

Croftwood Care UK Limited

New Milton House

Residential Care Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service caring?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

New Milton House is a residential care home that is registered to provide personal care for up to 39 people. Accommodation is provided over two floors. There are numerous lounges and dining rooms for people to use within the building. People also have access to secure outdoor space. At the time of our inspection there were 32 people living in the home.

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

People living at New Milton House told us they felt safe. Safeguarding systems, policies and procedures ensured people were safe and protected from abuse. Risks to people's health, safety and welfare, were identified and managed safely with the involvement of the person or their representatives.

There were sufficient numbers of suitably trained and experienced staff on duty and safe recruitment procedures were followed.

Medicines were safely managed, and systems were in place for reporting accidents and incidents and learning from them.

We were assured by the additional measures in place to help prevent the spread of COVID-19. Risks relating to infection prevention and control (IPC), including in relation to COVID-19 pandemic were assessed and managed. Staff followed good infection, prevention and control (IPC) practices.

People's care, treatment and support achieved good outcomes and promoted a good quality of life. Staff were seen to be consistently caring. Staff treated people with dignity, kindness and respect and, promoted people's choice. They sought people's consent, promoted independence and offered emotional support when needed.

People and their visiting relatives were unanimous in their praise for the staff and the quality of care provided. Their comments included: "staff have been marvellous, oh yes I feel safe, enough staff yes, only have to ring the bell and they are here" and "it is fantastic here".

The registered manager and senior staff team were clear about their roles and responsibilities and they promoted a positive, person-centred culture. Staff worked well together as a team, and there was good partnership working with others to meet people's needs. Staff morale was good, and staff felt well supported.

Effective systems were in place for checking on the quality and safety of the service and making improvements where needed.

Rating at last inspection and update

The last rating for this service was requires improvement (published 28 March 2019) and there were two breaches of regulation. 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

A decision was made for us to inspect, examine and follow up what improvements had been made since the last inspection in March 2019. Due to the COVID-19 pandemic, we undertook a focused inspection to only review the key questions of Safe, Caring and Well-led. Our report is only based on the findings in those areas reviewed at this inspection. The ratings from the previous comprehensive inspection for the Effective, and Responsive key questions were not looked at on this occasion. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

Although we found improvements in all key questions we looked at the overall rating for the service has not changed and remains requires improvement.

Follow up

We will work with the local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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 ●

This service was safe.

Is the service caring?

Good ●

This service was caring.

Is the service well-led?

Good ●

This service was well led.

New Milton House Residential 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.

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

This inspection was carried out by one inspector.

New Milton House is a care home. People in care homes receive accommodation and nursing and personal care. CQC regulates both the premises and the care provided, and both were looked at on 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

We announced the inspection visit 48 hours before it took place. This was because we needed to give time to prepare in advance for our visit due to the COVID-19 pandemic. Inspection activity started on 24 September 2020 and ended on 13 October. We visited the service on 24 September 2020.

What we did before the inspection

We reviewed the information we received about the service since the last inspection. We sought feedback from the local authority. We looked at the report published by Healthwatch subsequent to their visit to the

home 31 January 2020. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 seven people who used the service and two visiting relatives about their experiences of the care provided. We also spoke with the registered manager, and six members of staff including the deputy manager, the administration assistant, an activities coordinator, two care team leaders, and one care assistant. 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 reviewed a range of records. This included several people's care records and multiple medication records. We looked at the recruitment files for two staff employed since the last inspection. A variety of records relating to the management of the service were also reviewed.

After the inspection visit

Due to the impact of the COVID-19 pandemic we limited the time we spent on site, and were unable to speak with family members, due to visiting restrictions. Therefore, we requested records and documentation to be sent to us and reviewed these following the inspection visit. We contacted two additional family members by telephone about their experiences of the care provided. We also spoke with a visiting doctor, a district nurse, and a community psychiatric nurse on the telephone and sought their views of standard of care provided. We also liaised with infection prevention Control Nurses via email.

