam cleaning programme had been put in place to deep clean areas of the home and equipment. A different floor cleaner was now in use and flooring appeared less ‘sticky’. New laundry equipment had been provided and the laundry assistant confirmed the two new washing machines and dryers meant they could process the laundry more efficiently without a backlog, which was observed during the visit.

The national colour coding system for cleaning had been implemented throughout the service, this included signage on equipment when ready for use and posters to remind staff. Other new equipment such as wash bowls, pedal bins, toilet seats, mops and buckets had been provided. All equipment was stored appropriately.

The kitchen areas were all checked and found to be clean. Records relating to safe food management including cleaning were maintained and up to date. The kitchen facilities were inspected in January 2016 and the service retained their five star rating from North Lincolnshire Council.

The acting manager had implemented a new, more comprehensive IPC audit tool and the records of the audit completed on 19 December 2015 showed overall positive results. They were also completing focused audits of each person’s furnishings, bedding and personal clothing. We found the domestic hours had increased and new cleaning schedules had been put in place, but some of the records did not contain all the tasks staff needed to complete. For example, the acting manager confirmed it was the responsibility of the domestic staff to clean the baths but this was not listed in the records in the bathroom. Similarly, we found the care staff completed daily checks of mattresses, commodes, beds, bed rails and bumpers, falls mats and wedges but they were not checking the bed linen in bedrooms. During our tour of the service we found a number of items of linen and bedding were soiled or stained. Two bedrooms had odours of stale urine and damaged flooring in bedrooms and communal areas had not been replaced.

Is the service safe?

We arranged a management review to discuss the findings of the inspection. We received confirmation from the registered provider that they had visited the service and were taking action to make the necessary improvements to address the continued shortfalls. We visited the service for the final day of the inspection on the 25 January 2016 and found improvements had been made to replace the flooring in the two bedrooms which had mal odours and new flooring was scheduled to be fitted in the communal areas, further bedrooms and the service corridors within the next four weeks. We also found more new bedroom furniture and bedding had been provided; all beds we checked were made up with clean bedding.

At the last inspection in September 2015 we also found there was insufficient staff on duty to meet people's needs safely. This meant there was a breach in Regulation 18 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2014 and we issued a requirement notice. At this inspection we found new cleaners had been employed to provide an additional eight hours cleaning for five days each week. Two new senior care staff had been appointed to assist the acting manager and they had been given 16 (supernumerary) hours to provide management and administrative support. They had received training and support to complete care plans and the staff supervision programme. Four new care workers had been recruited and a new laundry assistant was appointed to replace the one who had resigned.

The acting manager confirmed they had not been successful with appointing an activity co-ordinator within the staff group and they were in the process of recruiting to this role. Records showed staffing levels of one senior care worker and four care workers were maintained during the day and at night there was one senior and two care workers on shift. We found some improvements had been made to increase the number of care staff on duty during the day in December 2015, but these had not been maintained over the Christmas period and resumed in January 2016. The acting manager confirmed they had not yet completed people's dependency levels which could help inform the calculations of staffing levels for the shifts.

The acting manager confirmed they had reviewed the lunchtime arrangements following the last inspection and

had implemented two sittings. However, during the inspection on the 7 and 8 January 2016 we found the meal service was disorganised and some people did not receive support in a timely manner.

We observed one person who used the service had very complex dementia related needs and demonstrated behaviours which challenged the service. We observed they regularly wandered around the service and were at risk of falls; we observed staff were struggling to monitor this person effectively.

We discussed the current staffing arrangements at a management review meeting. We received confirmation from the registered provider that the care hours had been increased throughout the day shift, the continued absence of the registered manager was being followed up, recruitment of an activity co-ordinator would be prioritised and additional hours provided to senior care staff to provide more assistance for the acting manager.

We visited the service for the final day of the inspection on the 25 January 2016 and found the number of care workers on day shifts had increased to one senior care worker and five care workers. We observed the care staff were providing one- to-one support for a person with complex needs. The acting manager confirmed they had attended a review meeting with the commissioners to discuss the person's placement and further assessments were planned by the community healthcare team.

We found staff had time to spend with people and the routines were much more settled and calm. The lunch time arrangements had been further reviewed and we observed the meal service was organised and people were supported appropriately. A new activity co-ordinator had been recruited and would be commencing work pending satisfactory police checks and references.

Staff confirmed the standards of cleaning in the service had improved significantly and they had enough time to carry out their duties safely and effectively. Comments included, "The extra member of staff on each day has made such a difference. We have time to spend with people and monitor them properly", "Things are much better here now", "Staffing levels are much better now, it's much safer", "The new furniture, flooring and equipment has helped us keep things much cleaner. There have been some major improvements with this."