

Mrs Denise Moss

Highfield House Nursing Home

Inspection report

298 Park Lane
Macclesfield
Cheshire
SK11 8AE

Tel: 01625511519

Date of inspection visit:
22 August 2017
23 August 2017

Date of publication:
20 September 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

Highfield House Nursing Home provides nursing and personal care for up to 13 people in a small residential setting in Macclesfield. At this inspection, 13 people were living there.

At the last inspection, the service was rated good. At this inspection, we found the service remained overall good.

People were not always protected from the risks of harm associated with the use of mobility equipment. Risk assessments and modification to equipment was not personal to the individual neither did they take account of people's individual needs.

People were safe from the potential harm of abuse or ill-treatment as staff knew how to recognise and respond to such concerns. People were supported by enough staff to meet their needs. People were assisted with their medicines safely.

The provider followed safe recruitment procedures when employing new staff members. Staff were well supported and undertook training relevant to those they assisted.

People were assisted by a staff team that knew them well. People had care and support plans that were personal to them and reflected their individual needs and preferences.

People had choice and control over their lives. Staff were aware of current guidance which directed their practice and people's human rights were protected by the staff who supported them.

People received support from a staff team that continued to be caring and compassionate. People had their privacy and dignity respected by those supporting them. People were supported by staff members when they needed comfort and support.

People and their relatives were encouraged to raise any concerns or complaints. The provider had systems in place to address any issues raised with them.

The management team were approachable and supportive. People receiving services from Highfield House Nursing Home felt involved and their suggestions were valued by the provider.

Staff members felt respected as employees and their opinions and ideas were listened to by the provider. The provider had systems in place to monitor the quality of service and where necessary made changes to drive improvements.

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?

People were not always protected from the risks of harm associated with the use of mobility equipment.

Risk assessments and modifications to equipment were not personal to the individual and did not take into account their individual needs.

People felt safe and protected from the risks of ill-treatment and abuse.

Requires Improvement ●

Is the service effective?

The service remains Good

Good ●

Is the service caring?

The service remains Good

Good ●

Is the service responsive?

The service remains Good

Good ●

Is the service well-led?

The service remains Good

Good ●

Highfield House Nursing 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 was planned to check 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 inspection took place on 22 and 23 August 2017 and was unannounced.

This inspection was completed by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

In addition we asked the local authority and Healthwatch for any information they had which would aid our inspection. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care services. We used this information as part of our planning.

We spoke with four people living at Highfield House and three relatives. In addition we spoke with three care staff and the registered manager.

We looked at the care and support plans for three people including assessments of risk and records of medicine administration. We confirmed the safe recruitment of two staff members.

Is the service safe?

Our findings

People were not always protected from the risks associated with individual pieces of mobility equipment. We saw a number of wheelchairs used by people where the foot plates had been removed. The wheelchairs had also been modified by someone not qualified to do so. The connecting brackets for the footplates had been covered with material preventing the footplates from being attached. The registered manager told us that, some time ago, someone using the service had suffered an injury as a result of catching themselves on the wheelchair footplate attachment. The risk assessments for people's use of wheelchairs were not individual to the person or their personal needs. At this inspection we saw the registered manager was taking action to rectify this.

People told us they felt safe living at Highfield House Nursing Home. One person said, "I didn't feel safe before moving in here but now I feel protected and happy." Relatives told us they believed their family members were protected from the risk of harm or abuse. Staff we spoke with told us that if they ever suspected any wrongdoing they would report it immediately to the registered manager or to the local authority. We saw the registered manager had made appropriate referrals to the local authority in order to keep people safe.

People told us, and we saw, that they were happy and felt safe when being supported by staff members who used moving and handling equipment. We saw staff talking with people, gaining their agreement and informing them what was happening before supporting them in any such movements. One person said, "I feel quite secure in there," whilst pointing to the hoist. Any incidents or accidents were reported by staff members and monitored by the registered manager. The registered manager identified any trends or patterns in reported incidents in order to take action to prevent reoccurrence. For example, following one person falling from their bed, a bed rail assessment had been completed and appropriate equipment provided.

People told us and we saw that there was enough staff available to safely support them and to meet their individual needs. The provider followed safe recruitment procedures when employing new staff members. Checks included obtaining references and contact with the Disclosure and Barring Service (DBS). The DBS helps employers make safer recruitment decisions and prevent unsuitable staff from working with people. The provider had systems in place to address any unsafe staff behaviour. This included retraining or disciplinary action if needed.

People told us they received their medicines safely and when they needed them. One person told us they used to worry about their medicines and making a mistake. They said, "Now I have full trust in them (staff). They are competent and have taken away the worries I had about my medicine." Staff were trained and assessed as competent before supporting people with their medicines. The provider had systems in place to respond to any medicine errors should they occur.

Is the service effective?

Our findings

People we spoke with told us they thought the staff had the necessary skills and knowledge to support them and to meet their needs. One relative said, "The staff are knowledgeable and seem to know just what to do to support [relative's name]." Staff we spoke with told us when they first started working at Highfield House Nursing Home they received a structured introduction to their role. This included training in infection prevention, and moving and handling. One staff member said, "I first started here working with another full-time staff member. I got used to how things work and got the time to meet and talk with people."

