

#### **HC-One Limited**

# Swallownest Nursing 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

Swallownest Nursing Home is situated approximately nine miles from Rotherham. It is a purpose built home providing care for up to 65 older people. The home has bedrooms on the first floor and ground level of the building. There is a passenger lift. There is parking and gardens to the rear of the building. On the day of the inspection 64 people were living in the home.

This inspection took place on 5 and 6 January 2017. The inspection was unannounced on the first day. When we visited the home in February 2015 we rated the home as Good.

The home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

All of the people who used the service and most visiting relatives we spoke with gave positive feedback about the home, the staff, the food, the activities and the care provided.

People are supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

There was a homely feel and everywhere was clean. People were well cared for and there were warm interactions between people who used the service and staff. People's views and opinions were sought and taken in to consideration and staff demonstrated a good knowledge of people.

There were sufficient staff, who were well supported through a system of induction, training, supervision, appraisal and professional development.

The recruitment systems were designed to make sure new staff were only employed if they were suitable to work at the service.

The staff were aware of their responsibility to protect people from harm or abuse. People who used the service and staff were confident to raise any concerns.

There was a comprehensive, formal quality assurance process in place. This meant that the service was monitored to make sure good care was provided and planned improvements and changes could be implemented in a timely manner.

#### 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 remains safe.	
Is the service effective?  The service remains effective.	Good •
Is the service caring?  The service remains caring.	Good
Is the service responsive?  The service remains responsive.	Good •
Is the service well-led?  The service remains well-led,	Good •



## Swallownest Nursing Home

**Detailed findings** 

#### Background to this inspection

Start this section with the following sentence:

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.

We carried out this inspection on 5 and 6 January 2017 and it was unannounced on the first day. The inspection team consisted of an adult social care inspector and an expert by experience. The expert by experience was a person who has personal experience of using or caring for someone who uses this type of service.

During our inspection we spoke with nine people who used the service and ten people's visiting relatives. We also spoke with an activity coordinator, seven members of care staff and the registered manager.

During our visit to the service we looked at the care records for four people, and other records that related to how the service was managed, such as staff personnel and training records, complaints and quality assurance files.

Before our inspection, we reviewed information we held about the service, which included incident notifications they had sent to us. We contacted Rotherham Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We also obtained information from Rotherham Council and Doncaster Council, who commission services from the provider.



#### Is the service safe?

#### Our findings

Everyone we spoke with who used the service told us that they felt very safe with the staff. For instance, one person said, "I was falling a lot when I was at home and my family were very worried about me. Since I've been here, they've got peace of mind because they know that the staff look after me very well." Another person told us, "They [the staff] are brilliant. I was struggling at home, but I didn't want to come here. Now, I wouldn't swop it for anything. I am warm and safe. Nothing is too much trouble for the staff." Another person said, "I feel safe with [the staff] being here. I am very independent and like to do as much for myself as I can, but they are always ready to help me, or steady me if I need them."

One person's relative said, "We looked at a number of places before we came here. I really did not want [my family member] to come into a care home, but other people told us this one was really good, and it is. My [family member] is definitely safe here."

We saw that there were sufficient staff on duty to meet people's needs and people we spoke with thought there was sufficient staff. For instance, one person who used the service said, "'There is always somebody around, but they are really busy. They all work ever so hard but they've always got time to have a word. They never make me feel that I'm being a nuisance. There is just so much for them to do." One person's relative told us, "They are always busy, but my [family member] doesn't have to wait overly long before staff come to him."

We saw from people's care records that the provider had risk management systems in place. This included clear guidance for staff about managing key risks for people. People's care plans were individualised, taking into account each person's needs and wishes. Policies and procedures were in place to keep people safe and to make sure staff provided care in a consistent way that did not compromise people's rights. Records showed that risks were reviewed regularly and plans updated when necessary.

We observed people being moved and these procedures were carried out safely and gently. Staff using the hoist asked the person if they wanted to be moved (from wheelchair to armchair) and talked through what they were doing, reassuring the person throughout the process.

The provider had safeguarding policies and procedures in place to reduce the risk of abuse to people who received the service. The staff we spoke with were aware of different types of abuse and the signs that could indicate that abuse had occurred. They had a good understanding of what action to take if they had any concerns that someone might be being abused. We saw that staff were trained in safeguarding vulnerable adults. The provider also had a policy for whistleblowing. The care staff we spoke were aware of the policy and how to whistle blow, should the need arise.

We looked at the arrangements in place for the administration and management of medicines and found that these were appropriate. Medicines were stored securely in locked cabinets. Medication Administration Records (MAR) were accurately completed. Arrangements were in place for the storage of controlled drugs, if required. We saw from training records that all staff who administered medication had received appropriate

#### training.

The environment was clean and smelled fresh. We found the home and equipment to be well maintained. We also spoke with a staff member who said, "The company are very good and the manager is brilliant. If there is anything which needs replacing or repairing as a matter of urgency it gets seen to really quickly. That would include things like call buzzers or anything else vital. We do regular fire drills and bed checks to make sure things are right and people are safe."

