

Bupa Care Homes Limited

Hammerwich Hall Care Home

Inspection report

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Tel: 01543675529

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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

Hammerwich Hall provides accommodation and residential care for up to 39 people. There were 31 people living in the home at the time of our inspection.

At the last inspection on 9 April 2015, the service was rated Good.

At this inspection we found the service remained Good.

People's care was planned to meet their needs. Potential risks were identified and management plans were in place to guide staff on the best way to reduce the risks. Staff understood their role in protecting people from harm and poor care. People were supported by a sufficient number of staff. The provider followed recruitment processes to ensure staff were suitable to work within a caring environment. People received their medicines because there were arrangements in place for safe storage, administration and stock control.

Staff had access to training and support to improve their knowledge of care and enhance their skills. People were provided with a choice of nutritious food and plentiful drinks. Staff supported people to retain their independence and when support was required it was provided in a kind and reassuring manner which protected people's dignity.

Staff understood the importance of gaining consent from people. 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 support this practice. People received the care they preferred because staff asked them and their relatives about their likes and dislikes. People and their relatives were able to regularly review their care to ensure it was still appropriate for them. People enjoyed a varied programme of entertainment and support with their hobbies to prevent them from becoming socially isolated. People and relatives felt empowered to discuss any concerns or complaints with staff and the registered manager.

People, visitors and staff found the registered manager approachable and keen to listen to the views of others. People were given opportunities to comment on the care they received and be involved with plans for the future. There were audits in place to monitor the quality of the service to drive improvements in care.

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. People were protected from harm and abuse by staff who were suitable to work in a caring environment. People's risks were assessed and there were individual management plans in place to keep people safe. There were arrangements in place to manage people's prescribed medicines to ensure they received them at the right time and the correct dose.

Is the service effective?

Good ●

The service remains Good. People received a choice of nutritious food and plentiful drinks to maintain their health and wellbeing. Staff had received effective training to care for people. Staff understood the support people required to comply with requirements of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. There were arrangements in place to involve health care professionals in people's care.

Is the service caring?

Good ●

The service remains Good. People were cared for by kind, caring and considerate staff. People were supported to maintain their privacy, dignity and independence. Staff knew people well and understood how they wanted to be supported. People were encouraged to remain in touch with their family and friends.

Is the service responsive?

Good ●

The service remains Good. People were supported to take part in a choice of activities which interested them and met their personal preferences. People had access to their care plans and were able to review their care with staff. There was a complaints process in place and people were confident they would be listened to if they had any concerns.

Is the service well-led?

Good ●

The service remains Good. People, their relatives and staff were given the opportunity to share their views of the service and told us it was well-led. Communication arrangements were established and staff received positive feedback in recognition of their work. There were audits in place to monitor the service and

drive improvements. The registered manager understood and complied with the requirements of their role.

Hammerwich Hall 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 comprehensive inspection took place on 15 March 2017 and was unannounced. The inspection was carried out by one inspector.

Whilst planning the inspection we looked at the information we held about the service and the information contained within the Provider Information Return (PIR). The PIR is an opportunity for the provider to give us some key information about the service, what they do well and their plans for the future. We also looked at the information we held about the service and the provider, including notifications the provider is required to send us by law about significant events at the home. We reviewed this information when we planned the inspection.

We spoke with eight people who used the service, four relatives, three members of the care staff, a team leader and the registered manager. We spent time observing care in the communal areas of the home to see how staff interacted and supported people who used the service.

We also looked at the care plans for three people to see if they accurately reflected the care people received and information related to the management of the home including recruitment files.

Is the service safe?

Our findings

People were protected from harm. Staff understood their responsibility to protect people and report any concerns they had. One person told us, "I've never had any problems here. The staff look after us well". A relative said, "My relation is comfortable with all the staff. It's very reassuring". Staff explained to us the action they would take if they had concerns about potential abuse or poor care. One member of staff told us, "I feel it's better to err on the side of caution and report anything you see which might be harmful". Another member of staff told us, "There are several ways people could suffer from abuse but I've never seen anything I'd worry about here". Staff were aware of the providers own reporting systems and how they could contact the local authority and us directly if they felt the appropriate action was not taken.

