

Newbloom (Dundoran) Limited

Dundoran Nursing and Residential 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

Dundoran Nursing and Residential Home is a care home providing personal or nursing care to up to 39 people living with dementia. At the time of the inspection, there were 26 people living in the home.

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

Staff had received training and their competence had been assessed to ensure people received their medicines safely. Staff were aware of the procedures to administer medicines covertly (hidden in food or drinks). However, the records did not always clearly reflect the process followed and lacked detail.

People's relatives told us their family members received safe care. There were sufficient numbers of safely recruited staff available to support people in a timely way and staff were knowledgeable about safeguarding procedures. Risks to people had been assessed and measures were taken to reduce any identified risks. Infection control arrangements were in place to prevent and mitigate the risk of Covid-19. Appropriate personal protective equipment (PPE) was available and staff used this appropriately in the day to day delivery of care.

Effective systems were in place to monitor the quality and safety of the service. When areas for improvement were identified, actions were taken to address them. The registered manager was working through an action plan to drive improvement.

Feedback regarding the management and quality of service people received was very positive. Staff said they enjoyed their jobs and were well supported. The registered manager was clear about their responsibilities and worked closely with other health and social care professionals to help ensure people's needs were met and the service ran smoothly.

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 15 May 2019) and a breach of regulation was identified regarding unsafe moving and handling practices. 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 and the provider was no longer in breach of regulation.

Why we inspected

The inspection was prompted in part due to concerns received about infection control and moving and handling procedures. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 coronavirus and other infection outbreaks effectively.

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.

We found no evidence during this inspection that people were at risk of harm.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dundoran Nursing and Residential Home on our website at 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?

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.

Dundoran Nursing and Residential 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.

Inspection team

The inspection team included an inspector, an inspection manager and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Dundoran Nursing and Residential 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.

Notice of inspection

This inspection was announced 20 minutes before it began. This was to enable the inspection team to arrange a safe way to access the service and ensure the provider's Covid-19 procedures could be adhered to.

What we did before the inspection

We reviewed information we had received about the service since the last inspection and we sought feedback from the local authority.

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.

We used all of this information to plan our inspection.

During the inspection

We spoke with seven relatives about their experience of the care provided. We spoke with four members of staff, as well as the registered manager.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and policies and procedures. We received feedback from a health professional that works with the service.

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. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At the last inspection the provider was found to be in breach of Regulation 12, as we observed people being supported to be moved and transferred in ways that were not in line with best practice and could cause people harm. During this inspection, we found that improvements had been made and the provider was no longer in breach of regulation.

- Risks to people's health, safety and wellbeing were assessed and managed.
- Staff had completed relevant training to help ensure they had the necessary knowledge to support people to stay safe. We observed people being supported to transfer using safe techniques in line with best practice.
- People's relatives told us they felt people received safe care. They told us, "I don't have any concerns at all because the staff are very responsive which is important, and they seem to be able to anticipate [name] needs" and "I trust what they're doing and just know they are keeping [name] safe and well looked after."
- Regular internal and external checks were made on the building, utilities and equipment to help ensure they remained safe.
- Individual risks to people had been assessed. Staff were made aware of any changes in the risks people faced and measures were in place to minimise any identified risks.

Using medicines safely

At the last inspection we made a recommendation for the registered provider to review and update its practices to ensure medicines were administered safely and in line with best practice guidance. During this inspection, we found that improvements had been made.

- Medicines were administered safely by staff who had undertaken training in the safe management of medicines. Medication competency assessments had been completed for staff.
- Staff were aware of the correct procedures to follow when people required their medicines to be administered covertly (hidden in food or drinks) and were administering this in line with best practice guidance. Care records could be more detailed to clearly reflect the process followed and the registered manager told us this was addressed following the inspection.
- Information was available to guide staff when to administer medicines prescribed 'as required'.
- Relatives had no concerns regarding the management of people's medicines. One relative told us, "At first, when I could, I would visit at different times to make sure they were giving [relative] medication at the right time and they always were."

