

## Greenacres Nursing Home Limited

# Greenacres Care Home

### Inspection report

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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

Greenacres Care Home is a residential care home providing accommodation and personal care to 39 people aged 65 and over at the time of the inspection. The service is registered to support up to 41 people.

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

The home provided people with a safe, well-maintained and clean environment to live in. People were protected from the risk of harm and abuse and the home ensured that only suitable staff were employed to work at the home. People were supported to take their medicines safely and as prescribed.

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. People's needs were appropriately assessed and met by staff who had the required skills, training and support.

People were well-supported with their nutrition and hydration needs and the feedback about the food at the home was positive. One relative said, "The food is good and they know what [Relative] likes. [Relative] has put on weight since coming here and looks much better." The atmosphere and appearance of the home was homely and people looked comfortable and relaxed in their surroundings.

All the people and relatives we spoke with gave us positive feedback about the staff at the home. One person told us, "The staff are like a family to me." Staff knew the people they were supporting well and we observed many warm, friendly and caring interactions between staff and the people living at the home throughout our inspection.

The care plans we looked at were informative, regularly reviewed and reflected the needs of the people supported by the service. This included considering and meeting any communication, spiritual and cultural needs. The home had not received any formal complaints since our last inspection but people told us they would feel comfortable raising concerns if necessary and we saw information about making a complaint was accessible.

There was a good range of activities on offer to people living at the home, both on a group and individual basis. People were also supported to keep up with their religious preferences.

There was a kind and caring culture amongst staff at the home, which was led by an experienced registered manager. All the people and relatives we spoke with were familiar with the registered manager; they felt they could approach them with any concerns and any issues would be addressed.

There were various systems in place to gather people's feedback about the quality of service being provided. All of which we reviewed was positive. One person wrote, 'I think it's smashing and I enjoy being here.' Staff

at the home engaged well with other health and social care professionals to ensure people's health and wellbeing was maintained.

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 7 December 2016).

Why we inspected

This was a planned inspection based on the previous rating.

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 remained 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 remained caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service remained responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service remained well-led.

Details are in our well-Led findings below.

Good ●

# Greenacres Care 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 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

This inspection was carried out by one inspector and an 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

Greenacres Care Home 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 the inspection

We checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. We also gathered feedback about the service from the local authority and used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with nine people who lived at the service and four relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, senior care worker, care workers, the activities coordinator and the chef. 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. We also spoke with two health and social care professionals who were visiting people at the home on the day of our inspection.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two 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.

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

Systems and processes to safeguard people from the risk of abuse

- We saw that there were policies and procedures in place to guide staff in relation to safeguarding vulnerable adults and whistleblowing.
- Staff had received training on this topic and information about how to raise safeguarding concerns was readily available in various places throughout the home.
- Records showed that staff at the home took appropriate action when any such concerns arose.

Assessing risk, safety monitoring and management

- We found that the home was well-maintained and the safety of the environment was regularly checked by staff. The home had a variety of up-to-date safety certificates that demonstrated that utilities and services, such as gas and electric had been tested and maintained.
- Environmental Health inspected the home's kitchen in September 2018 and awarded a five, the highest possible score.
- Fire safety at the home was well-managed. This included a fire risk assessment; regular checks and maintenance of fire safety and firefighting equipment; personal emergency evacuation plans (PEEPs) for people living at the home; fire safety training for staff and regular fire drills.
- People had personalised risk assessments in place and these were reviewed regularly.

Staffing and recruitment

- We looked at staff rotas and observed staffing levels during our inspection. We saw that there were enough staff to meet people's needs and that staff attended to people promptly throughout our inspection.
- People told us they felt there were enough staff at the home. One person said, "Oh yes, they're always there to help."
- Staff were safely recruited by the home. Records showed that the required pre-employment checks, such as criminal records checks, had been carried out. This ensured that only people who were suitable to work with vulnerable adults were employed by the home.

Using medicines safely

- Medicines were safely administered, stored and recorded at the home by staff who had the required knowledge and skills.
- People and their relatives told us that staff supported them with their medicines correctly and at the right times.
- The home also had robust systems in place to ensure the safety and quality of medicines administration was maintained.

### Preventing and controlling infection

- During our inspection the home was clean and free from unpleasant odours.
- We observed that staff used personal protective equipment (PPE) when necessary, such as when supporting people with personal care.
- This meant that staff and people were protected from the risk of infection being spread.