Risk assessments and management plans were in place to reduce known hazards for people. For example, we saw that one person required support from staff operating machinery to move them safely. A person told us, "They keep me safe. There's always two girls looking after me". We saw staff were provided with guidance and regular updates to ensure they understood how to complete people's movement safely. One member of staff told us, "We have regular training to make sure we move people properly. The trainer is very good". There were contingency plans in place to ensure people were supported if the building needed to be evacuated in an emergency. Each person had a personal evacuation plan in place which we saw was updated regularly to ensure staff knew how to assist people to leave as quickly as possible.

There were sufficient staff to meet people's needs. People told us staff responded to them when they requested support with their personal needs. One person told us, "If I press my buzzer they come straight to me". A member of staff said, "I love working here. We have enough staff and time to chat with people". The registered manager told us, "We staff according to people's needs. If someone is poorly we can put additional staff in to care for them". There were recruitment checks in place to ensure staff were suitable to work within a caring environment. A member of staff told us, "After I'd had my interview I waited until they had finished getting my references and police check before they invited me to start my induction training". We looked at three recruitment files which confirmed all checks were completed before staff were able to work with people.

Medicines were managed safely. We saw people were supported to take their medicines by staff who ensured they had taken them before moving on to the next person. For people who received 'as required medicines' we saw there was guidance in place for staff, stating when they could receive this medicine and the maximum amount they could safely receive. There were arrangements in place to store, administer and record medicines to ensure people were protected from the risks associated with them.

Is the service effective?

Our findings

People told us the staff knew them and understood their needs. One person said, "Yes, the staff know how to look after me, that's yes with a capital Y". New staff were provided with an induction during which they received training and had time to shadow experienced staff. A new member of staff told us, "I've been in the classroom doing training and now I'm shadowing. I've made a bed today but other than that I'm just watching and asking lots of questions. The staff here are brilliant. They're really good at showing me what to do".

Staff told us they were offered opportunities to increase and refresh their knowledge and were supported with regular supervision sessions. One member of staff told us, "In my supervision I can discuss my progression in the company, if I have any concerns, training I think I need and any guidance I need". Another member of staff said, "The [registered] manager is really knowledgeable and always happy to pass on her experience. I want to take the lead in one area of care and I'm having training for that. The manager has supported me with that".

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 or 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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We saw that staff recognised the importance of offering people choices and gaining their consent before providing care. Most people who lived in the home were able to make most of their decisions for themselves. We saw when people did need support from staff their level of understanding and mental capacity had been assessed. No one living in the home was being deprived of their liberty. One member of staff told us, "People can come and go as they please. No one has a need for a DoLS at present".

People were provided with food and drinks which met their needs and preferences. We saw that staff supported people to enjoy their mealtime. People sat and chatted with each other and listened to music whilst they waited for their meal. Staff reminded people what they had chosen to eat and provided them with clothes protectors if they wanted them. Some people chose to stay in their rooms. One person told us, "I like to have a sandwich in my room at lunchtime and then choose what I fancy later. The food is good". People were offered drinks regularly throughout the day with snacks if they wanted them. Staff monitored people's weight regularly and took action if they identified an upward or downward trend.

People were supported to maintain their health and wellbeing. One person told us, "They will always get the doctor if I'm not feeling too well". A relative said, "My relation was in hospital recently but they couldn't wait to get back to their home here". We saw from people's care plans that they had access to a range of health care support including opticians and the district nursing service whenever necessary.

Is the service caring?

