

HRS Care Limited

Hastings Lodge & Hastings Cottage

Inspection report

20-22 Althorp Road & 6 Althorp Road
St James
Northampton
Northamptonshire
NN5 5EF

Tel: 01604750329

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25 April 2017

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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

Hastings Lodge and Hastings Cottage are two homes which are registered to provide nursing care for up to 14 people. Hastings Lodge can support up to 11 people and Hastings Cottage can support three people. At the time of our inspection there were 13 people using the service. At the last inspection, in April 2015, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care. Staff were appropriately recruited and there were enough staff to provide care and support to people to meet their needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision, training and ongoing professional development that they required to work effectively in their roles. People were supported to maintain good health and nutrition.

People developed positive relationships with the staff who were caring and treated people with respect, kindness and courtesy. People had detailed personalised plans of care in place to enable staff to provide consistent care and support in line with people's personal preferences. People knew how to raise a concern or make a complaint and the provider had implemented effective systems to manage any complaints that they may receive.

The service had a positive ethos and an open culture. The registered manager, and the deputy manager, were visible role models in the home. People and their relatives told us that they had confidence in the manager's ability to provide consistently high quality managerial oversight and leadership to the home.

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 safe.

Is the service effective?

Good ●

The service remains effective.

Is the service caring?

Good ●

The service remains caring.

Is the service responsive?

Good ●

The service remains responsive.

Is the service well-led?

Good ●

The service remains well led.

Hastings Lodge & Hastings Cottage

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 was a comprehensive inspection that was unannounced. The inspection was completed by one inspector and one expert by experience on 25 April 2017. An expert by experience is a person who has personal experience of using a service like this, or has experience of caring for someone who uses a service like this.

Before the inspection, the provider 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. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider.

During our inspection we spoke with three people who used the service, and four members of staff including the registered manager. We also spoke with two people's relatives. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We looked at records and charts relating to four people and one staff recruitment records. We looked at other information related to the running of and the quality of the service. This included quality assurance audits, training information for care staff, meeting minutes and arrangements for managing complaints.

Is the service safe?

Our findings

People received care from a dedicated and caring team of staff. Recruitment processes ensured that staff were suitable for their role and staffing levels were responsive to people's needs. People told us that staff were available when you needed them and that they never had to wait to receive the support they needed. One person said "There are a lot of staff that can help me (if I need them) but if I want to be alone that's fine." We discussed staffing levels with the management team which showed the flexible approach that was taken to staffing. We saw that people were supported in a timely way and staff gave people the time and attention they required.

Risks to people had been assessed and we saw that staff were vigilant and worked successfully to provide care and support in a way that kept people safe. Where possible, people were involved in understanding their own risk assessments and reviewing the measures that were in place to keep them safe. In addition, when people's independence had progressed, we saw that risk assessments were amended or removed to ensure they were current and accurate.

People told us that they always received their medicines when they needed them. One person told us that the staff helped to support them with their medicines three times a day. They said, "Sometimes I would forget but here the staff always remember. It's much better." Staff had a clear understanding about people's medicines, what they were for and when they were required. There were good systems in place to record when people received their medicines and these showed that people received them as required.

Is the service effective?

Our findings

People received care from staff that were knowledgeable and had received the training and support they needed. Staff training was relevant to their role and equipped them with the skills they needed to care for the people living at the home. For example, staff had received specialist training about supporting people with a PEG (Percutaneous Endoscopic Gastrostomy) tube to meet their nutritional needs. All staff had regular supervision and appraisal; the Deputy Manager spoke passionately about staff development and was able to evidence the progression members of the team had made with the service.

People were encouraged to make decisions about their care and their day to day routines and preferences. Staff had a good understanding of service users' rights regarding choice. Detailed assessments had been conducted to determine people's ability to make specific decisions and where appropriate DoLS applications had been submitted to the local authority and were awaiting approval. One person told us "The staff always ask me what I want to do and it's up to me." We could see that people received their care in a flexible way: people were able to choose what time they got up, went to bed and where they spent their time. Staff were encouraging but supported people to make their own choices.

