

# Raveedha Care Limited

# Eastcotts Care Home with Nursing

# **Inspection report**

Eastcotts Farm Cottage Calford Green, Kedington Haverhill Suffolk CB9 7UN

Tel: 01440703178

Website: www.symondshouse.com

Date of inspection visit: 17 May 2022

Date of publication: 28 June 2022

### 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

Eastcotts Care Home with Nursing provides accommodation, nursing and personal care for up to 59 older people. There were 38 people living in the home when we visited on 17 May 2022. The home is situated in a rural area on the periphery of the village of Calford Green, Haverhill in Suffolk. We have referred to the home as Eastcotts Care Home within this report.

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

Relatives and people were complimentary about the support provided by staff. Their comments included, "I'm very happy with Eastcotts [Care Home], the way they look after [family member], they really pamper [family member]." And "Their care and compassion is amazing. I was a nurse, so I know good standards."

People were protected from the risk of harm. Safeguarding policies and procedures were in place. Staff had received training and understood how to keep people safe and who to report to if they had any concerns.

Staff were safely recruited and received a comprehensive induction from the provider. People told us there were sufficient staff to meet their needs.

People received their medicines safely. Safety checks of the premises and equipment had been undertaken. People had personal emergency evacuation plans (PEEPs) in place.

People were supported to have maximum choice and control of their lives and staff supported /did not support them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The quality and assurance systems in place were used to monitor the safety and care provided to people. The management team used auditing to identify further areas and opportunities to continuously improve 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 and update

The last rating for this service was Good published 3 December 2019

Why we inspected

This was a planned inspection based on the previous rating.

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.

# 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 •
Is the service well-led? The service was well-led.	Good



# Eastcotts Care Home with Nursing

**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

This inspection was undertaken by one inspector and an 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

Eastcotts Care Home is a 'care home'. 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. Eastcotts Care Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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 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 this information to plan our inspection.

### During the inspection

We spoke with four people who used the service and nine relatives about their experience of the care provided. We had contact with seven members of staff including the registered manager, care workers and kitchen staff. We reviewed a range of records. This included three people's care records and medication records. A variety of records relating to the management and quality assurance of the service, including policies and procedures were reviewed.



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

Systems and processes to safeguard people from the risk of abuse

- There were systems in place designed to safeguard people using the service from abuse. This included training for staff alongside safeguarding policies and procedures.
- People were supported by staff who were trained in how to understand and report concerns relating to harm and abuse. Information with contact details for outside agencies who may need to be informed was available in the service.

Assessing risk, safety monitoring and management

- Risks to people had been identified, mitigated and kept under regular review. This included information on steps to be taken to minimise risk.
- There were environment risk assessments in place to keep people, relatives, staff and visitors safe. The premises were safe and there was regular testing of equipment and utilities.
- Environmental risks were completed that included fire safety and health and safety checks to ensure people were kept safe in the home.

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

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

### Staffing and recruitment

• People told us there were sufficient staff to meet their needs in a timely manner. One person commented, "I have got a [call bell] by the bed; I just press that and they [care staff] will be here in a few minutes." Another person said, "I have an alarm in my room, beside my bed. They are pretty good at responding when you use it. A third person said, "I don't think there is enough staff, they work extremely hard and a few more staff would make it easier for them. They really are a lovely team of staff."

- Relatives provided some mixed feedback around staffing levels at times, but none spoke of any negative impact on their family member as a result. One relatives told us, "They could probably do with a few more staff, but it's the same everywhere. It doesn't impact on [family member]. You tend to see the same staff. They do have a turnover [of staff[, but it's not high." Another relative commented, "When I was visiting recently for an hour, three different members of staff came in, so I know [family member] is never left alone for long."
- The registered manager kept oversight of the staffing levels to ensure there were enough staff with the right mix of skills on duty at any time. Throughout our visit, we saw a sufficient number of staff support people with their needs in a timely manner.
- The provider followed safe recruitment practices. Staff files showed the provider had completed appropriate checks prior to the commencement of employment. This included requesting and receiving references from previous employers; and checks with the disclosure and barring service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. Where necessary, evidence of up-to date registration with the nursing and midwifery Council (NMC) was available.

### Using medicines safely

- Systems were in place for the safe management of people's medicines.
- Staff were suitably trained to administer medication and staff completed records accurately.
- Where medicines were prescribed 'as required' or 'as directed' there were protocols in place to give staff clear guidance on when these should be taken.

### Preventing and controlling infection

- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- 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 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.
- The manager ensured their visiting approach was in line with government guidance. Processes were in place to ensure people's safety when visiting during this time.

### Learning lessons when things go wrong

• There were systems in place to learn lessons, including when incidents and accidents occurred. This included putting measures in place to reduce the risks of them happening in the future.



# 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. At this inspection 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

- We received positive feedback from people using the service and relatives about the care provided at Eastcotts Care Home with Nursing. One person told us, "It's very nice, I couldn't wish for anything better. Everything I need is here, the people who look after me are nice, I'm very happy." Another person commented, "The [registered] manager is lovely; I think [registered manager] is good. [Registered manager] has got an adorable little dog that they bring in. She is a very nice person. I feel I'm so lucky to be here."
- People's relatives were also complimentary about the care their family member received and the culture of the service. One relative said, ""I can email [registered manager] and they respond very quickly. I think it is well managed, the ethos, the friendliness. Staff work together as a team and try their best to cater for the needs of [people]." Another relative told us, "They are very good at communicating with me and have many different ways of contacting me. [Registered manager's] dog lights up everybody's face! It is quiet, peaceful and tranquil, a very caring atmosphere."
- Staff were positive about the registered manager and the support they provided. A staff member commented, "[Registered manager] is approachable and supportive to the staff."
- The registered manager, senior staff and care staff were clear about their roles and responsibilities.

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 had shared information with the CQC as required.
- The management team were open and transparent when dealing with issues and concerns. They understood their responsibility to apologise and give feedback if things went wrong. A relative told us, "[Family member] [fell] last year and went to hospital. They [care staff] told me straight away, kept me updated throughout and welcomed [family member] back, which was so nice, [family member] knew she was home." Another relative commented, "I have spoken to [registered manager] on a number of occasions, they are very professional and caring. [Registered manager] is someone who does really care about the home and [people] who live there. [Registered manager] is straight on the phone to me if there are any problems."

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

• The registered manager and staff team understood their role and responsibilities. They worked together to meet people's needs.

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

- Staff and the registered manager involved people's relatives in discussions about their care. Relatives told us they were able to speak with the management team or staff at any time. A relative said, "I phone every day to get updates about [family member]. [The service] are totally with it and know what's going on."
- People and their relatives had the opportunity to give feedback on the service. One relative said, "They are very good at communicating with me and have many different ways of contacting me." Another relative said, "I don't go to the [relatives] meetings, however, I always receive the minutes."

### Continuous learning and improving care

• Systems were in place to ensure the service was monitored and the quality of care people received was maintained.

### Working in partnership with others

- Staff and the management team understood the importance of partnership working to support good outcomes for people.
- The service worked in partnership with health and social care professionals who were involved in people's care. These relationships were reflected in people's support plans which contained guidance to work with people to ensure they were receiving the care they needed.