Our findings

People received kind, patient and compassionate care. Everyone we spoke with was complimentary about the staff and the registered manager. One person told us, "They're all lovely, very kind. I love it here". Another person said, "I settled in very well here. The staff are brilliant, can't fault them. I would recommend the home to anyone". A relative told us, "I can't praise the staff highly enough. I come in every day and when I go home I know [name of person] is being looked after. They're getting the very best care in a residential home, the staff couldn't do more". We saw that staff knew people well and treated them as individuals. A member of staff told us, "We do know people well and always put their needs first". We saw that people were at ease with the staff and heard them chatting and laughing together. A relative told us, "Both my relation and the family feel comfortable with all the carers".

People's dignity and self worth was supported by staff. We heard staff speaking quietly to people and to each other when discussing personal needs. We saw staff responded quickly when people requested support or assistance. One person said, "They always take me straightaway when I need to go to the bathroom". There was a 'dignity tree' made of cardboard in the reception area of the home. Staff told us they had sat with people as they wrote what dignity meant to them on paper leaves which were placed on the tree. We saw one comment which read, 'people here have dignity and identity'. People told us the staff listened to their views and encouraged them to make choices for themselves. For example one person told us, "The staff always ask me what I want to wear. We sometimes get the clothes out the night before". We heard staff complimenting people on their choice of clothing and telling them their hair looked nice after they had visited the hairdresser. This demonstrated that staff showed a personal interest in people to boost their self esteem.

People's privacy was respected by staff. People told us staff recognised their right for private time. One person said, "I prefer to stay in my room. I'm comfy here. Staff always come and tell me what's going on and ask if I want to go downstairs which I do sometimes. They respect my choice". We saw staff routinely knocked before entering people's bedrooms or if the door was already open, checked that it was okay to enter. A person told us, "They always ask if I want the door open or closed, its up to me".

People were supported to stay in touch with friends and family. We saw that visitors were welcomed by staff throughout the day. People told us they had regular visitors and enjoyed trips out accompanied by family and friends. One person told us, "My relation comes in to see me every day, I look forward to it". Another person said they went out on social trips with another person and their relation. A relative told us, "The staff are lovely, they go above and beyond. They keep in contact with us about everything".

Is the service responsive?

Our findings

People were involved in planning their care. We saw that people, with assistance from their relatives if required, had provided staff with information about themselves, what was important to them and how they liked to spend their time. For example we saw people were asked for their day and night routine preferences. One person told us, "They know when I like to go to bed and leave me until I'm ready". People could choose where they wanted their care plans to be stored. We saw that most of the care plans were kept in people's rooms. Some people had theirs close to them so that they could read through the information. Other people preferred their personal information to be close to them but out of sight for visitors. People also had the choice of storing their care plans in the office. One person told us, "That's my folder there, I have a look through and so does my relation". A member of staff said, "It works well having people's care plans in their rooms. It means we can spend a bit of time with them when we're updating the plan".

People were provided with opportunities to take part in a diverse range of activities. Everyone we spoke with praised the different events and sessions which they were offered. One person told us, "There's a lot of choice. I really enjoy the gardening club. I used to be a keen gardener and I like to plant seeds and do some hoeing". A relative said, "There's a wheelchair facility in the greenhouse and my relation is looking forward to doing some potting". Another person told us, "I've always enjoyed going for a walk and we have a walking club here, weather permitting". A relative told us, "I didn't realise [name of person] was so good at art until they joined the art club here". We saw that there were activities running concurrently so that if a person did not want to attend one there was something else available for them. People told us that staff kept them updated about what was going on so that they could choose if they wanted to take part. One person told us, "They always let me know what's going on and I decide if I want to take part. There's something going on everyday".

We saw that external entertainers visited the home to provide music. On Burns night people were able to listen to a piper who had been sponsored for their Scottish celebrations by a local supermarket. One person told us, "On Burns night we had a piper in his kilt, he was very good, he played beautifully. It made the evening". We saw photographs of other events which had provided enjoyment to people. We saw a Shetland pony had been brought into the home and taken to a person who had previously had horses. The person's photograph showed the joy and delight they experienced. The activity coordinator was making links with the local community. A remembrance garden had been built in the garden. This had been constructed by local company's and included ceramic poppies. One person told us, "Armistice day is very important to me and I like to reminisce about the war. I really enjoy looking out of the window at the garden".

