

County Healthcare Limited

Eastlands Care Home

Inspection report

Beech Avenue
Taverham
Norwich
Norfolk
NR8 6HP

Tel: 01603261281
Website: www.fshc.co.uk

Date of inspection visit:
29 March 2017

Date of publication:
04 May 2017

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

Eastlands Care Home provides accommodation and care for up to 35 people, many of whom were living with dementia. At the time of our inspection there were 28 people living in the home.

There was a registered manager in the home. 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.

At the last inspection, the service was rated Good. At this inspection we found the service remained Good.

Why the service is rated Good

People were supported by staff who knew how to protect them from harm and risks to people's health and wellbeing were managed and mitigated. There were enough staff to meet people's care and support needs.

Medicines were stored and managed in a safe way and people received them as prescribed.

Staff received training relevant to their role and were supported further through regular supervisions. People had a choice of food and staff supported them with dietary requirements. Referrals to external healthcare professionals were made in a timely manner and people were able to request when they wanted to see a doctor or nurse.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Occupation was supported by an activities coordinator. The activities coordinator would have benefited from more time and resources being allocated. People's visitors were welcomed and there were no restrictions on when they could visit.

There was clear and visible leadership in place and the staff team felt supported by the management team. There were effective systems in place to monitor and assess the quality of service being delivered.

Further information is in the detailed findings below.

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 remains Good

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good

Is the service responsive?

Good ●

The service remains Good

Is the service well-led?

Good ●

The service remains Good

Eastlands 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 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.

This inspection took place on 29 March 2017 and was unannounced. The inspection team consisted of one inspector 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.

As part of the inspection, we reviewed the information available to us about the home, such as the notifications that they had sent us. A notification is information about important events which the provider is required to send us by law. Prior to the inspection, the provider also completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with seven people who lived in the home and the relatives of four people. We also spoke with six members of staff including the registered manager, the deputy manager, three care assistants and the activities coordinator. We also spoke with a visiting healthcare professional. We checked three people's care records and the medicine administration records for three people. We also looked at information relating to how the service was run. This included health and safety records, staff recruitment and training files and a number of audits.

Is the service safe?

Our findings

The service remains safe. People we spoke with told us that they felt safe living in Eastlands. One person we spoke with told us, "I certainly feel safe and have no worries about anything." Another person we spoke with commented, "I do feel safe and I like it here." People's relatives we spoke with reflected these views. One person's relative explained, "My [relative] certainly feels safe here in the time they have been here."

Records we looked at showed that there were a number of processes in place to manage any risks to people's health and wellbeing. Staff we spoke with knew how to report any concerns of abuse and who to. We saw from records that staff had received training in safeguarding. We saw from people's care records that there were risk assessments in place which were relevant to their care and support needs. For example, we saw that one person was at risk of falls. We saw that that the risk assessment detailed how staff could support the person to walk safely and what equipment was needed to facilitate their mobility.

There were risk assessments for the home and the environment and we saw that daily checks were completed the registered or deputy manager to ensure that there were no hazards within the environment. We saw that there were current safety certificates to show that regular inspections of heating, water, fire, electrical and lifting equipment took place.

People we spoke with told us that they thought that there were enough staff to meet their needs. One person we spoke with told us, "[The staff] are very good when I press the buzzer and they appear in a timely manner." The manager told us how they consistently assessed people's needs and adjusted the numbers of staff accordingly. We saw from people's care records that the level of support they required was assessed monthly. We looked at the recruitment records for three members of staff. We saw that safe recruitment processes were in place and this contributed to keeping people safe.

We looked at the management of people's medicines and we saw that people's medicines were stored and administered in a safe way. People we spoke with told us that staff supported them with taking their medicines safely. One person we spoke with explained, "I have had my tablets this morning and [the staff] always make sure I take them." Another person we spoke with commented, "I get my tablets on time each day." We looked at three people's medication administration record (MAR) charts and saw that people were being given their medicine as prescribed. We saw that there were no missed signatures where staff would sign to say that someone has taken their medicine. We checked the stock levels of some people's medicines and we found that these counts were correct.

