

## Countrywide Care Homes Limited

# Gateford Hill Care Home

### Inspection report

Gateford Hill  
Gateford  
Worksop  
Nottinghamshire  
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Tel: 01909475402

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### Ratings

#### Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

About the service: Gateford Hill Care Home is a care home that provides accommodation with nursing and personal care for up to 66 older people and younger adults with physical disabilities. On the day of our visit there were 52 people using the service.

People's experience of using this service: People told us they were happy living at the service. Relatives were also positive. One family member told us, "The staff here are really good. They try their best and visitors are made welcome as well. I've only ever seen kindness."

Staff recruitment was safe. There was enough staff on duty at the right time to enable people to receive care in a timely way. Staff had appropriate skills and knowledge to deliver care and support in a person-centred way. They understood how to keep people safe and used information following accidents and incidents to reduce the likelihood of future harm.

People told us care staff were caring, supportive and kind. We observed staff members supporting people in a dignified and confidential manner. There was also lots of laughter and fun and people and their relatives said they enjoyed positive relationships with the staff team. The environment was tired in some areas and the registered manager explained there was an ongoing refurbishment programme in place.

People told us they were happy with the food. We saw that people with specific dietary needs were well catered for and the chef had detailed records to ensure people's needs were met. The registered manager agreed to review the use of TVs and radios at mealtimes.

Care plans were detailed but focussed on healthcare needs. We discussed with the registered manager how plans could be made more person-centred, meaning people were at the heart of how they wanted their care and support to be provided. There was a lack of life history information and goals and outcomes people wanted to achieve. The registered manager agreed to explore this further with their regional director.

We saw staff upheld and promoted people's rights relating to equality and diversity. People told us that staff treated them respectfully and without judgement. People participated in a range of activities that met their individual choices and preferences.

The service was well run. The management carried out lots of checks to make sure that the service was safe and of a good quality. People had good relationships with the staff team. The registered manager and senior team led the staff team in their roles and ensure people received a good service. People, their relatives and staff all felt confident raising concerns and ideas. All feedback was used to make continuous improvements to the service.

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

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Rating at the last inspection: The service was rated as good and the report was published in August 2016.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 effective?

Good ●

The service was effective.

Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service required improvement to be responsive.

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

# Gateford Hill 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 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspector and an Expert by Experience carried out this inspection. An Expert by Experience is someone who has experience of using or supporting someone to use this type of service for older people.

Service and service type: The service is a 'care home'. People in care homes receive accommodation and nursing or personal care. The Care Quality Commission (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 inspection: We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During and after the inspection: We spoke eight member of staff including the registered manager, the deputy manager, an administrator, a senior care worker, the chef, activity co-ordinator and three care staff members. We spoke with seven people and four visiting relatives and spent time observing the environment.

This included five people's care records. We looked at multiple records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Staffing and recruitment.

- Staffing levels were appropriate and ensured people received responsive care and support. Staff were deployed in consistent areas which meant people got to know them well and they could engage more effectively with families.
- Staff were attentive and sat with people in communal areas.
- People received care in a timely way. One relative said, "They are not short staffed – at least from what I've seen. I've never had to go looking for somebody. There is always a staff member around." People said, "They come straight away if I need them", and "They come quickly. They don't keep me waiting."
- The provider operated a safe recruitment process and carried out relevant security and identification checks when they employed new staff.

Assessing risk, safety monitoring and management.

- Staff understood where people required support to reduce the risk of avoidable harm.
- Care plans described what was needed to keep people safe; records for risk such as nutrition and pressure care were all up to date.
- The environment and equipment had been assessed for safety. There were plans in place to ensure people were supported in the event of an emergency.

Learning lessons when things go wrong.

- The management team demonstrated they were learning lessons from accidents and incidents. The registered manager told us how they had led a full team debrief meeting following a safeguarding incident to look at what the service could learn from the event and make improvements on.

Safeguarding systems and processes, including recruitment.

- The provider had effective safeguarding systems in place; staff had a good understanding of what to do to make sure people were protected from harm or abuse. Staff had been trained in how to protect vulnerable people and demonstrated a good awareness of safeguarding and whistleblowing procedures.

Using medicines safely.

- Medicines were safely received, stored, administered and disposed of when no longer needed.
- Staff were knowledgeable about people's medicines. Staff who administered medicines were trained and were required to undertake an annual competency assessment. Medicine checks were up to date.
- People were happy with the support they received to take their medicines.

Preventing and controlling infection.

- Staff followed good infection control practices and used equipment to help prevent the spread of

healthcare related infections.

- The environment was clean.

# Is the service effective?

## Our findings

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

People's outcomes were consistently good, and people's feedback confirmed this.

- Staff were competent, knowledgeable and skilled, and carried out their roles effectively. Their knowledge and skills were checked through supervision and team meetings.
- Staff completed a comprehensive induction and had access to a wide range of training. They had the opportunity for regular supervision and appraisal. Nurses were provided with specialist training and then shared this knowledge amongst the staff.
- People and relatives told us, "They're all very nice with us," and "The staff are very good, and they are very quick to help people when they try to get up from the chair."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law.

- Assessments of people's needs were thorough. Care plans were detailed. Care and support needs were reviewed regularly to understand progress and make changes where needed.

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

- People had choice and access to sufficient food and drink throughout the day; food was well presented and people enjoyed it.
- Feedback about the food was mixed. Most people were happy with it and enjoyed their meals whilst others felt the menu was repetitive. One person reported a recent improvement.
- People had equipment to help maintain their independence with eating their meal and drinking.
- Staff knew about people's special dietary needs and preferences. Chef held information about people's dietary needs; they met with everyone and had a list of their likes and dislikes. One person had requested a ribeye steak and that had been prepared for them.
- The registered manager agreed to address the issue of radios and TVs playing in communal areas. One person we spoke with said, "Nobody every asks us. It's not for us, it's the staff who like it."