We saw that staff had brought their pets in to meet people. People watched with enjoyment as a house trained rabbit walked around the room with a tortoise brought in by another member of staff. There was a budgerigar which staff let out of its cage much to the delight of people who laughed as it pushed a football around the floor. A member of staff told us, "There is so much going on. Flower arranging, bowls craft, parties. We've got a Mothering Sunday lunch coming up. The staff love it too". The registered manager said, "We try to make people's lives more fulfilled".

Staff understood the importance of reminiscence for people who were living with dementia. We saw that one person had a folder of photographs taken at significant events in their life. The photographs had been laminated by the activity coordinator and we saw the person looking at them throughout the day. The person said, "This is a photo of my first car and that one was taken at a wedding. I like looking at them". This demonstrated that staff supported people to recollect on their earlier lives.

There was a complaints process in place. People we spoke with told us they were certain any concerns they wanted to raise would be treated seriously. One person told us, "I have no complaints, I'm very satisfied with my care". Another person said, "If I said anything wasn't right I know they'd sort it out straightaway". We saw when concerns had been raised these had been fully investigated and responded to, to ensure the person received an explanation.

Is the service well-led?

Our findings

People, visitors and staff we spoke with admired the way the home was run and the support they received from the registered manager. One person told us, "The manager runs a tight ship". Another person said, "The manager has a walk round every day and we have a chat. She's a very good manager and so are the rest of the team". A member of staff told us, "I've worked in care before but I've never had as much support as I have here".

People were encouraged to contribute and be involved in the running of the home. One person told us, "We have a resident's committee and I'm part of that. We're told about changes like the work that's going to happen in the kitchen". A relative told us, "We get the minutes of the meetings. We didn't know our relation had joined the committee until we saw their name on the minutes. It's great for them here". People also told us they had general meetings in the home. One person said, "Yes we have meetings here. We're told about new members of staff and anything that's going on". There were regular satisfaction surveys for people, their relatives and visiting professionals to complete. We saw the survey responses provided positive comments which reflected the kindness and care provided by staff. One person had commented, "Lovely home, inside and out", and another, "Excellent manager and a marvellous team". The results of the survey were shared with people. We saw that people had asked if staff could wear larger badges as they found the current ones too small to see easily. We saw the registered manager had asked the provider to look into this and a response was awaited.

There were arrangements in place to communicate with staff to ensure they were kept up to date. There was a daily meeting attended by the heads of all departments within the home. We heard staff discussing the upcoming refurbishment of the kitchen and the contingency plans which were in place to ensure people were not adversely affected by the disruption. People's wellbeing was discussed and improvements or concerns highlighted. The registered manager used the meeting to provide positive feedback when improvements, for example in staff recording had been noted. There were staff meetings and staff told us as well as being updated they were thanked for their hard work and contribution to the running of the home. This demonstrated that the registered manager understood the importance of acknowledging the crucial role staff played in the success of the home.

The quality of care was monitored and assessed to drive improvements. We saw there was a wide ranging audit programme in place which covered all aspects of peoples care, health and safety. If improvements were identified an action plan was put in place to ensure changes were completed. There was an analysis in place to identify if there were any trends associated with accidents or incidents in the home. For example the details of each fall were examined to see if there was a pattern associated with the time of day or place where fall had occurred. This meant the provider could take action to reduce risks.

There was a registered manager in post. 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. The registered manager was fulfilling the

requirements of their registration with us and informing us whenever significant events occurred within the home. There is a requirement to display the ratings poster from our inspections. This is so that people and visitors to the home can see how the home has been rated and read the report if they want to. We saw the poster was displayed in the lobby of the home with other information which would be of interest to people and visitors.