Is the service effective?

Our findings

The service remains effective. People we spoke with told us that they thought that the staff were well trained and had the necessary competencies in order to care for people effectively. One person we spoke with told us, "The girls here do know how to care for us." Staff completed online courses as well as practical training such as moving and handling and first aid. Staff we spoke with told us that they found that the training provided was beneficial in helping them to improve their skills and knowledge.

Staff told us that they were further supported through regular supervisions. Supervision gives staff an opportunity to meet with a senior member of staff to discuss any support or training they require. Staff we spoke with told us that they received an induction when they first started working in the home. They told us that they shadowed a more experienced member of staff before they started to work independently. We saw from staff records that there was an induction checklist in place and this ensured that staff were familiarised with areas such as people's care records, policies and procedures and training.

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. We saw that the home was working within the principles of the MCA and that appropriate applications had been made where people needed to be deprived of their liberty for their safety. Staff we spoke with were not always clear about the principles of the MCA but they understood the importance of gaining people's consent to their care. People we spoke with told us that staff asked them before supporting them with their care needs. One person told us, "[The staff] always make sure they ask me when they are doing things which is really nice."

All of the people we spoke with were complimentary about the food. One person told us, "The food is beautiful here. I eat it all and empty my plate every time." We saw from the menu that people had a choice of two meals and two desserts. We also noted that a choice of drinks were available to people at all times. People we spoke with told us how their preferences around food were catered for. One person told us, "I am happy with the food and if I don't fancy what is on offer, then [the cook] will make something special for me." We were also informed by one person's relative that the kitchen staff ensured that their relative's food intolerances were catered for.

People had access to relevant healthcare professionals. People we spoke with told us that they were able to see a doctor when they wanted. One person told us, "The access to the medical service of the doctor and district nurse is very good and I can get to see them whenever I want to." During our inspection visit we saw a number of healthcare professionals visiting people. One healthcare professional we spoke with told us that staff made timely referrals where there were concerns about a person's healthcare needs.

Is the service caring?

Our findings

The service remains caring. People and their relatives we spoke with told us that they felt the staff were caring. One person told us, "Oh yes, the staff are very caring. Nothing is too much trouble. They always treat you with respect and are always polite and courteous." One person's relative explained, "The staff are all polite and create a lovely atmosphere in the home." During our inspection we saw that staff were attentive to people's needs and wishes. We saw that one person asked a member of staff if they could fetch their cardigan for them, the member of staff was obliging and also asked other people who were sitting in the lounge if anyone wanted a drink while they were up. On another occasion, we saw the deputy manager took someone's hot drink to them in the lounge as they had noticed they had left it in their room. They checked to see that the drink was still hot as they said that they would make another one if not.

People we spoke with told us how staff understood how they like their care to be delivered and have their preferences respected. One person explained, "I am able to make all my own choices and have decided to have my meals in my room." People's relatives we spoke with told us that they were involved in planning their care. One person's relative told us, "We were all involved in planning [relative's] care which was really easy."

We saw throughout our inspection visit that people were treated with respect and their dignity was upheld. We saw a member of staff asking one person discreetly if they wanted to use the toilet, we then saw staff supporting the person to their room and then closing the door. We also saw that a blanket was placed over them whilst they were being hoisted to protect their dignity as the person was wearing a skirt. We heard that staff were reassuring and were explaining what they were doing.

There were no restrictions when people could have their relatives and friends visit them. We saw that people's visitors were made welcome by staff. We saw on a number of occasions that people's visitors would approach staff to ask about people's care and to report any concerns. We noted that staff had a good rapport with people's visitors.

Is the service responsive?

Our findings

The service remains responsive. We saw that staff were quick to respond to people's needs and we noted that people's call bells were responded to in a timely manner. People we spoke with told us that staff provided care which was responsive to their needs. One person told us, "Whenever I press the bell [the staff] are very good at coming to help me. It's only when I need to move as I tend to fall over a lot."

