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Heathside Retirement Home

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Heathside Retirement Home (known as Heathside) is a residential care home providing personal care to 30 people aged 65 and over at the time of the inspection. The service can support up to 30 people.

All bedrooms are single occupancy with the majority having an en-suite toilet. There are two lounges, a new conservatory and an accessible garden to the rear of the property.

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

Quality assurance systems had been improved. A sample of care plans and night records were checked each month. Action plans agreed with the local authority and medicines optimisation team had been implemented.

Risks were identified and guidance provided for staff to manage these risks. Summaries of people's risks and support needs had been written and were reviewed each month. Checks made by the night staff were fully recorded. Procedures were in place if a person did not want staff to check them during the night.

The medicines round had been reviewed with the medicines trolley being taken to the lounge where people were located when administering their medicines.

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.

Staff participated in the COVID-19 testing programme and visiting arrangements were safe. We signposted the service to the government advice on the correct wearing of masks as we observed some staff wearing their masks below their nose.

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 requires improvement (published 16 September 2020) and there was one breach of regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this targeted inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this targeted inspection to check whether actions had been taken to address the breach identified at the last inspection in relation to Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on breaches of regulations or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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 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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our safe findings below.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our well-led findings below.

Inspected but not rated

Heathside Retirement Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether actions had been taken to address the breach identified at the last inspection in relation to Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met.

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 one inspector.

Service and service type

Heathside 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 two managers registered with the Care Quality Commission, one of whom was also the provider's senior partner. 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. For the purpose of this report, we will refer to the managers as the senior partner and registered manager. The senior partner was present during our inspection and we spoke with the registered manager by telephone after the inspection.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we wanted to be sure the senior partner or registered manager would be available to speak with us.

What we did before 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 all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with seven members of staff including the senior partner, training and development manager, assistant managers, and care workers. We observed interactions between people and members of staff during the inspection.

We reviewed a range of records. This included two people's care records and multiple medication records. A variety of records relating to the management of the service, including quality audits, were reviewed

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at improvement plans and a clinical commissioning group (CCG) medicines review for the home. We spoke with three relatives of people living at Heathside to gather their feedback about the home.

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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check whether actions had been taken to address the breach identified at the last inspection. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

At our last inspection systems had not been robust enough to ensure incidents were reported and increased risks recognised and assessed. This was a breach of regulation 17 (Good Governance) 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 17.

- Risk assessments and guidance to manage these risks were in place and regularly reviewed. Staff explained people's support needs and these were consistent with the risk assessments and associated support guidance. Relatives said communication with Heathside was good and they had been involved in reviewing their relatives support needs.
- Risk assessments stated if people locked their bedroom door at night and what staff should do if they did this. At the time of our inspection no one wanted to lock their bedroom door at night.
- A summary of people's support needs and risks was used as a reference guide for staff to follow.
- Staff knew how to report any incidents or accidents. These were recorded in the electronic care planning system. All incidents were reviewed by the senior partner or registered manager to ensure any appropriate actions had been taken to reduce the risk of further incidents occurring.

Using medicines safely

At our last inspection we recommended the provider reviewed the process for completing the medicines round. The provider had made improvements.

- People received their medicines as prescribed. The Clinical Commissioning Group (CCG) had completed a review of medicines at the service in April 2021. Their recommendations had been implemented.
- Staff administering medicines now took the medicines trolley to where people were sitting in the lounge rather than carrying the medicines from the first floor where the medicines trolley was stored. This reduced the risk of dropping tablets and of being interrupted when completing the medicines round.
- Two staff completed the medicines round where possible to reduce the time taken to administer

everyone's medicines.

Preventing and controlling infection

- Staff wore the correct PPE; however, some staff weren't following government guidelines; with their masks being below their nose. We discussed this with the senior partner who said they would re-iterate the correct procedure with the staff so they would adhere to the current guidelines.
- The home was visibly clean throughout. The hours for the domestic staff had been increased. Visiting guidelines were being followed, with visitors being able to use the conservatory, with an entrance through the garden.
- Staff and people living at the home were regularly tested. All new admissions had to have a negative COVID-19 test within 48 hours of moving to Heathside and then undertook a period of self-isolation.

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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

At our last inspection the quality assurance system was not robust. This was a breach of regulation 17 (Good Governance) 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 17.

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

- Monthly audits were now more robust. Four or five care plans were audited each month, along with the records for checking people during the night. Care plans were fully reviewed six to eight weeks after people moved to the home to ensure they reflected the person's needs. Medicines audits were completed each week.
- Records for the support provided at night and the two hourly checks were fully completed. Brief daily records were also completed for the support people had during the day.
- Following our last inspection an action plan was agreed with Trafford local authority commissioning team. This had been completed.
- Assistant managers were being supported to develop their skills in writing care plans. They, and the senior partner, had completed further training in care planning using the electronic care planning system.
- Following a period of planned absence, the registered manager currently worked night shifts and at weekends. This enabled additional communication with, and oversight of, the night staff and the support people needed at night. The registered manager said they regularly spoke with the senior provider to ensure there was good communication across the management team.
- The senior partner, registered manager and the training and development manager were clear about their roles in the quality assurance system. Checks were made of the relevant records when completing the audits, including if there were any patterns in the incident and accident reports.