There was a recruitment and selection process in place. The staff we spoke with confirmed they had gone through a formal recruitment process that included an interview, pre employment checks of references and a criminal records check.



#### Is the service effective?

#### Our findings

People made positive comments about the food. For instance, one person said, "The food is good. I really enjoy my meals." Another person said, 'I eat really well here. The food is excellent. Sometimes I don't feel like a hot dinner and if I tell them they'll make me a sandwich instead." Another person said, "They come round the day before and tell us what's for lunch the next day and ask what we want, but it doesn't matter if you change your mind when it comes. You can have what you want if they've got it in."

We saw that there were both hot drinks and snack available all day and there were biscuits and beverages for visitors if they wanted them.

Lunch was a social and relaxed affair with staff chatting with people. One person who needed support with eating was assisted by a staff member who focussed on the person they were helping. The staff member asked the person if they wanted assistance before they sat next to them, which showed respect for the person's choices.

People were seated to the tables, which were nicely set with place setting and table decorations. There was a daily menu visible on the wall. Food looked good and was well presented. People were not kept waiting a long time for their lunch and portion sizes were good. The atmosphere was pleasant and relaxed. People were not hurried and could eat in their own time.

Staff told us people were provided with choices of meals and the food was of good quality. Fresh fruit was also available and people had access to snacks and drinks throughout the day. We saw that people's specific dietary needs were included in their care plans and where necessary, other health care professionals such as dietitians and speech and language therapists advised on their care and treatment.

People's records reflected that they had very good access to other healthcare services and people confirmed this. For instance, one person's relative said, "They don't hesitate to call the doctor if my [family member] is unwell."

All the people we spoke with told us that they feel the staff were well trained. Staff told us they had received induction training and worked alongside experienced staff, so they could get to know the needs of each person before providing care and support. Staff had received training in all core areas, along with other training that was relevant to people's particular needs, such as working with people with dementia. Staff files also showed that staff received regular one to one supervision meetings with their manager. This showed us staff had the training and support they required to help them meet people's needs.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS)." Staff were knowledgeable about the MCA and its Code of Practice and knew how to make sure that people's rights were protected if they were not able to make or to communicate their own

decisions. Practice.	The records we saw confirmed that practice in	the service was in line with the MCA Code of	f



### Is the service caring?

#### Our findings

Everyone we spoke with said the staff were extremely kind and caring. People also said that staff are respectful and polite and observe their rights and dignity. For instance, one person said, "I'm very happy. They [the staff] are very cheerful and nice. They are worth their weight in gold." Another person told us, "Staff treat me very well. I get everything I need." They went on to say, "It's lovely here. Christmas here was just fantastic. We had parties and music and dancing every night, I do a lot of dancing. It's just brilliant."

One relative told us, "My [family member] has been here since last April. This place takes some beating. We looked at other places, but this is the best. Both the people and the place are super."

Other comments included: "Staff come in to clean and change or make the beds, but I like to make my own bed. They know that and they just laugh because I've done it before they come. They are smashing.", "I don't like to be thought of as a patient and nobody here treats me that way. They are all very respectful."

We observed interactions between staff and people who used the service. There was a great deal of warmth in these exchanges and it was clear that staff know people very well, as they were able to tell us about people's individual histories, needs and preferences.

We saw that relationships between people who used the service and the care staff were supportive and caring. People told us that their individual nursing and care needs were met and they were treated with dignity and respect. People were given choices and staff were aware of people's likes and dislikes. People we spoke with told us they were encouraged to be independent.

We visited some people in their bedrooms. The rooms were well decorated and people had brought in things to make it more like home, such as ornaments and pictures.

The support plans we looked at included information about each person's life history, needs, likes, dislikes and preferences and staff were able to demonstrate a good knowledge of people's individual preferences. It was evident that people were looked after as individuals and their specific and diverse needs were met.

Regular residents' meetings were held. This was a forum where people could feed back about any issues and talk about ideas to improve the service. We saw from the minutes of these meetings, that trips and activities were discussed and planned.



#### Is the service responsive?

#### Our findings

People who used the service and their visiting relatives told us the service was responsive to people's needs. For instance, people told us that they had been involved in their care plans. One person said, "They talk to us and find out everything about us and what we like and don't like and they write it all down."

The care plans we saw provided detailed information about how the person's planned care and support was to be provided. The plans provided details about the person's life history, their health care needs and the social activities they liked to participate in. Because people agreed to the support they received and their care plans were personalised to reflect their individual needs, this meant staff knew how people wanted and needed to be supported.

