

Shire Care (Nursing & Residential Homes) Limited

The Meadows Care Home

Inspection report

88 Louth Road
Scartho
Grimsby
Lincolnshire
DN33 2HY

Tel: 01472823287

Website: www.shirecarehomes.co.uk

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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

The Meadows Care Home is a residential care home providing personal care to 36 older people and people living with dementia. At the time of the inspection, the service supported 28 people.

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

People living at The Meadows Care Home told us they were happy and well cared for. Staff were aware of the importance of keeping people safe and demonstrated a clear understanding of people's diverse needs and how to support their independence.

Staff followed best practice guidance to ensure medicines were managed and administered safely. People received support to take their medicines as prescribed.

A range of checks were carried out on staff prior to commencing their duties to ensure they were suitable to work in the service. All staff completed an induction to their role and were provided with ongoing training, supervision and appraisal to ensure they had the right skills and knowledge to support people safely in line with best practice guidance.

Staff understood their roles and knew what was expected of them. People were treated respectfully; their dignity was promoted. People had good access to other health professionals to maintain their wellbeing.

Staff had built positive, supportive relationships with people which enabled friendly conversations and offers of reassurance when required. The home employed a dedicated staff member to provide people with the opportunity to engage in a variety of activities, events and interests of their choosing.

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.

Care and support were tailored to each person's needs and preferences. Where people were able to, they were fully involved in their care plans. Where assessments confirmed people did not always have capacity to make decisions, staff understood the importance of offering choice.

The registered manager was passionate about the service and responsive to any concerns. Staff spoke positively about the way they were managed and the support they received. Everybody told us the management team were approachable and listened to them when they had any concerns. All feedback was used to make continuous improvements to the service.

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 4 March 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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.

The Meadows 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.

Inspection team

The inspection was carried out by one inspector 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

The Meadows Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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

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, Healthwatch and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who used the service, one relative and three visitors about their experience of the care provided. We spoke with four care staff, the registered manager, the deputy manager, the cook, the activities coordinator and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records used in planning, management and review of the service. This included three people's care records and associated medication records. Three staff files in relation to recruitment, supervision and induction. We looked at records used to assure quality and identify improvements including audits and a variety of policy and procedures.

After the inspection

We looked at training data and we continued to seek clarification from the provider to validate evidence found.

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 Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe. One person said, "It is safe here; you've got someone on hand all the time."
- Policies in relation to safeguarding and whistleblowing reflected local procedures and contained relevant contact information.
- Staff demonstrated a good awareness of safeguarding procedures; they followed safeguarding policy and escalated any concerns for further investigation.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager ensured assessments of risk both for the environment and peoples' support were completed. Staff had access to appropriate information to mitigate identified risks, which helped to keep everybody safe.
- People had access to the equipment and support they needed to move safely around the home. Evaluations of people's care and support determined any changes required to keep people safe.
- Staff confirmed where any incidents and accidents occurred that the service implemented corrective actions as part of 'lessons learnt' to avoid similar events.

Staffing and recruitment

- Staff were recruited safely; appropriate pre-employment checks were completed to ensure staff were suitable for the role.
- The registered manager monitored and adjusted staffing levels to ensure there were enough staff available to meet people's changing needs.
- People received care in a timely way. One person said, "I've noticed more staff over the last two weeks, they always come when you ring the bell".

Using medicines safely

- Staff completed assessments to ensure people received the required support to take their medicines safely as prescribed.
- Medicines management and administration followed best practice guidance. Where required staff had completed training in medicines management and administration. Their competency was regularly assessed and recorded.

Preventing and controlling infection

- The provider had systems in place to prevent and control the spread of infections.

- Staff received infection control training and used disposable gloves and aprons to help prevent the spread of infection.
- The environment was clean and free from unpleasant odours.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Care and support was planned, recorded and delivered following thorough assessments of people's needs and preferences. This was regularly reviewed and updated to ensure people continued to receive the right care and support.
- Staff applied their learning effectively and followed best practice which led to good outcomes for people.

Staff support: induction, training, skills and experience

- People were supported by staff who had the skills and knowledge to care for them according to their individual needs.
- All staff received an induction to their role which included shadowing experienced staff members. Staff completed ongoing scheduled training to support them in their role, whilst following best practice guidance and current legislation.
- Staff felt supported in their role, they received regular supervision and appraisals and attended meetings to develop their practice.

Supporting people to eat and drink enough to maintain a balanced diet

- People spoke highly of the meal time arrangements and were supported according to their assessed needs. One person told us, "The food is fantastic, and they often change the menus."
- People had enough to eat and drink throughout the day. They were given choice and those with complex needs received the support they needed.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care.

- People were supported to access healthcare professionals for example GP's and occupational therapists when this was required.
- Staff were quick to refer people where people required additional support. A visiting health professional told us, "Staff promptly get in touch when someone requires support and are responsive to our feedback. Nutrition and hydration needs are especially well monitored."

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

- The premises included areas with patterned carpets. This type of flooring can cause distress and confusion for people living with dementia which can result in trips and falls. The provider had an action plan to replace this with dementia friendly flooring.