Systems and processes to safeguard people from the risk of abuse

- Safeguarding procedures were in place and adhered to.
- Referrals had been made appropriately to the local safeguarding team when needed, for further investigation.
- There was a safeguarding policy in place and staff were knowledgeable about procedures to follow if they had any concerns.

Staffing and recruitment

- Staff were safely recruited. Appropriate checks were carried out to ensure new staff were suitable to work with people.
- Staff and relatives told us there were enough staff to ensure people's needs could be met safely and in a timely way.
- Agency staff were used when required to help maintain staffing levels and procedures were in place to ensure they were provided with relevant information about people's needs.

Preventing and controlling infection

- Effective infection prevention and control procedures were in place.
- Staff had completed appropriate training and were aware of government guidance regarding Covid-19 and how to reduce the spread of infection.
- Increased cleaning schedules had been developed and the home was clean. Sufficient supplies of personal protective equipment (PPE) was available and staff knew how to wear and dispose of it safely.
- Staff told us they felt safe at work. They said, "The manager goes out of her way to make sure we are safe" and "I feel safe going to work and still seeing my family."
- Relatives also felt that appropriate measures were taken to reduce the risks regarding Covid-19. One relative told us, "They've not had an outbreak and they all have the PPE and I see they social distance when I drop things off."

Learning lessons when things go wrong

- Procedures were in place to monitor the service and utilise learning from events and incidents.
- Accident and incidents were recorded and reviewed. Records showed that effective measures had been taken that resulted in a significant reduction in the number of falls people experienced.
- Records showed that appropriate actions had been taken following incidents.

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 now 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.

Continuous learning and improving care

At the last inspection we made a recommendation for the provider to review its processes to ensure effective quality monitoring processes were in place. During this inspection, we found that improvements had been made.

- The systems in place to monitor the quality and safety of the service had been improved and were effective in identifying areas that required further development.
- Records showed that when issues were identified, they had been addressed to improve the quality and safety of the service.
- The registered manager was very responsive and took action straight away to address any points that were raised during the inspection.
- The registered manager was working through an action plan to help drive improvements within the home.
- The provider had systems in place to ensure they had oversight of the service. For example, they held a weekly meeting with the registered manager at present as they have not been able to visit as often due to the pandemic. They responded to any complaints received and monitored the ongoing action plan.

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

- The culture of the service helped ensure good outcomes for people.
- Feedback regarding the quality of service people received was positive. Relatives told us, "I feel like I can speak with [registered manager], she is very approachable, really easy to talk to, as are all the staff and they know the residents very well" and "Staff are absolutely red hot on procedure, they care for Mum in a good nature, there's a warmth there. There's a difference between care and caring and I genuinely feel they're caring, its reassuring to me."
- Staff told us they enjoyed their jobs, were well supported in their roles and could raise any concerns they had with the manager. A staff member told us, "This is the best home I have ever worked in, people are well looked after and treated like royalty, like part of our own family. [registered manager] has made everything better, has turned everything around."

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

- Accidents and incidents were comprehensively reviewed and acted upon to ensure the service acted in a

transparent way.

- Relatives were informed of any accidents or incidents involving people. One relative told us, "I think they're very good, if [relative] has a fall they phone me but she doesn't fall as much as she used to."

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

- The registered manager was clear about their roles and responsibilities with regards to ensuring people receive safe and high quality care.
- The ratings from the previous inspection were displayed as required.
- The registered manager was aware of events and incidents that needed to be notified to CQC and these had been submitted appropriately.
- Staff had a range of policies and procedures available to help guide them in their roles.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager worked closely with other health and social care professionals to help ensure people's needs were met and the service ran smoothly.
- The registered manager actively engaged in local initiatives taking place to help improve quality.
- People's feedback regarding the service was sought through regular meetings and actions were taken to address any points raised.
- Staff were able to share their views in scheduled team meetings and told us they were listened to.