### Learning lessons when things go wrong

- We saw that accident and incident policies and procedures were in place and there was a system to record any accidents and incidents that had occurred.
- Staff we spoke with knew how to safely and effectively manage these situations.
- Records showed that appropriate action had been taken in response to any accidents and incidents that had occurred, and staff regularly reviewed this information to help identify any emerging patterns or trends that needed addressing.



# 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 requires improvement. At this inspection this key question had improved to 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 effectively assessed before they were supported by the service. This ensured that staff had the skills and capacity to safely and effectively meet people's needs. The information from the assessment formed the details of the care plans and risk assessments.
- People's needs in relation to equality and diversity were considered during the assessment and care planning process, such as age, disability and religion.

Staff support: induction, training, skills and experience

- New staff were appropriately inducted into their role at the home and staff received ongoing training relevant to their roles.
- Staff were supported with regular supervisions and annual appraisals. This provided staff and senior staff with a formal opportunity to discuss performance, any concerns and to address any training needs.
- Staff told us that they felt well-supported in their roles.

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

- People were well-supported with their nutrition and hydration needs and this was well-recorded by staff.
- People were offered drinks and snacks regularly throughout our inspection.
- We found that people's preferences were considered and staff had access to this information both in people's care plans and in a summarised format in the kitchen.
- We observed positive mealtimes experiences, during which staff attentively supported people.
- The food we tasted during the inspection was tasty, hot and well-presented. Most people gave us positive feedback about the food. Comments included, ""The cakes are lovely", "Can't think of anything that would improve the food" and "The food is good and they know what [Relative] likes. [Relative] has put on weight since coming here and looks much better."

Staff working with other agencies to provide consistent, effective, timely care

- We found the home worked effectively with other healthcare professionals to ensure people's health and wellbeing was maintained.
- Staff sought support when required and assisted people to access other healthcare services when necessary.
- We saw that staff monitored changes to people's needs and made referrals to appropriate healthcare professionals in a timely manner, such as district nurses, dietitians, speech and language therapists, tissue viability services.

- The health and social care professionals visiting people at the home on the day of our inspection gave us positive feedback about the home and told us staff always listened and acted upon their advice.

#### Adapting service, design, decoration to meet people's needs

- People had been supported to personalise their rooms with their own pictures, items and furniture.
- The atmosphere and appearance of the home was homely and people looked comfortable and relaxed in their surroundings.
- The environment was well-maintained and safe but some parts of the home needed updating and decorating. For example, some of the bathrooms were functional but were outdated and could be improved for people.
- Some of the people living at the home were living with dementia. We saw there were some adaptations at the home to assist people living with dementia in finding their way around the home and understanding other information. However, we discussed with the registered manager that this could be developed and improved with some research and creativity.

#### 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.

- Consent to care and treatment was sought and recorded in line with the principles of the MCA.
- Where people lacked the capacity to make particular decisions, they were supported to have maximum choice and control over their lives and were supported by staff in the least restrictive way possible; the policies and systems in the service supported this practice.
- Where decisions needed to be made in people's best interests, relevant people were involved and appropriate records had been completed.
- DoLS applications and authorisations were effectively monitored and managed.

# 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 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

- All the people and relatives we spoke with gave us positive feedback about the staff at the home. Comments included, "All the staff are nice, very nice, and they listen to me. It's lovely here" and "The staff are like a family to me."
- Staff knew the people they were supporting well, including their needs and preferences. For example, one person needed regular calm and caring reassurance on an issue that caused them anxiety. We saw that staff quickly recognised when this person needed this support and they did so in a caring and compassionate way.
- We saw from people's care plans and the staff we spoke with that the home treated people as individuals with individual needs. For example, the home considered people's personal histories and any religious and cultural preferences.
- We observed many warm, friendly and caring interactions between staff and the people living at the home throughout our inspection.

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

- People told us that staff supported them to make choices about how they spent their time. One person said, "The staff know what I like to do and will always help if I need them to."
- Records showed that people and their relatives were involved in making decisions about their care and we were told there was good communication between staff, people living at the home and their relatives.
- The home had supported people who required the assistance of advocacy services to do so. An advocate is a person that helps an individual to express their views and wishes and help them stand up for their rights.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us staff respected people's privacy and treated them with dignity and respect. We saw examples of this, such as staff knocking on people's doors before entering and respectfully and discretely communicating with people when assisting them to the toilet.
- People living at the home had been supported by staff to maintain their appearance and wore suitable clothing for the weather.
- We found that people's confidential information, such as care plans, was stored securely at the service's office and only people who required access could do so.
- Staff were able to give us examples of how they supported people to maintain their independence as much as possible, such as encouraging people to complete as many of their own personal care tasks for themselves as they could and supporting them to make choices about what to wear. One person told us,

"The staff support me to be as independent as possible."