- The home was easy to navigate, and people were seen to be choosing to move around freely both inside the home and outside in the enclosed garden.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The provider was following the principles of the MCA. Where people had received assessments, which determined they did not have capacity to consent to all their care and support, the provider had submitted applications to have any deprivations of their liberty legally authorised.
- Staff understood the importance of offering people choices with everyday decisions and promoting their independence.
- Staff discussed care tasks with people and asked for their consent before supporting their needs.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's right to privacy and confidentiality. Care records were stored securely, and staff supported people with personal care discreetly and compassionately. One person said, "Staff are all very thoughtful and do their best to put us at ease when providing personal care."
- People were supported to maintain their independence. A staff member said, "We always encourage, and ask people to do whatever they can for themselves; it helps to keep them motivated."

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

- We observed staff demonstrated empathy towards people's individual needs and provided emotional support where people showed signs of distress. This had positive outcomes for people's wellbeing.
- The provider had taken time to assess people's needs and information was available to ensure they were supported equally according to any diverse needs.

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

- Staff had time to spend with people to provide person-centred care. They knew people well and understood when they needed the support of their families and others to make decisions about their care.
- Staff gave people the information they needed to make decisions about their care and support and they did this in a way people understood.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 received an initial assessment of their needs. Associated information was recorded in care plans to provide guidance on staff on how to support them.
- Staff understood people's preferences and interests which enabled them to provide personalised care. Staff could tell us details about people's needs, the support they required and the person's preferred routines.
- People's care was routinely evaluated. Care plans were updated as people's needs changed to ensure they received appropriate support.
- Staff had developed relationships with people and talked to them about their interests.

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.

- Reasonable adjustments were made to meet the information and communication needs of people with a disability or sensory loss. This included picture cards, large print documents and information for people to access Advocacy support. Advocacy independently supports people to understand information to ensure they have the full facts when making certain decisions.

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

- People were supported to enjoy a range of activities, interests and daily events. The home employed a dedicated activities organiser who spent time with people to understand what they enjoyed doing. During the inspection activities were fluid, they changed depending on how many people engaged.
- Where people chose to remain in their rooms, they were supported on a one-to-one basis. Staff provided manicures and assisted with people's make up.
- Links had been established with the community with schools and entertainers visiting and people accessing events away from the home.
- Therapeutic activities were provided. Dolls and sensory items were available for people and used to help calm people during periods of distress.
- People were supported to maintain relationships with those closest to them; family and friends were welcome to visit the home at any time.

Improving care quality in response to complaints or concerns

- People were supported to raise concerns or complaints. Staff provided appropriate support and information about complaints was available in a way people could understand.
- People told us they didn't have cause for complaint. One person said, "I am quite happy, staff always ask me if I am alright. If I want anything changing they simply get on with it."
- A complaints process ensured any concerns were acted on without delay and corrective actions implemented. Concerns were discussed at team meetings to help improve the service for people.

End of life care and support

- Staff understood the requirement to follow good practice and guidance in end of life care. They told us they sought input from other health professionals to ensure people remained comfortable and pain free.
- Where people had agreed people's care plans included their preferences for end of life care. For example, any religious preferences, type of funeral and who they wanted with them.
- Where appropriate care plans included details of any advanced decisions and confirmation of any requirement to administer resuscitation in the event of cardiac arrest.

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 Good. At this inspection this key question has remained the same. 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 service benefited from having a registered manager who was committed to providing good quality care to people who used the service.
- Everybody spoke positively about the way the home was managed. One person said, "The manager is very nice." And a relative said, "Very approachable and always visible; talking with people and asking how they are."
- Staff told us they enjoyed their roles and were happy in their work; they understood the provider's vision and worked as a team to deliver good standards. They spoke positively of the changes implemented by management and how responsive management was to any feedback.

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; Continuous learning and improving care; Working in partnership with others

- The provider had good systems and procedures to manage incidents including complaints. The registered manager addressed concerns and responded with actions. Outcomes were used to help improve the service when things went wrong.
- Staff maintained good working relationships with external professionals to ensure good outcomes for people.
- Opportunities for career progression and support to improve skills and knowledge had oversight from the manager which helped to ensure people received good care and support which followed best practice guidance.

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

- Staff were clear about their roles and responsibilities. They understood when to escalate any concerns for higher level investigation and decision making.
- Daily handovers and regular communication helped staff and management to plan and coordinate how people's needs would be met.
- Governance systems including audits and checks helped to maintain and improve the quality of the service people received.
- Regular checks ensured people were safe and happy with the service they received.
- The registered manager had submitted notifications as required by duty of candour legislation

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

- People told us they were happy living at the home and that they were supported with any personal preferences. Care records included information to raise awareness and enable support for any diverse needs.
- People their relatives and staff told us the registered manager held regular meetings. Along with staff surveys feedback was routinely collated and evaluated. Copies of outcomes from feedback were displayed around the home and included information on what the provider was doing well, and actions taken where improvements were required.
- The registered manager was a visible around the home and engaged openly with people, their families and staff.
- The service worked effectively with all partner agencies such as the NHS and local authority to coordinate the care and support people needed.
- There were good links with the local community. People were supported to go out on visits. Schools attended the home at Christmas and people were supported to maintain relations with family, friends and other visitors.