

Norlington Care Limited

Norlington Nursing Home

Inspection report

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Dorset
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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

Norlington Nursing home is a nursing and care home and is registered to provide accommodation for up to 30 people. At the time of this inspection 10 people were living or staying Norlington Nursing Home.

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

There was a calm, welcoming and friendly atmosphere at Norlington Nursing Home. Staff knew people well and were attentive to their needs. Potential risks to people's health and welfare and the premises had been assessed and regularly reviewed.

People told us they felt safe living at Norlington Nursing home and staff talked knowledgably about the system for reporting any potential signs of abuse.

Staffing levels were maintained at the correct level to ensure people were cared for safely whilst maintaining and promoting their independence and wellbeing. Staff told us they enjoyed working at the home and felt well supported at all times. One member of staff said, "I feel safe and happy to work here."

People's medicines were managed safely, stored securely and administered by trained staff. People received assistance to take their medicines as prescribed.

People, staff and visitors to Norlington Nursing Home were protected from risks of infection as policies and staff practices were reflective of current best practice guidance. Staff had access to personal protective equipment (PPE), and the home was active in carrying out whole home testing in response to the coronavirus health risk.

There was an effective governance system in place. There were a variety of audits, policies, spot checks, systems and procedures to monitor the quality and safety of the service. These ensured a culture of continuous improvement and learning took place and highlighted any potential shortfalls to improve the safety and quality of care people received.

Staff felt well supported and spoke highly of the registered manager and management team. Staff were passionate, committed and motivated to delivering quality person-centred care to people.

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 December 2018).

Why we inspected

This was a planned inspection based on the previous rating. 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 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 coronavirus and other infection outbreaks effectively.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Norlington 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 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 conducted by two inspectors.

Service and service type

Norlington 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 visit was announced. We gave the provider 24 hours' notice of our inspection.

What we did before the inspection

We reviewed information we had received about the service since our last inspection. We sought feedback from the local authority who work with the service. 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 their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with one person who used the service and two relatives, and spent time observing and listening to how staff interacted with people. We spoke with the owner, the registered manager and four members of care staff which included a senior carer and the maintenance technician.

We reviewed a variety of records relating to the management of the service. This included infection control audits, infection control policies, medicine management processes, risk assessments in relation to equipment and premises and policies and audits relating to the governance of the service. We reviewed two people's care records and seven people's medicine administration records, three weeks of staff rotas and two staff recruitment records.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We requested further information relating to safety certificates from the registered manager and this was supplied promptly.

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

- We asked people if they felt safe living at Norlington Nursing Home. One person replied, "Yes, I feel safe in Norlington... it has been fantastic right from the start, the staff are fantastic. I could not ask for more."
- One relative told us, "I feel [person] is so safe now. They were not safe at their home, but now very safe at Norlington." Another relative told us, "Yes we feel [person] is safe at Norlington."
- Staff received safeguarding training and told us how they would recognise and report potential signs of abuse. One member of staff told us how they would recognise potential abuse, they said, "I would ask them... we can see how a resident acts, if their behaviour changes, we know them so well."
- The provider had policies in place that covered safeguarding and whistleblowing. These gave staff clear guidance to follow if they needed to refer any concerns.

Assessing risk, safety monitoring and management

- Risks to people and the service were assessed and regularly reviewed. Staff demonstrated good knowledge on how people preferred their care and support to be given.
- Risk assessments were personalised and gave staff clear guidance on ensuring people were supported safely. Risks were managed using the least restrictive practices to ensure people were cared for safely whilst still maintaining their independence.
- People had individual evacuation plans in place. These were easily accessible for staff to ensure people received the support they needed in the event of a fire or other emergency incident.
- The provider had a process in place to assess the risk of fire and regular checks were completed on , fire alarms, fire extinguishers, fire blankets and emergency lighting. Staff received training in fire safety and were aware of the action to take in the event of a fire.
- Regular water systems checks were completed to reduce the risk of legionella. Legionella are water borne bacteria that can be harmful to people's health.

Staffing and recruitment

- People, their relatives and staff all told us there were enough appropriately trained staff available on each shift to ensure people's safety. One relative told us, "I'm very, very happy with the care, if [person] is not happy or well they always take the time to listen to them and anything needed to be done is all done."
- One member of staff told us, "We have enough staff, we can do all our duties and provide their care. When they ring their bell we go straight away."
- Recruitment records showed staff were recruited safely. Procedures were in place to ensure the required checks were carried out on staff before they commenced their employment at Norlington Nursing Home. This ensured staff were suitable to work with people in a care setting.

- Staffing rotas reflected people were cared for by appropriate numbers of staff. During the inspection we observed staff responding promptly and discreetly to people's needs and did not appear rushed.