Staff members received additional training and were supported by the provider to work towards obtaining their Care Certificate. The Care Certificate is a nationally-recognised training programme aimed at training staff to recognise the standards of care required of them.

Staff members felt supported and had regular one-on-one meetings with the management team. One staff member told us that these meetings enabled them to discuss any work-related issues and also any personal adaptations that may be needed to support their work.

People were supported to have choice and control over their lives and staff supported them in the least restrictive way possible; the policies and systems in place through Highfield House Nursing Home supported this practice. When someone could not make decisions for themselves, the provider and staff knew what to do in order to protect the individual's rights.

We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA) and whether any conditions on authorisations to deprive a person of their liberty were being met. The 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. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). At this inspection the provider had made appropriate applications when they were required.

People were supported to have enough to eat and drink to maintain their well-being. One person told us, "The food here is first rate." We saw people received appropriate support when eating to encourage their nutrition. Others we spoke with told us they had the opportunity to choose alternatives if they did not like what was on offer.

People told us they had access to healthcare services when they needed them. One relative said, "[Registered manager's name] recognised [person's name] was unwell. They got the GP out and everything was OK in the end." We saw people had access to GPs and specialist nursing services when they required them.

Is the service caring?

Our findings

All those we spoke with thought highly of the staff supporting them or their relatives. People described the staff as, "lovely," "caring" and "unbelievably kind." One person told us, "I feel so safe and supported here. I have relaxed and all the worry has gone away."

People were supported at time of upset or distress. One person told us, "I know I can talk to anyone here whenever I want. They (staff) are so approachable. Sometimes I just go quiet and they will sit with me and we can just chat about anything."

People told us they were involved in making decisions about their care, which included how they wished to be supported. One person told us, "I can choose what help I need or how I want things done. I am a private person but do need some help with some care. I can just say what I need and they (staff) will help me."

People told us, and we saw, that their privacy was respected, and their dignity promoted by the staff supporting them. One person said, "They (staff) always ensure the curtains are pulled and the screens are in place to make sure everything is private and I have my own space."

People we spoke with said they were encouraged where possible to remain independent. One person said, "I still want to do what I can for as long as I am able and I do that here. It is reassuring to know that I have help there when I will need it though."

People's information was kept confidential and stored securely. We saw staff members confirming people's authority to access confidential information before anything was disclosed.

Is the service responsive?

Our findings

People told us they still continued to be involved in the completion of their care and support plans. One person said, "Before I came here [registered manager's name] came out to see me. We spoke about what help I need. I have been fully involved in developing my care plan."

The care and support plans we looked at showed us that people, and where necessary their family, had been involved. They were individual to the person and contained information including the person's needs, where they grew up, what they did for an occupation and details of those that mattered to them.

People were supported by a staff team who knew them well and who took an interest in them. When talking with staff they were able to tell us about those they supported including their life histories and what they needed support with. One relative said, "It is such a small thing but everyone knows how [relative's name] likes their hair brushed. This means so much to us as a family as we know it would mean so much to them."

People's support was reviewed regularly and whenever there was a change in their personal circumstances. One relative told us that following their family member experiencing a period of ill health they were informed and the care plans amended to account for the changes. They went on to say, "We are fully consulted on any changes that are needed. Communication is excellent and we are very grateful that we are kept up to date."

People told us they took part in activities that they enjoyed and found interest in. One person told us they just enjoyed sitting, relaxing and reading. One relative told us, "When the weather is nice we all have a garden party. However, if it is not so nice [staff member's name] will bring in flowers and we can take part in things like flower arranging."

People told us they knew how to raise a complaint or a concern if they needed to do so. However, all those we spoke with told us that they had never needed to formally raise any complaints with the provider. We checked and saw that the provider had systems in place to investigate and respond to any complaints should they receive any.

Is the service well-led?

Our findings

People told us, and we saw, that the registered manager worked alongside the care team when delivering care and support. It was evident to us that they understood the day-to-day culture of Highfield House Nursing Home. One staff member said that the registered manager worked with them most days and took an active caring role when supporting people and the staff team.

People and relatives told us they felt involved in the service they received. One relative told us that they had such regular contact with the provider they constantly had the opportunity to talk about where their family member lived. Another relative said, "I can honestly not think of anything that could be done differently. If I could I would tell [registered manager's name] and I have full confidence they would make the changes."

We asked staff about the values they followed when assisting those who lived at Highfield House Nursing Home. Staff told us that they believed the aim of the providers was to provide homely care for people in a small family-run location. Those living there and their relatives told us this was the type of care they experienced at Highfield House Nursing Home.

Staff members told us they did not have formal staff meetings but they communicated with each other and the management team every day. One staff member said, "It is at these everyday meetings that we talk about the things that matter regarding people and us as a team. This way we can be sure immediate action is taken." Staff we spoke with told us they were valued as individual employees and that their opinions mattered to the provider.

Staff members understood the policies and procedures that informed their practice including the whistleblowing policy. They were confident they would be supported by the provider should they ever need to raise such a concern.

The provider undertook regular checks to drive quality. As a result of these checks, actions were identified for completion. For example, following one such quality check the registered manager identified that a review had not occurred within their required timescale. As a result, the review of the individual's care and support plan had been completed.

A registered manager was in post and present at this inspection. They understood the requirements of registration with the Care Quality Commission. The registered manager had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.