

Marton Care Homes Ltd

# Elm Bank Care Home

## Inspection report

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20 January 2021

21 January 2021

26 January 2021

27 January 2021

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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

Elm Bank Care Home is a residential care home providing accommodation and personal care for up to 48 people across three floors. At the time of the inspection 27 people were living at the home.

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

People and relatives were complimentary of the care received. We were told people felt very safe with the staff and relatives commented on the trust they had with the staff team and management. People described staff as "lovely," "wonderful" and "perfect." Relatives described them as being "very understanding and respectful of people's needs."

There were enough staff to meet people's needs in a safe way. Infection prevention and control systems followed government guidance to minimise the impact of Covid-19. Risks were assessed and steps taken to minimise hazards. Medicines were managed safely by trained staff.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People were supported with any healthcare needs and staff followed the guidance of health care professionals when needed.

Care was provided in a personalised way which respected people's wishes and preferences. There was a focus on communication and making sure people received information in a way they understood. End of life care was provided in a dignified way.

Relatives felt the home was well managed and they would recommend the home. Quality assurance systems were used to monitor and improve the quality and safety of the care and support provided.

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 the service under the previous provider was good published on 23 January 2020.

### Why we inspected

The inspection was prompted in part due to concerns received about infection control. We found no evidence during this inspection that people were at risk of harm from this concern.

A decision was made for us to inspect and examine all domains due to it being the first inspection with the provider Marton Care Homes Ltd.

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.

Please see the safe section of this full report.

#### 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 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 was 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.

# Elm Bank 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 (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.

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 completed by one inspector.

#### Service and service type

Elm Bank Care 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.

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 contacted the service on the morning of the inspection to announce it.

#### What we did before the inspection

We reviewed information we held about the service, including the statutory notifications we had received from the provider. Statutory notifications are reports about changes, events or incidents the provider is legally obliged to send to us. We contacted the local authority commissioning and safeguarding teams to request feedback.

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 three people who used the service and three relatives about their experience of the care provided. We spoke with eight members of staff including care workers, ancillary staff, the deputy manager, registered manager and the quality manager. We observed staff interactions with people, a medicine administration round and the donning and doffing of Personal Protective Equipment (PPE).

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

We spoke with the nominated individual during an inspection feedback call. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at easy read documentation, quality surveys and quality assurance records.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service under the provider or Marton Care Homes Ltd. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to safeguard people from the risk of harm and abuse.
- Concerns were reported appropriately and investigated.
- People and their family members said they felt very safe.

Assessing risk, safety monitoring and management

- Risks were assessed, and steps taken to manage and mitigate any concerns. Where people had capacity their decisions to take risks were respected.
- Personal emergency evacuation plans were in place to make sure people were supported in the event of an emergency.
- Premises and equipment safety checks were completed to make sure they were safe for their intended use.

Staffing and recruitment

- Safe recruitment procedures were followed.
- A dependency tool had recently been introduced. This assessed people's needs to determine the numbers of staff needed.
- Relatives and staff told us there were enough staff to meet people's needs.
- Staffing levels were under constant review during weekly meetings between the registered manager and the nominated individual.

Using medicines safely

- Medicines were managed safely. Staff had attended training in the safe administration of medicine.
- Staff knew how people liked to take their medicines and this was recorded in care plans and medicine profiles.
- Medicine administration records were completed appropriately.

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.

#### Learning lessons when things go wrong

- Systems were in place to analyse incidents and accidents for learning.
- New ways of working had been introduced in response to concerns, such as keeping a log of the post received and making sure people's belongings were recorded on an inventory.



# Is the service effective?

## Our findings

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

This is the first inspection for this newly registered service under the provider or Marton Care Homes Ltd. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Pre-admission assessments were completed and included people's preferences about how they wanted their needs to be met.
- The registered manager was very focused on assessing whether people's needs could be met within the environment of Elm Bank Care Home. The needs of people already resident at the home were also taken into consideration.

Staff support: induction, training, skills and experience

- Staff said they felt well supported by the team, the registered manager and the nominated individual.
- Newer staff said they had received a full induction which included shadowing experienced staff members as well as training.
- The pandemic had impacted the delivery of some training, but measures had been taken to ensure the skill mix of staff was appropriate to meet people's needs in a safe way.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to eat and drink enough and to maintain a healthy diet.
- People's specific dietary needs were assessed. Referrals to dieticians and Speech Language Therapy (SALT) were made in a timely manner.
- The importance of nutrition and hydration was highlighted in a Covid-19 easy read booklet that was available for people.
- Staff spoke with healthcare professionals if people were unwell. This included a 'virtual' ward round with the GP practice.
- Family members were confident staff provided appropriate and timely support if their loved ones were unwell or needed healthcare support.