We saw from people's care records that people were given the option to complete a record that detailed their personal history. This helped staff to better understand people's lives before they went to live in Eastlands. In addition to this, we saw that everyone had a pre-admission assessment, this detailed people's care and support needs. This record was used to inform people's care plans which were person centred and detailed how to support people according to their individual needs and wishes. We saw that people's care plans were reviewed regularly and updated when people's needs changed.

People and their relatives we spoke with told us that staff understood their care and support needs. One person we spoke with explained, "[The staff] know how I like things and make sure I get what I like." Another person told us, "The girls know that I like a laugh and a good joke and that makes me smile through the day." We saw that one person had a desk and computer set up in their room. They told us, "The staff enabled me to set up my desk and computer so I can communicate with my family."

There was an activities coordinator who also worked as the home's administrator. We saw that there were a range of activities on offer such as bingo and watching films. There were also fetes held in the grounds during the summer months. We saw some activities taking place during our inspection visit. The hours that were allocated to the activities coordinator were limited as were the activities that were offered. People were not often supported to go out of the home. One person we spoke with told us, "I am a bit limited so I don't get out too much except when my daughter calls." Another person told us, "I would like more activities." People we spoke with did not report that the lack of activities impacted on their wellbeing. The registered manager told us that social care students from the local college would do work placements in the home. They added that the students helped to take people out to the local garden centre.

The registered manager told us that the staff had to fundraise and rely on donations from people's relatives to raise money for more activities. We saw pictures throughout the home which showed that the management team and staff went to local events to raise money for the activities. Staff we spoke with told us that they would like to see more activities being done with people and would like to be able to take people out more. We spoke with the regional manager who told us that a mini bus had been purchased and was available to use. They told us that staff would be able to take people out on day trips.

People we spoke with told us that they would feel comfortable in raising a complaint if needed but no one told us that they had a reason to complain. There was an appropriate complaints policy in place and staff were able to tell us how they would support someone to raise a complaint.

Is the service well-led?

Our findings

The service remains well led. People we spoke with told us that they were happy living in Eastlands and thought that the home was well led. One person told us, "The office staff are very helpful and nothing is too much trouble. The manager is very approachable." One person's relative explained, "Everybody is so nice and helpful. The manager always has a smile on their face which helps everybody else to smile."

The registered manager and the deputy manager had worked in the service for a number of years and told us that they had a supportive working relationship. We saw that there was good leadership in place and noted that the registered manager and deputy manager were a visible presence throughout the home. The registered manager told us that they were consistently looking for ways to improve the service and any issues we raised during the inspection were responded to immediately. The registered manager also knew what incidents they needed to report to us.

Staff we spoke with felt supported by the management team and said that they felt able to speak with either the registered manager or deputy manager with any concerns. They told us that they felt the staff team worked well and that communication from the management team was open and frequent.

We looked at a range of audits and saw that there were effective systems in place to monitor and assess the quality of service being delivered. We saw that any shortfalls were identified and the remedial action taken was noted. Audits were regularly carried out in respect of health and safety, medicines and care plans. One of the management team carried out a 'daily walk round'. The person carrying this out would look at a number of areas such as any health and safety hazards, people's care plans and observe some members of staff. The manager told us that doing these checks daily allowed them to raise any issues as and when they came up. For example, staff had not been completing people's turning charts. The registered manager told us that they had seen that staff had turned people but had forgotten to complete the associated record. Whilst this gave the registered manager confidence that people were receiving the correct care, the manager was able to report this to the regional manager as a records issue. The manager would then remind staff to complete people's care records.

Regular staff meetings took place. This gave staff an opportunity to be involved in how the service is run. We saw from the meeting minutes that people's care needs were discussed and any issues within the staff team. We saw that the registered manager also highlighted the importance of completing staff training on time and reiterated that staff should be completing people's cream charts and turning records.

Every year people and their relatives were given a survey to complete about the quality of the service. We looked at the previous year's survey and found that people were satisfied with the care that they received.