

Eothen Homes Limited

# Eothen Residential Homes - Gosforth

## Inspection report

45 Elmfield Road  
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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

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

### About the service

Eothen Residential Homes - Gosforth is a residential care home which provides older people with personal care. The home can accommodate up to 37 people. On the day of our inspection visit, 35 people were using the service.

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

People and their relatives told us the care was safe and they were happy at the service. Medicines were managed safely using a new electronic system. Staff were recruited safely and there were enough staff to meet people's needs. People were protected from abuse by staff who understood how to identify and report concerns. Risk assessments were in place to ensure staff knew how to keep people safe.

Senior staff carried out detailed assessments of need to ensure the home could effectively support any new admissions. People were supported to have enough to eat and drink and staff were trained to support people who had different dietary needs. Staff told us they were well trained and they were well supported and supervised by the management team. The service worked well with community healthcare partners such as the local GP practice to ensure people received healthcare support where needed.

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. On the day of our visit a prospective parliamentary candidate visited the home and everyone was encouraged to share their views about the forthcoming general election. We saw that people were encouraged and supported to vote.

Interactions between people and the staff team were positive and relatives also said they were made very welcome at the home. We spoke with relatives visiting their loved one on their birthday and the home provided a homemade cake and tea which they were delighted by. People were treated with kindness, dignity and respect.

People received personalised care that was responsive to their needs and preferences. People were supported to engage in activities to reduce their risk of social isolation. People were supported to express their spirituality, with whatever religion they chose to follow. People and their relatives knew how to make a complaint, and those people we spoke with said they had opportunity, through regular meetings, to raise any issues they had.

There was a clear management structure and staff were supported by the registered manager. People's feedback was sought regularly and acted upon. We received positive feedback about how the service was managed. Quality assurance systems were completed.

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

The last rating for this service was good (published 09 June 2017).

### Why we inspected

This was a planned inspection based on the previous rating.

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

### 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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service effective?**

The service was effective.

Details are in our effective findings below.

**Good** ●

### **Is the service caring?**

The service was caring.

Details are in our caring findings below.

**Good** ●

### **Is the service responsive?**

The service was responsive.

Details are in our responsive findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-led findings below.

**Good** ●

# Eothen Residential Homes - Gosforth

## **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 Care Act 2014.

#### Inspection team

The inspection was undertaken by one inspector.

#### Service and service type

Eothen Residential Home – Gosforth is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 was unannounced.

#### 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. 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 the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with 10 people who used the service and four relatives about their experience of the care provided. We spoke with eight members of staff including; the registered manager, the deputy manager, a team leader, two care workers, the administrator and the chef. We also spoke with a visiting G.P.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 good. This meant people were safe and protected from avoidable harm.

Safeguarding systems and processes, including recruitment

- People we spoke with said they felt safe. Our observations for people who could not communicate with us were that they were comfortable with the staff members supporting them.
- All relatives we spoke with said they were kept informed in relation to any concerns regarding safety. One relative said, "We have great peace of mind, knowing they are safe and well cared for."
- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They told us they received robust training and records confirmed this.

Assessing risk, safety monitoring and management

- Risk assessments were in place to reduce the risks to people. These included environmental and individual risk assessments and provided staff guidance on actions to take to reduce the risk of harm.
- The service assessed people prior to them moving to the service to ensure that the service could safely meet the person's individual needs.
- The environment and equipment were safe and well maintained.

Staffing and recruitment

- There were enough staff to meet people's needs.
- The service was actively recruiting for care staff and were currently using some agency staff members. Those we spoke with said they were given a good induction and well supported.
- Our observations during the inspection indicated that staff were prompt to respond to people's needs.
- The provider had arrangements in place to carry out checks on staff to assess their suitability before they were employed in the service.

Using medicines safely

- Arrangements were in place for the safe receipt, storage, administration and disposal of people's medicines.
- The service had moved to an electronic administration and recording system recently.
- The service showed it had worked with the GP practice and pharmacy to reduce medicine waste.
- Medicines administration records showed people received their medicines in a timely way.
- Records showed, and staff confirmed they had received training in medicines management and they had been assessed as competent in this area.

Preventing and controlling infection

- Staff had received infection control training and said they had plenty of gloves and aprons available to

them.

- The home was clean and there were no unpleasant smells.

Learning lessons when things go wrong

- The service was committed to driving improvement and learning from accidents and incidents.

Information was analysed and investigated. Action was taken to identify suitable solutions to address any risks identified.

- We saw the registered manager proactively booked agency staff early to ensure the home would have enough staff. They would then offer additional shifts to permanent staff before cancelling the agency worker. This showed forward planning whilst recruitment took place.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed prior to their admission by senior care staff. Their needs and choices were documented.