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

- Staff said the environment had been improved recently with some redecoration.
- Appropriate changes had been made to support social distancing and isolation during the pandemic.

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 when this is in their best interests and legally authorised under the MCA. 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.

- Decision specific capacity assessments and best interest decisions were completed as needed.
- Before DoLS applications were made capacity assessments and best interest decisions were made.

# Is the service caring?

## Our findings

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

This is the first inspection for this newly registered service under the provider or Marton Care Homes Ltd. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were well treated by staff. Staff spoke to people in a warm, engaging and respectful manner. One person said, "They are not my helpers, they are my friends."
- A relative said, "They (staff) understand my [family members] needs and are very respectful of them. I would recommend it, they have a very caring attitude."
- Another family member said, "I am very happy with the care, the staff are wonderful. I couldn't praise them enough. [Family member] is very well looked after."

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

- People were involved in decision making about their care and their views respected.
- There was an emphasis on clear communication particularly whilst staff were wearing face masks as it was acknowledged this could impact on people's understanding and decision making.
- One person said, "I couldn't fault it. I am involved in my care and I make my own decisions which are respected."

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their independence and care was provided in a dignified manner which respected people's privacy.
- Care plans included information on people's preferences to be supported by male or female staff in order to maintain their privacy and dignity.
- One person said, "Staff know me very well and I am respected and treated with dignity. Staff support me to be independent. There is nothing they could do better."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service under the provider or Marton Care Homes Ltd. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People, and their family members, were included in planning care to make sure it met their needs and choices.
- Care plans included people's preferences and clearly set out how people's needs should be met.
- Staff clearly knew people well. A relative said, "There is continuity of staff and they know [loved one] well which is very important."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Information related to Covid-19 had been shared with people in easy read format. The nominated individual said, "We have focused on communication whilst wearing a mask as it takes a lot away from people. We've spoken about voice control and the use of hand gestures."
- Documents such as quality surveys and the complaints policy were available in easy read format.
- The provider was able to source documents in alternate formats if needed.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Due to the pandemic it had not been possible for entertainers to visit the home. Events were still being celebrated in a socially distanced way which followed current guidance.
- People were being supported in a variety of ways to maintain contact with family and friends.
- Activities continued to be supported. People were encouraged to speak with staff if there were any activities they wanted to be provided.

Improving care quality in response to complaints or concerns

- A complaints policy and procedure was in place.
- Any concerns were logged and investigated. Outcomes were recorded and analysed for learning.
- Family members said they felt comfortable to raise any concerns. No one we spoke with had any concerns at all.

#### End of life care and support

- People were supported at the end of their lives. A staff member said, "We have a meeting if someone is nearing the end of their lives so we can make sure their needs and wishes are met."
- End of life care plans were in place, if people wanted to discuss their wishes. Care plans included people's preferences.

# 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.

This is the first inspection for this newly registered service under the provider or Marton Care Homes Ltd. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager explained the culture and values of the home, and the organisation, as being established at the beginning of people's journey with the home. Either during pre-admission discussions with people and their family members or during the application process for prospective staff members.
- Staff described the culture as being "open, honest and supportive." One staff member said it was "very inclusive." Another said, "The ethos is to care for people and each other, it's very important."

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

- Legal responsibilities and duty of candour was understood by the registered manager.
- Statutory notifications, which providers are required to submit to the Commission, had been completed in a timely manner.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- A range of audits and quality assurance measures were in place to drive improvements.
- Action plans were completed to develop and improve record keeping or if areas for improvement had been identified. Actions were not always signed off as completed. Follow on audits had not identified the same concerns so actions had been met.
- Family members spoke positively about the staff team and management. One said, "They all do their very best, I have no criticism of the management or communication."

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

- People, and their family members had been involved in their care. This included the development and review of care plans, risk assessments and capacity assessments and best interest decisions.
- Staff meetings had been held, and daily flash meetings used to share information about people's needs, changes in guidance relating to Covid-19 and reinforce safe infection prevention control practices.
- People had completed quality surveys in September 2020 and rated the home as either good or excellent.
- Plans were in place to introduce 'virtual' residents meetings as these could not be held in person due to the pandemic.

#### Working in partnership with others

- Positive relationships had been forged between staff and healthcare professionals in order to ensure people received appropriate care.
- The registered manager attended local authority provider meetings with other registered managers.
- Management meetings were held with managers from other homes in the Marton Care Homes group to share best practice and learning.