People told us about an extensive activities programme, which included entertainers, music, singing and dancing, as well as other day to day social and creative activities. People were encouraged to engage with the local community and some regularly went in small groups to a local day centre for a change of scenery, a catch up with other friends and have a gossip. On one day of the inspection some people told us they had been out for lunch, and we also saw a group of people enjoying a quiz around a large table after lunch.

On another day, singers came to perform. People had invited their families and friends, including friends from the day centre. We saw that one lady had invited her neighbours, and very proudly showed them around the home after the concert had finished.

We were told that activities were tailored to people's needs as much as possible, and a staff member we spoke with said, "I understand that people with dementia have both fluctuating needs and changing needs and to always check what somebody wants to do because it might be different on different days." One person's relative said, "My [family member] is happy as long as he can choose for himself whether to get involved (in activities) or not. He doesn't like it when (staff) try to coax him and he's not in the mood."

One person confirmed that it was a matter of individual choice whether they joined in the activities saying, "I watch TV and read the papers. I like my own company, but the staff respect that, and understand me." Another person said, "Nobody makes me do anything I don't want to do. I get up when I want and, if I want a lie down in the afternoon then it's up to me."

We were told that celebrations for Christmas and Easter were very nice, and a show was organised for Valentine's day, with flowers and chocolates for everyone. One relative told us, 'We have been really impressed with what goes on here. There are some good social events." Another relative said, "Everything is here for people. The hairdresser comes regularly. My [family member] enjoys having her hair done."

The registered manager also shared information with us about the extra special things the staff did to improve people's quality of life and respond to their wishes. For instance, as part of one person's end of life care, staff helped them to fulfill their wishes regarding what they wanted to do in their remaining weeks, with their husband. This included afternoon tea and a look around the gardens of a favorite garden center. The

person wanted to go to the seaside for fish and chips, going to the end of the pier to feel the wind on their face. Staff also transformed the couple's room, to create a candlelit dining experience. The staff also made sure the photographs were made into a keepsake.

Staff supported people in maintaining relationships with their friends and family members and people told us that their visitors were made welcome. One person's visitor said, "We are very much involved with (my relative)'s care. It's like a community here and all the family are encouraged to be part of the team. My relative won't hesitate to make his feelings known if he's not happy. Clearly he'd prefer not to be here but they (the staff) understand that and they know when he's just having a grumble or if something is really bothering him. If they think that, then they will let us know so that we can all talk about it."

We saw the service had a complaints procedure which was displayed. We saw the record of complaints kept in the home when complaints were received, they were responded to, taken seriously, and investigated thoroughly. People we spoke with knew how to make a complaint. One person said, "Everything is fine, but I suppose I'd talk to one of the care staff."

The registered manager also shared information with us about compliments that had been received about the service. One relative had written to the senior management team and had included in their letter, "The entire team have built an amazing reputation and they are your biggest asset, they all are wonderful, caring people and a credit to the ethos of the company and manager. Thank you for a lovely home. Please take care of them, like they take care of us." The person expressed particular praise for two of the nurses saying they "Work their socks off to keep up the standard and reputation of the home."



#### Is the service well-led?

#### Our findings

The service had a manager who was registered with the Care Quality Commission. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

It was clear from talking with staff that the registered manager led by example, to provide a good quality service to people. The décor had been further improved, with lots of little personal and homely touches. The staff team was more settled, and a full complement of nurses had been recruited.

All the staff members we spoke with told us that they really enjoyed working in the home. One staff member told us, "This manager is the best we've ever had. She pushes and pushes to get things done and improved. We have a full schedule of improvements and it's all down to her. She's determined to make this the best home that she can."

Another staff member told us, "I have worked here for a long time and I wouldn't want to work anywhere else. The manager we have now has been really good."

Most relatives we spoke with told us that they thought the home was well run. For instance, a typical response from a relative was, "Our [family member] is really happy here. The manager is very approachable. She is very visible around the home, but her door is always open anyway." The only negative feedback we received was from one relative who had raised issues about the care of their family member, and this was being dealt with through the best interests process.

People's views and opinions were taken in to consideration and people told us they felt listened to. Questionnaires were used on an annual basis. We saw all the returned questionnaires had rated most aspects of the service highly. People's views were sought at regular meetings and people's care plans also documented their wishes, views and opinions.

The feedback we received from the representative of the local authority was that the home was managed well. They felt the registered manager's daily audit was a particular strength, as it allowed actions to be drawn up on a daily basis. We found the provider had systems in place to assess and monitor the quality of service that people received. These checks took place on a daily, weekly and monthly basis.

We saw records of audits carried out within the service covering areas such as care records, health and safety, food safety, medication, finance, the environment, catering and infection control. This meant that the quality of service provision was regularly monitored. Any issues highlighted in the audit received a plan of action. Therefore, any issues were addressed quickly.