Using medicines safely

- Medicines were stored, managed and administered safely. Records showed stock levels of medicines were correct.
- Staff received medicine training and had their competencies checked regularly to ensure they were safe and competent to administer medicines to people.
- Nurses were trained to use specific supporting end of life pain relieving equipment when it was necessary to do so.
- Regular medicine management audits were completed to address any issues in medicine administration.

Preventing and controlling infection

- 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 providers prevention and control policy was up to date.

Learning lessons when things go wrong

- There was a clear, detailed procedure in place for reporting, analysing and reviewing accidents and incidents. The process included use of a clear pictorial graph that easily identified any themes or trends for staff.
- The process included taking details of the date and time of accident, what happened and any injuries sustained. An action plan was completed to identify trends and a target date set for when the actions were to be completed and signed off by a member of senior staff.
- Staff completed individual accident and incident reports for each person which included details of their health observations such as, blood pressure to provide a clear picture of each person's health at the time of the incident.
- People had a detailed post fall assessments tool completed on them, again to ensure any themes or trends would be highlighted and used as learning for staff.
- Information regarding incidents and accidents was discussed with staff during daily handovers, staff meetings and staff supervisions. This ensured any potential learning from these events could be identified and shared with the staff team to promote continual improvements in safety.

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 service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People, relatives and staff spoke positively regarding the registered manager and their team. They told us the service was well managed with a clear staff structure. One relative told us, "The staff are lovely and pleasant, they all go the extra mile, it's lovely like a family atmosphere...I have no worries or concerns, they are very good at keeping [person] happy."
- People were happy with the service they received and told us they enjoyed living at Norlington Nursing Home. One person told us, "The staff are fantastic I could not ask for more. They are all so kind and helpful, nothing is ever too much trouble, the manager is good, no problems at all."
- Staff told us the registered manager ran the service in an open, supportive and friendly way. One member of staff said, "His [manager] door is always open, he is good like that."
- Staff consistently told us they felt well supported in their roles and they appreciated the open and honest management style. This promoted a person-centred culture, ensuring people received individualised care and support.
- Staff told us, "Leadership here is brilliant...they think of the wellbeing of everybody. They are very supportive, they support staff really well, we help each other every day. It's good to have teamwork." Another member of staff said, "We have had a lot of support from the manager, the owner and the nurses."
- The registered manager told us, "I feel our team here works really well, we have a philosophy of supporting each other."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was a clear management structure in place. Staff spoke knowledgeably about their roles and responsibilities and showed passion and commitment to ensuring people received the best care for their individual health needs.
- The registered manager told us, "I am proud of the input of the team. Staff found innovative ways to do activities with people during the first lockdown, staff showed such empathy and compassion...the last lockdown has made the staff even stronger now."
- There was a schedule of audits in place to ensure the quality of service was maintained and any shortfalls identified and acted upon. The audits covered a range of high-risk areas and included, nutrition, infection control, falls risk, oral health, skin integrity and care plans.
- Staff meetings and handovers were used to discuss the outcomes of incidents and accidents. This ensured information regarding lessons learned could be shared and proactive action put in place where possible.

- The registered manager and staff team spoke passionately about their commitment to learning and making improvements to the service people received. There were processes in place to ensure learning from incidents and accidents took place. The registered manager told us, "We wish to move forward and ensure we are up to date with clinical practices...the process I follow, the quality improvement system gets better as we go on."

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 duty of candour was understood by the registered manager, with the registered manager promoting a culture of learning, openness and continual improvement. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to treatment and care.
- One relative told us, "They phone and let us know if any problems and we talk with [person] on the phone. Any worries at all they call us straight away."
- All statutory notifications had been made to CQC as required by the regulations. A notification is the action that a provider is legally bound to take to tell us about any changes to their regulated services or incidents that have taken place.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in Partnership with others

- People, their relatives and staff told us they felt involved in the service and their views were sought and listened to. One relative said, "It's so easy to get in contact, especially during Covid, we just phone...we can phone and book a time for the visiting pod, it's always easy to get through and everyone is so helpful."
- Due to the restrictions on visiting that the COVID 19 pandemic had led to, the provider had built an internal visiting pod in the home. The pod could be accessed from the outside without visitors having to come inside the home, therefore reducing the risk of infection transmission. The pod had been fitted with a hearing loop and had been extremely well received by people and families alike. One relative told us, "The pod has worked so well, it was lovely and the hearing loop really helped."
- The service used the public review website www.carehome.co.uk where people could give their views on Norlington Nursing Home, positive reviews on the service were displayed on this website.
- The registered manager had established good working relationships with health professionals and records showed regular conversations and visits were undertaken where appropriate. A GP conducted a video call each week which the registered manager said had been extremely helpful and valued the support from the GP.
- The registered manager told us about the close working practices they had established with community pharmacists to look at reviewing medications for people. The service had a contact system in place which with just one phone call staff could make referrals for mental health support, falls clinic, epilepsy support and Physiotherapy.