People were supported to maintain a healthy balanced diet and eat well. One person said, "It was a really good feeling when I was involved in the next steps, planning, after staff discovered I was diabetic. Staff supported me with information and advice about the food I can eat to stay healthy." Staff understood the importance of good nutrition and encouraged people to eat well. For example, staff used food moulds for people who required a pureed diet so their food resembled what the real food item would look like, and this had been successful to encourage people to eat their meals.

Is the service caring?

Our findings

People developed positive relationships with staff and people were treated with compassion and respect. One person told us, "The staff are caring and very kind." One person's relative also told us "The staff are all very pleasant. They take good care of [name]." We saw that staff were encouraging and attentive and enjoyed supporting people at the service.

People were relaxed in the company of staff and clearly felt comfortable in their presence. We observed that staff knew people well and engaged people in meaningful conversation. People's choices in relation to their daily routines and activities were listened to and respected by staff. Staff treated people as individuals, listened to them and respected their wishes. Staff were observed speaking to people in a kind manner and offering people choices in their daily lives, for example if they wanted to go out, or if they wanted staff support.

People were treated with dignity and respect. We saw that staff were aware if people became anxious or unsettled and provided people with support in a dignified and reassuring manner. Staff approached people calmly, made eye contact and held people's hand to provide reassurance if required.

Is the service responsive?

Our findings

People received care that met their individual needs. A range of assessments had been completed for each person and detailed care plans had been developed in conjunction with people living in the home and where appropriate their relatives. When people moved into the service on an urgent basis, staff prioritised the support that was required and a long term plan was coherently designed. Staff knew people very well; they understood the person's background and knew what care and support they needed. The registered manager said "We believe that each of our residents are unique, so once they arrive we ask them what they would like our support to be like. People we work for should be able to express freely what they want from us and we want to hear from them more." We saw that people were encouraged to talk to the staff and take control of their lives as far as possible.

The provider made a significant effort to ensure that everybody was supported to follow their interests and take part in social activities. For example one person who was often bed bound and had a love of horses had a Shetland pony visit them in their bedroom. The person was clearly very pleased with this and had photos on display to remind them of the event. We saw staff engaging with one person who liked to have their nails painted and wear pretty beads and jewellery. Activities were based upon people's interests and past hobbies, and people were asked for new ideas of activities they would like to try, and these were carried out. One person proudly told us about a new recipe they had made with staff. They said, "Not long ago, I suggested one of the dishes I know how to cook, and we did this together as an activity. It was fun to grate the cheese."

People and their relatives knew how to make a complaint if they needed and were confident that their concerns would be carefully considered. One person's relative told us, "I haven't made a complaint but when I told the manager about something they could improve, they were very apologetic, listened to everything I said and have promised it won't happen again." The provider had a complaints system in place to record concerns and the action that had been taken as a result.

Is the service well-led?

Our findings

The service had a positive ethos and a supportive culture. Staff members were passionate about their roles and the people they were supporting. They were encouraged to come up with innovative ways of caring for people and to discuss new ideas with the people they supported. One member of staff told us, "I've worked here a while now. I really enjoy it. We all work as a team, and we all try our best for everyone here."

Staff members were encouraged to be a part of the service and were able to contribute to its development. A staff member said, "The registered manager is very responsive to any of our suggestions, if we need any training, or additional information they will find it or organize for us. There are regular team meetings too." We saw that staff were asked for their feedback and this was acted on.

People were positive about the registered manager and felt confident that they would always listen and take account of their views. One person said, "I know the manager very well, they come here every day, except on the weekend, but then there are other members of staff who I see regularly and they are also very helpful and approachable. I know I can just knock on the door of the main office and talk to any of them." Quality assurance systems were in place to help drive improvements. These included a number of internal checks and audits. These helped to highlight areas where the service was performing well and the areas which required development. This helped to ensure the service was as effective for people as possible.