

Kay Care Services Ltd

# Hepscott Care Centre

## 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

Hepscott Care Centre is a residential care home providing accommodation for persons who require personal and nursing care to up to a maximum of 40 people. The service provides support to older people, including people who live with a dementia related condition. At the time of our inspection there were 30 people using the service. The care home accommodates people in one adapted building.

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

There were sufficient staff to support people safely. Staff had received safeguarding training and were clear on how and when to raise their concerns. Where appropriate, actions were taken to keep people safe.

Improvements had been made to medicines management. Staff followed effective processes to assess and provide the support people needed to take their medicines safely. Staff contacted health professionals when people's health needs changed.

People and relatives were very positive about the caring nature of staff and had good relationships with them. They trusted the staff who supported them. People's comments included, "I think the staff are really nice and are dedicated to doing their best for me" and, "It's like home-from-home and the cooking is very good."

Staff followed good infection control practices. The environment was showing signs of wear and tear and the provider provided an immediate action plan of refurbishment.

Records provided guidance to ensure people received safe, person-centred care and support from all staff members. A person told us, "I don't think there's a better home to be in. This is perfect, staff take time with you, they are really nice, and I think they are dedicated to their job."

There was a welcoming, cheerful and friendly atmosphere at the service. A relative told us, "This home has been an absolute lifeline to me and our family. [Name] could no longer look after themselves. Since they got here, they have not had any time in hospital, and is well-looked after by staff."

Staff spoke positively about working at the home and the people they cared for. They said communication was effective to ensure they were kept up-to-date about any changes in people's care and support needs.

Staff respected people's diversity as unique individuals with their own needs. The staff team knew people well and provided support discreetly and with compassion.

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](http://www.cqc.org.uk)

#### Rating at last inspection and update

The last rating for this service was requires improvement (published 29 July 2021).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an unannounced inspection of this service on 14 June 2021. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Hepscott Care Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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.

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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.

# Hepscott Care Centre

## 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

The inspection was carried out by 1 inspector and 1 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

Hepscott Care Centre 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. Hepscott Care Centre is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

Inspection activity started on 22 November 2022 and ended on 28 November 2022. We visited the location on 22 November 2022.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 all this information to plan our inspection.

#### During the inspection

We spoke with 10 people who used the service, 3 relatives, 1 visiting healthcare professional and 9 staff, including the registered manager, operational manager, deputy manager, 4 support workers including 1 senior support worker, activities co-ordinator and the cook.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

At the last inspection the provider had failed to manage people's medicines safely. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

### Using medicines safely

- Improvements were made to systems to manage controlled drugs, so medicines were managed safely.
- Staff followed systems and processes to prescribe, administer, record and store medicines safely. A person commented, "Staff give me my tablets when I need them. They know what they are doing."
- People received supported from staff to make their own decisions about medicines wherever possible.
- Medicines risk assessments and associated care plans ensured staff understood how to provide this support in a safe and person-centred way.

### Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff were trained on how to safeguard people.
- People and relatives said people were kept safe. A person told us, "Yes, I feel safe here. The staff take care of you, they want to help."

### Assessing risk, safety monitoring and management

- People lived safely because the service assessed, monitored and managed safety well.
- Systems to manage risks to people's health, safety and well-being were well-managed. A relative commented, "I think [Name] is safe in the care of staff here. Interaction between staff and the person is excellent. [Name] has a pressure pad next to their bed, so that if they try to get up themselves, it sets an alarm off and staff come to help them."
- Care plans and risk assessments were accurate and reviewed regularly.
- Staff managed the safety of the living environment and equipment in it through checks and action to minimise risk.

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. Any conditions related to DoLS authorisations were being met.
- Consent to care and treatment was sought in line with the MCA.
- Mental capacity assessments and best interest decisions were appropriately made and documented.

#### Staffing and recruitment

- There were sufficient staff to support people safely. Staff met people's needs promptly and were unhurried when assisting them. A person told us, "If I need to ring the call-bell, they [staff] are straight there for me." A relative commented, "I think there are enough staff; there is always someone about and they are busy helping people to walk, or to eat or in some other way. I pretty much know all the staff who work here, and I don't notice any agency staff."
- New staff were recruited safely with all appropriate pre-employment checks done before they started work.

#### Preventing and controlling infection

- An infection control system was in place. However, not all areas of the home were well-maintained and there were signs of wear and tear.
- Some carpets were marked and showing signs of wear and tear. The provider responded immediately and provided an action plan of timescales for refurbishment and carpets to be replaced.

#### Visiting in care homes

- The registered manager followed the latest government guidance with regard to visiting during an outbreak of Covid-19. A relative told us, "If family come to visit, we have to book a visit and wear a mask."

#### Learning lessons when things go wrong

- People received safe care because staff learned from safety alerts and incidents.
- The registered manager managed people's safety well. Staff recognised incidents and reported them appropriately, and the management team investigated them, and shared lessons learned.
- The registered manager analysed incidents and near misses on a regular basis so that trends could be identified, and appropriate action taken to minimise any future risk.



# 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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Quality assurance within the service was effective.
- The provider and the registered manager had clear and effective oversight of the service. A person told us, "The home's run well, they're caring people. The food is good too. They make everything themselves and go out of their way to get you a cuppa if you want one. The staff know what I like. I can have a shower every morning if I want one."
- Management made regular checks on the quality of the service using a range of audits. Where improvements were identified these were acted on. Specific audits had been completed to learn and improve from the findings of the last inspection and to check regulatory requirements were met.

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

- Systems promoted a positive, person-centred culture to benefit people living at the service. A relative said, "Sometimes it's a bit busy, but there's never any tension. I feel comfortable here when I visit and there's always someone to talk to."
- People were listened to, engaged with and they received person-centred care. A person commented, "I think the staff are really nice and are dedicated to doing their best for me."
- People were provided with support which was constantly analysed and evaluated to improve their well-being.

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

- People were involved in decisions about their care. They were encouraged to be involved in the running of their lives and the service.
- Feedback was sought from people and relatives. A relative told us, "I have filled in 2 surveys in the year that [Name] has been here. They ask about the cleanliness of the home, what do we think of the food, they ask me how I think [Name] looks. Also, the availability of staff and our access to information."
- Staff and relatives told us communication was effective to ensure they were kept up-to date about people's changing needs.
- Staff told us they felt involved in the service and had opportunity to put forward suggestions. They said they were well-supported. They were very positive about the management team and said they were "very approachable."

Continuous learning and improving care; Working in partnership with others

- The service worked well in partnership with other health and social care organisations, to help improve the well-being of people who used the service. A visiting professional commented, "Staff have gone out of their way to support [Name]. They have helped [Name] progress and improve their quality of life."
- There was a focus on learning and improvement. Staff were encouraged to develop their skills through training and personal development.
- The management team took on board people's opinions and views to make improvements.

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

- Management understood the duty of candour and the need to be open and honest. The registered manager had reported incidents to CQC and other stakeholders where appropriate.