Staff support: induction, training, skills and experience

- New staff were supported through a period of induction and training. We met with one new staff member who said, "I had plenty of shadowing and staff really gave me confidence."
- Staff confirmed they were supported using training and supervision. Supervision records were very detailed and addressed issues of attitude and performance very clearly.
- The service had regular meetings to ensure staff were kept informed about developments at the service.

Supporting people to eat and drink enough to maintain a balanced diet

- People told us they enjoyed their meals and relatives were complimentary about what was on offer.
- We asked the registered manager to review the experience in the smaller dining area in the lounge, as this was not as well organised as the main dining area.
- When required, staff assisted people to eat and drink. Staff had included dietary information from other professionals into people's care plans. This included information on when people needed soft or pureed diets.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- We spoke with a visiting GP who told us the service worked well with them and had begun a twice weekly visit programme to support people's health.
- Care records detailed when people had support from healthcare professionals and guidance was written into care plans.

Ensuring consent to care and treatment in line with law and guidance.

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 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.

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 MCA.

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

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service obtained copies of lasting power of attorney (LPA) when people moved to the service. Where relatives or others were already designated as attorneys, the service ensured they saw the legal document that recorded this. LPA is a legal process that allows designated individuals the authority to make decisions on a person's behalf, if they do not have the capacity to do so themselves.
- We observed staff supporting people with day to day decisions and respected their choices.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People who used the service were complimentary about the staff. Comments included "They are always kind," and "They listen to you and take their time."
- Staff were observed to be kind, patient, respectful and considerate. They understood every person and knew what was important to them. They knew people's preferences and how they preferred to spend their days.
- Staff had created a relaxed and friendly home. People's body language indicated they were at ease. We saw staff gently using touch to support a person who was becoming distressed about where they were.
- Staff had received training on equality and diversity. The service was run by a Christian charity, but we saw that everyone whatever their religious or spiritual background was welcomed.

Supporting people to express their views and be involved in making decisions about their care

- During our visit a local parliamentary candidate visited the home. The activity co-ordinator led an inclusive discussion with those who wished to attend and encouraged people to share their views and ask questions. We also saw people passing their completed postal votes to the home's administrator for posting. This showed people's rights were promoted.
- People were involved in decisions, whether it was to do with their own personal needs or the needs of the home. Relatives told us they took part in discussions about the person's care and support needs.
- Both formal and informal meetings for people who used the service took place and people were asked for their views and to share ideas.

Respecting and promoting people's privacy, dignity and independence

- Staff encouraged people to maintain their independence where possible.
- Staff treated people with dignity and respect, we saw they knocked on doors and sought permission before entering.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Care was based on people's assessed needs and preferences and was person-centred. Person-centred planning is a way of helping someone to plan their life and support, focusing on what is important to the person.

- Care plans were in place covering a range of people's health and social needs. They contained detailed guidance for staff on how these needs could be met to ensure people received the care and support they wanted and needed.

- Care plans were reviewed regularly and reflected people's current needs.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff respected people's right to family life and avoid social isolation. Relatives told us they felt welcomed into the service.

- The service employed an activity co-ordinator. We saw they were always looking at new opportunities to develop the activities at the home. People we spoke with told us they enjoyed visits to the library, Tynemouth for fish and chips and to events such as a river cruise and to a Chinese restaurant.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff understood people's communication needs.

- Information around the home provided people with knowledge about events and activities scheduled to take place.

Improving care quality in response to complaints or concerns

- There had been no recent complaints. Information relating to how to make a complaint was readily available to people.

End of life care and support

- Staff respected people's wishes. They had involved people and their relatives in discussion about end of life care. People's preferences were detailed in their care plans.

- Staff carried out observations to ensure people were not suffering from pain and accessed healthcare services out of hours when required.

# Is the service well-led?

## Our findings

Well-Led – this means 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 good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership by the provider of person centred, high quality care; Engaging and involving people using the service, the public and staff

- One relative said, "The registered manager is very open to listening."
- The service involved people and their families in day to day discussions about their care and support. Family members told us that they felt reassured and very comfortable with the management at team at the service.

- Regular staff meetings occurred; staff said they felt listened to and able to contribute. Staff told us, "It is a good place to work," and "I asked for more light in bedrooms and the manager bought us all these torches they are great."

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

- There was a positive culture in the home. Staff provided a happy yet calm atmosphere where people were empowered to participate in their care and make their own decisions.

- Our observations during our visit were that the service was well run and people were treated with respect and in a professional manner.

- The registered manager had systems and procedures to monitor and assess the quality and safety of their service. Audits were used to assess standards and drive up improvements. We saw these were regularly completed and reviewed.

- All appropriate reporting had been carried out to alert the CQC and local authorities when incidents occurred.

Working in partnership with others

- The service had good links with the local community.

- The service worked in partnership with health and social care professionals who were involved in people's care.