Supporting people to live healthier lives, access healthcare services and support. Staff working with other agencies to provide consistent, effective, timely care.

- People had access to a range of healthcare professionals to ensure they remained healthy.
- Where people needed support from healthcare professionals this was arranged and staff followed the guidance provided. Information was shared with other agencies if people needed to access other services such as hospitals.

Ensuring consent to care and treatment in line with law and guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to

take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The registered manager followed the principles and guidance related to MCA and DoLS authorisations. They were working with staff to make sure mental capacity assessments were completed appropriately. We saw evidence of court appointed legal authority to act on behalf of people was copied and securely stored.
- People were always asked for their consent. They said, "They always ask me if it's okay." We saw that staff asked for consent first and explained what they were doing. For example, before they used the hoist and offering support with medicines.
- Staff ensured that people were involved in decisions about their care and knew what they needed to do to make sure decisions were taken in people's best interests.

Adapting service, design, decoration to meet people's needs.

- The layout of the building provided adequate space for people with walking aids or wheelchairs; the home was suitable for the people who used the service.
- Some areas on the first floor were scuffed and in need of fresh paintwork. The registered manager told us this area was next to be refurbished.
- We raised that signage, tactile displays and coloured doors could be improved to help support people living with dementia to orientate themselves. Due to its age, the building was complex and difficult to navigate the corridors where bedrooms were located.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity.

- The registered manager supported people's human rights and promoted equality and diversity.
- Staff were kind, caring and friendly and interactions were warm. Comments from people included, "I can't praise them enough. They are absolutely smashing", and "They are lovely people. There is always somebody who will come into my room and have a bit of a laugh with me."
- People did feel they were treated fairly and were free from discrimination. They were able to discuss any needs associated with their culture, religion and sexuality. One person said, "There is always someone who will take me out for a cigarette if I want one. They don't stand in judgement."
- Staff showed genuine concern for people's wellbeing. People were supported to make decisions about their care'. 'The staff knew their communication needs and included these in people's care plans; they could recognise when someone needed help'

Supporting people to express their views and be involved in making decisions about their care.

- Staff supported people to make decisions about their care. They understood people's communication needs and this was documented in care plans.
- Families were fully involved in all aspects of the home; they could visit anytime and were welcomed. One family member told us, "The staff here are very good. A lot of them have been here for many years and are older people which makes a difference. People are more familiar with them."
- Information about advocacy services was available; when needed, people could access these services.

Respecting and promoting people's privacy, dignity and independence.

- The staff explained how they maintained the privacy and dignity of the people they cared for and told us that this was a fundamental part of their role.
- People's privacy and dignity were respected; staff knocked on bedroom doors before entering and were careful to close toilet doors when assisting somebody.

# Is the service responsive?

## Our findings

Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- Staff knew people's likes, dislikes and preferences; but their knowledge was not fully reflected in people's care plans.
- People and relatives told us care was delivered in the way they wanted and needed it.
- People were empowered to make choices and have as much control and independence as possible, including in developing care, support and treatment plans. Relatives were involved with people's consent.
- Care plans described people's healthcare needs but we found that they were lacking in relation to personal history and especially for the younger adults there was a lack of people's previous life, skills and goals they wanted to achieve by being at Gateford Hill.
- People's needs were identified, including those related to protected equality characteristics; their choices and preferences were regularly met and reviewed.
- Activities, outings and events were planned and displayed so people were aware. Some people felt activities such as pet therapy and outings had tailed off; the registered manager said the home's minibuses was now back in service so outings would recommence.

Improving care quality in response to complaints or concerns.

- People and relatives knew how to make complaints; they believed they would be listened to. The registered manager acted upon complaints in an open and transparent way.

End of life care and support.

- People were supported to make decisions about their preferences for end of life care; staff empowered people and relatives in developing care and treatment plans. Professionals were involved when needed.
- Staff understood people's needs, were aware of good practice and guidance in end of life care; they respected people's religious beliefs and preferences.
- The service provided specialist equipment and medicines at short notice to ensure people were comfortable and pain free.
- The service supported people's relatives and friends as well as staff, before and after a person passed away. The registered manager was keen to further develop counselling services.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- The service had a welcoming and friendly atmosphere. Staff morale was positive and the atmosphere was warm, happy and supportive.
- The culture of the service was open, honest, caring and focused on people's individual needs.

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

- The service involved people in day to day discussions about their care and support. People told us about separate resident and relatives meetings. They said, "We didn't want 'outsiders' at our meetings."
- The registered manager positively encouraged feedback and acted on it to continuously improve the service.
- Staff felt listened to and that the management team were approachable. One care worker said, "A lot of staff have worked here for many years, it means we all know each other and the people who live here well, it's like a big family house." Relatives spoke highly of management. One said, "The manager and the deputy are very good, and I've never seen either of them without a smile on their faces. They really make this place what it is."

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

- The home was well run and people were treated with respect and in a professional manner.
- Management undertook lots of checks on quality.
- Appropriate reporting had been carried out to alert the CQC and local authorities when incidents occurred.

Working in partnership with others.

- The service had developed links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing. Staff worked well with the palliative care team and were involved in pilot work to use virtual technology training. The registered manager attended local nursing forums.
- People enjoyed good relationships with the staff; staff had in-depth knowledge and understanding of people's needs.