

Barchester Healthcare Homes Limited

Newlands

Inspection report

Newlands Park
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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

Newlands is a residential care home providing personal and nursing care for up to 50 people. The service provides support for adults, including people with living with dementia and mental health needs. At the time of our inspection there were 42 people using the service.

The care home has three separate wings, each of which has separate adapted facilities. One wing is for people who are elderly and frail, one wing is for people living with dementia, and there is another wing for men who are living with dementia who have additional needs.

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

People supported in this home and their family members told us they were very satisfied with the care this service provides. One family member summed it up as, "Newlands have got it right, you would think that it is their own family they are looking after."

We found people were safe. There were effective systems in place to help ensure the safety of people living and working in the home. Though there had been minor gaps in medicine records, these were addressed by the registered manager during the inspection.

People received consistent quality care because the registered manager followed the provider's auditing and quality procedures. People found the registered manager to be approachable and responsive.

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.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 7 October 2017).

Previous recommendations

At our last comprehensive inspection we recommended the safe management of medications and quality assurance management systems were improved. At this inspection we found the provider had improved both, although there were still improvements to be made regarding medicines management during the inspection.

Why we inspected

We received concerns in relation to the management of medicines, people's care needs, staffing and management practices. As a result, we undertook a focused inspection to review the key questions of safe

and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection. We found no evidence during this inspection people were at risk of harm from the concerns raised. See the safe and well-led sections of this full report.

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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Newlands on our website at www.cqc.org.uk.

Recommendations

We recommend the registered manager reviews and adapts their medicine audit practices in line with best practice and reviews medication errors for trends and themes. The registered manager had already started doing this during our inspection.

We recommend the provider review, with their pharmacy, the completion of medication administration records (MAR) records to ensure following best practice.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Newlands

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 Health and Social Care Act 2008.

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 carried out by 3 inspectors and one 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

Newlands is a 'care home' with nursing care. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided, and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people who lived in the service, 12 family members, 9 staff members by telephone, the registered manager and other staff members during the inspection.

We observed support being provided on our visits to Newlands and viewed the home environment.

We reviewed 5 people's care records, 7 people's medication records and 3 staff recruitment files. We reviewed a range of records regarding the management of the service, such as health and safety records, quality assurance checks, policies and procedures.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- The provider's medicine management policies and procedures were followed by staff. However, we found some gaps in records which we raised with the registered manager. The registered manager addressed these during the inspection.
- When there were medication errors, we found inconsistent handling of these errors. There was evidence of a review of each medication error. However, there was no evidence of a review of all the errors together to look for themes or trends to reduce the amount of errors made. Despite this, there had been no negative impact on the people in the home from the medication errors recorded. The service uses medication administration records (MARs) using different letters as codes for types of administration. We found this was not consistent with current best practice and have made a recommendation below.

We recommend the provider follows best practice guidance in relation to the recording of medicine administration and the analysis of themes and trends of any errors.

- Staff were trained in medication administration and were checked to ensure they were competent to do so.

Systems and processes to safeguard people from the risk of abuse

- People told us, "I love it here because I feel safe." A relative told us, "I go nearly every day and I see that they are popping in all the time, to see how [family member] is."
- The provider had a safeguarding policy in place with procedures which allowed the registered manager to review the events and identify lessons learned.
- Staff were trained in safeguarding and both they and the registered manager followed procedures.
- Care records included information about people's preferences and diversity needs. There was guidance available for staff on how to uphold people's rights.

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 MCA requires, 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- The service was working within the principles of the MCA and, if needed, appropriate legal authorisations and applications were in place to deprive a person of their liberty.

Assessing risk, safety monitoring and management

- The provider's risk management plans helped ensure people were supported to manage risks in relation to their health and wellbeing. These were reviewed and updated regularly and in response to any changes.
- We saw how risk management plans had been followed by staff to minimise peoples' distress.
- The registered manager ensured the property was safe for people to use by performing health and safety checks and following up actions. Plans were in place to respond to the risks from fire, disasters and infection outbreaks, for example. This meant staff were aware of the plans.

Staffing and recruitment

- Staff were recruited safely. All necessary pre-employment checks had been completed, including checking people's right to work.
- The provider assessed how much support people required, which helped them to determine how many staff were needed.
- A relative told us, "The staff are good here. The staff tell us how [family member] is. There are always plenty of staff. We can visit anytime we want. We do feel we can raise issues. Staff all treat [family member] very well."

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was supporting people living at the service to minimise the spread of infection.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

- The provider was following current guidance with regards to people visiting the care home. A separate visiting area was available when required.

Learning lessons when things go wrong

- The provider and registered manager responded openly to the concerns we raised, and ensured issues were investigated robustly.
- The registered manager mapped all falls in the home to look for trends and to see if there is anything to be done to reduce falls in each area.

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 our last inspection we rated this key question good. The rating for this key question has remained 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 provider and management team were clear about the aims of the service and staff were aware of what was expected of them.
- The registered manager approached the different parts of the service with a 'whole home approach. They did this to encourage staff to help one another and see the team as one instead of just working in different parts of the home.
- Staff told us, "I like the fact that the home is open. The relatives can come in and out and talk to anyone and are able to ring us. The staff team talk and debate and offer to help each other."

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

- The registered manager understood their role regarding duty of candour by reporting incidents as required, maintaining an open and transparent culture with regards to accidents and incidents. This included reviewing events to see if there were improvements to be made.
- People told us they are kept informed when there were changes for their family member, "Last week [family member] had to go to hospital for a day, a member of staff went with them and the staff member rang me 3-4 times and kept me updated."

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

- The registered manager completed quality audits of care records and practice. Any issues identified had been addressed.
- The provider also completed quality audits of the service which helped identify any areas of improvement for the registered manager.
- Staff complete quality audits and checks in addition to the management team. These also support the continuous improvement of the service and support provided.

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

- The manager responded to a potential concern regarding an allegation of racism quickly.
- All staff confirmed they felt supported. Staff told us, "The registered manager is fair to everybody. If she can accommodate and help, she will. If she can't, she will explain why she can't."

- The service had a Resident Ambassador who spoke with others who live in the home and represented any improvements they would like to the staff and staff acted on this.
- The provider published a 3-monthly newsletter called a Life Enrichment Bulletin, which provided information on various topics to support people to plan for the future, engage in activities and other resources.
- The registered manager scheduled meetings for relatives to enable them to speak up about the support of their family member and the home. Though relatives did not always attend meetings, they told us they felt able to raise anything with the registered manager when they wanted to.

Continuous learning and improving care

- The registered manager and Regional Director reflected on our findings at this inspection and the processes used to improve the service. The registered manager followed action plans to continuously improve the service.

Working in partnership with others

- The service worked in partnership with a broad variety of professionals and agencies to help provide consistent care. Records showed that the local healthcare professionals were contacted when people's needs changed.
- The provider had a Clinical Development Nurse coming to the home to review clinical governance and to support the service to improve.
- The registered manager worked with external agencies to ensure the appropriate support was in place for people moving out of the service. This was done to ensure the safety of the move for the person being discharged from the service.