

Cherry Garden Properties Limited

Clare Hall Nursing Home

Inspection report

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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

Clare Hall Nursing Home is a residential care home providing personal and nursing care to 32 people aged 65 and over at the time of the inspection. The service can support up to 47 people. Clare Hall Nursing Home accommodates people in one large adapted building. The service provides residential as well as nursing care.

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

People appeared happy and relaxed with staff. Relatives we spoke with were very positive about the care their loved ones received; they told us they were confident people were safe and well cared for. The provider had effective systems in place to safeguard people from abuse. Risks to people were assessed and guidance was in place to reduce these risks. The provider ensured maintenance and safety checks of equipment were undertaken. People were supported by staff who were trained and supervised, however, on occasion staffing levels had fallen below the minimum number needed to support people. The registered manager and deputy were able to step in to provide direct care in these circumstances. The home was clean and smelt fresh throughout; staff were following guidelines in respect of infection control. Any incidents were reported by staff and reviewed by the registered manager.

Relatives we spoke with were positive about leadership at the home. Everyone we spoke with had contact with either the registered manager or deputy manager. Relatives told us communication was good with the service, they were updated on any changes in their relative's care. Staff told us they were confident in their colleagues and worked well as a team. The management team had good systems in place to monitor the quality and effectiveness of the service. Audits were thorough and completed regularly, any identified shortfalls were addressed.

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
The last rating for this service was good (published 14 September 2017).

Why we inspected

The inspection was prompted in part due to concerns received about staffing. A decision was made for us to inspect and examine those risks.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

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

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.

Clare Hall Nursing 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 carried out by two inspectors and an Expert by Experience who spoke with relatives by telephone. 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

Clare Hall Nursing 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection.

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.

During the inspection

We spoke with four people who used the service and six relatives about their experience of the care provided. We spoke with eight members of staff including the area manager, registered manager, deputy manager, and members of the care team.

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

After the inspection

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

- Relatives told us they were confident their loved ones were safe, a typical comment was, "Safe, yes very safe."
- The provider had systems in place to protect people from the risk of abuse.
- Staff had received training in safeguarding and told us they would report any concerns. One member of staff said, "It is part of our online training, I have just completed it." Another member of staff said, "I would report [any concerns] right away."
- The provider's records showed they responded to and investigated any concerns. Action had been taken to prevent reoccurrence. The service/rm raised safeguarding alerts with the local authority safeguarding team as the need arose
- People were relaxed and confident with staff, we observed relaxed and friendly interactions.

Assessing risk, safety monitoring and management

- Risks to people such as falls, choking, pressure damage and mobility had been identified and plans implemented to reduce these risks. Records showed that these risks were reviewed regularly and updated if needed.
- One relative told us, "As far as we can tell our relative is very safe here."
- The provider had a comprehensive system of checks to manage the safety of the environment. The provider checked gas, electricity, fire and lifting equipment regularly. Any identified shortfalls were rectified.

Staffing and recruitment

- The provider had deployed sufficient numbers of staff to meet people's care needs. However, staffing levels had fluctuated since the start of the pandemic. The registered manager confirmed that on occasion the service had been unable to meet required levels of staffing. The registered manager explained that as both they and the deputy manager were registered nurses, they were able to provide both care and nursing cover.
- People told us, "I call for staff and there is someone around."
- One member of staff told us, "It has been quite hard. Sometimes we use agency care staff and they are not experienced," whilst another member of staff said, "Staffing is OK most of the time."
- Staff had been recruited safely. The provider had effective recruitment systems in place to check the suitability of new employees.

Using medicines safely

- Medicines were managed safely. Medicines were stored safely in a locked cabinet secured to the wall

when not in use. Medicines requiring additional security were stored in line with legal requirements. Medicines were stored at the correct temperature; the fridge and room temperatures were checked daily.

- There was a system in place to order all medicines on a monthly basis. Medicines stock was checked regularly. The controlled drugs book, used to record administration of medicines with legal requirements, was completed in a clear and legible way. This meant the service could track the amounts in stock, received and destroyed.
- Staff took care to administer medicines needing time gaps between doses at the correct times. One member of staff told us, "I always give these medicines first in the morning so there is enough time between doses."
- A senior member of staff carried out monthly audits to check on the safety of medicines storage and administration.

Preventing and controlling infection

- The home was clean and smelt fresh throughout. The provider employed sufficient cleaning staff to keep the home clean throughout the day.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Staff reported accidents and incidents. There was a review, investigation, record of who was notified and any learning for each incident. The registered manager completed a monthly evaluation of incidents.

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

- One person told us, "I like it here." We observed people were relaxed with the staff team and supported, for example, to go into the garden. We heard staff reminding one person to put on sun cream. Relatives we spoke with were very positive about the home. Typical comments included, "I cannot speak highly enough about Clare Hall. The manager's door is always open to me," and, "[Name loves it here. We love them" living here.
- People's care records contained information about their individual needs and preferences. Care plans identified areas in which people were independent and aimed to maintain this. Records showed people's identified care needs were assessed and action taken to meet these. One relative said, "I would just like to add this is an excellent care home. It is very well run."
- People were supported to attend activities they were interested in. One relative told us, "They (staff?) tell us what activities our relative has been doing since our last contact with them."

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

- Staff at Clare Hall understood their obligations under Duty of Candour. Records showed relatives were informed when an incident occurred and updated about any outcome. One relative told us about an incident they had been informed of, "As far as the family is concerned, the matter has been resolved and the incident forgotten."

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

- The provider had a range of service and provider level audits in operation. These audits had been completed at their prescribed intervals.
- Audits of care records had identified any shortfalls and action had been taken to remedy these. Audits were completed of people's nutrition and weight, any infections, pressure ulcers and also an audit of call bell response times.
- There were comprehensive systems in place to manage the risk of COVID-19 with regular infection control audits and updates to the infection control policy.
- The provider had a system in place to monitor staff training and supervision.
- The Care Quality Commission had been notified by the provider and manager of incidents which had occurred in line with their legal responsibilities.

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

- Staff we spoke with were positive about working at Clare Hall. They told us the team was supportive and they could approach senior staff if they needed advice. Staff told us, "Our staff are lovely and a good team." Staff attended team meetings and were able to contribute their views.

- Relatives told us they were included in events at the home. Comments included, "We receive emails, letters and event invitations. There is a fete and a celebration and thanksgiving service to mark the coming through the pandemic. This is happening in August and all relatives have been invited

Continuous learning and improving care

- Since our last inspection the service had improved their governance system. There was a more comprehensive system of audits which enabled the registered manager to identify any areas for improvement.

- Some rooms at the home had been refurbished, one relative said, "The building is well maintained, décor is up to date and feels fresh and clean. Visiting hours are well run, it all goes like clockwork."

Working in partnership with others

- Staff at the service worked with other professionals. The GP attended the home weekly. People were visited by district nurses and a chiropodist. One relative told us, "My relative's health appointments are all handled by Clare Hall."