# 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 remained good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The care plans we looked at were informative, regularly reviewed and reflected the needs of the people supported by the service. Care plans contained relevant information about the individual, such as their background, communication methods, health, emotional, physical health, spiritual and cultural needs.
- People and their relatives were involved in the care planning and review process to ensure people's care plans were person-centred. One person said, "I'm always involved in care planning."

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.

- Care plans contained clear information on how to support people with any communication needs. For example, ensuring people who wore hearing aids or glasses were supported to wear them.
- Staff at the service considered the individual ways people needed to be given information so they could understand it. For example, one person's first language was not English. Staff ensured this person had the support of translation services or family when needed. Staff had also developed flashcards to help communicate about day-to-day tasks and support.

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

- There was a good range of activities on offer to people living at the home, such as quizzes, catch phrase, bingo, performances by an accordionist, balloon exercises, baking, art and crafts.
- During our inspection we saw that many people enjoyed taking part in the group activities and people who preferred their individual hobbies and interests were supported to do so too.
- One person told us, "I love painting and drawing." This was as they were happily painting a picture of some flowers.
- The home also assisted people to keep up with their religious preferences. For example, a eucharistic minister regularly visited the home and staff supported people to attend places of worship.
- People's individual social and cultural needs were also considered. For example, one person's first language was not English had been supported to access television channels and films in a language they could understand.

#### Improving care quality in response to complaints or concerns

- The home had not received any formal complaints since our last inspection. During our last inspection we found the home managed complaints well.
- Records showed that the registered manager documented any minor concerns or negative feedback received and ensured any issues were appropriately addressed. For example, we saw a relative had reported a waste bin was overflowing in the car park, so a new bin had been ordered. We noted the bins were tidy on the day of our inspection.
- People told us they would feel comfortable raising concerns if necessary and we saw information about making a complaint was accessible.

#### End of life care and support

- None of the people living at the home were receiving end of life care at the time of our inspection. However, we found that people's wishes on their end of life care had been discussed, documented and plans put in place to ensure that their preferences were met. This included recording people's wishes regarding resuscitation.
- Staff were supported with relevant training to meet these needs when necessary and the home had links with other relevant health professionals to ensure people's end of life care needs were effectively met.

# 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 remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on their duty of candour responsibility

- There was a kind and caring culture amongst staff at the home.
- Staff treated people with respect and there was a very good rapport between the staff and people living at the home.
- Staff and the visiting health and social care professionals gave us positive feedback about the registered manager and their leadership of the home.
- The registered manager understood their responsibility regarding the duty of candour and there was an open and transparent culture at the home.
- All the people and relatives we spoke with were familiar with the registered manager; they felt they could approach them with any concerns and any issues would be addressed.

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

- Ratings from the last CQC inspection were clearly displayed within the home, as required.
- The registered manager had notified the CQC of all significant events which had occurred in line with their legal obligations.
- The service had clear lines of accountability and there was a stable management team in place.
- The home had a range of policies and procedures in place that staff were able to access if they needed any guidance. We saw that these policies and procedures were up-to-date and regularly reviewed.

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

- There were various systems in place to gather feedback about the quality of service being provided, including a feedback questionnaire completed every six months. All of the feedback we reviewed was positive. One person wrote, 'I think it's smashing and I enjoy being here.'
- Records showed that the registered provider also held regular staff meetings. These meetings were documented and provided staff with the opportunity to receive and share any important information.

Continuous learning and improving care

- The registered manager had a range of regular audits in place to monitor, assess and improve the quality and safety of service being provided at the home. These ranged from environmental and health and safety checks to medicines audits.

- The registered manager attended the local authority's provider forum and is a member of the Liverpool Registered Managers Network. These meetings are a forum that care services can attend to build relationships with other care providers in their local area and share ideas for service improvement and best practice. It also has guest speakers who provide updates on changes to legislation and good practice guidance.

#### Working in partnership with others

- Staff at the home engaged well with other health and social care professionals to ensure people's health and wellbeing was maintained.
- We saw that referrals to other health services were managed well and appropriately followed up on.