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. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection, the provider did not deploy sufficient numbers of experienced, skilled and knowledgeable staff to meet the needs of people living in the home. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, significant improvement had been made and the provider was no longer in breach of this regulation.

- Staffing levels had increased significantly since our last inspection. There were enough suitably, skilled and experienced staff on duty to meet people's needs safely and consistently.
- The number of staff on duty and skill mix were determined based on people's needs and dependency levels.
- The provider followed safe procedures for the recruitment of staff and all appropriate checks had been completed before new staff were employed in the home.
- The people who lived at the home, and their relatives were unanimous in their praise for the standard of care at New Milton House. Their comments included "it is fantastic here, " the staff are marvellous" and "enough staff, yes, only have to ring the bell and they are here".

Assessing risk, safety monitoring and management

- Risks to people's health and safety including those presented by the covid19 pandemic were identified and well managed.
- The service had contingency plans in place to manage unforeseen emergencies and each person had an up to date personal emergency evacuation plan (PEEP).
- Regular safety checks were carried out on the environment, equipment and utilities.

Using medicines safely

- Medicines were received, stored, administered, recorded and disposed of safely.
- Staff involved in administering medicines had received training around medicines and had access to relevant guidance regarding the administration of medicines which may be required on an 'as and when required' basis.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.

- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems in place to safeguard people from the risk of abuse.
- Staff had completed safeguarding training and were confident in recognising and reporting abuse.
- People who lived at the home told us that they felt safe. Visiting relatives told us they were confident that their loved ones were safe and well cared for.

Learning lessons when things go wrong

- Records of accidents and incidents were maintained and analysed to help identify any patterns or trends. Where patterns were seen, action was taken to see if lessons could be learnt or whether additional action needed to be taken.
- Visiting professionals told us that managers and staff worked in partnership with them to ensure people received safe and effective care. For example, there had been collaborative working on monitoring and recording of topical creams, falls prevention and nutrition.

Is the service caring?

Our findings

At the last inspection this key question was rated as requires improvement.

At this inspection this key question has now improved to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence Ensuring people are well treated and supported; respecting equality and diversity.

At our last inspection, people were not always treated with dignity and respect. This was a breach of regulation 10 (Dignity and respect) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, significant improvements had been made and the provider was no longer in breach of this regulation.

- Staff were seen to be consistently caring. Staff treated people with kindness, dignity and respect and, promoted people's choice. They sought people's consent, prompted independence and offered emotional support when needed.
- All people spoken with praised the staff and the standard of care provided. One person said: "Yes they treat me with dignity and respect, its excellent here, staff have been marvellous, I only have to ring the bell and they are here."
- Visiting relatives also praised the standard of care provided. Their comments included, "The home is very good we cannot speak highly enough about the care they provide (relative)," and "they treat (relative) with dignity and respect."
- As part of our inspection 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 carried out the SOFI over a mealtime and could see that the dining experience was relaxed, pleasant and sociable. Staff managed a potentially hazardous situation with skill sensitivity and utmost regard for the person's well-being.
- People's personal information was kept confidentially and securely.
- People's needs were assessed and identified prior to moving into the home. Protected characteristics (such as age, gender, disability, cultural and religious needs) were identified.

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

- People presented as confident in the home's environment and in the presence of staff. They took the initiative to welcome the inspector and openly shared their views about the home.
- People, along with family members, were encouraged to share their views about the care provided during care plan reviews, and at resident's meetings. Staff were seen to be skilled in enabling people to make their needs and views known.

- Information about advocacy services was available in the service user guide should anyone need independent advice and support.

Is the service well-led?

Our findings

At the last inspection this key question was rated as requires improvement.

At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The management team had learned from issues identified during our previous inspection and had taken effective action to improve staffing levels, staff training and the standard of care provided. This was demonstrated by the improvements we found during this inspection.
- Effective systems for checking on the quality and safety of the service and for making improvements were in place and were being followed.
- The management team promoted a culture of person-centred care by engaging with staff, everyone using the service and relevant others such as family members.
- People who used the service and their visiting relatives spoke highly of the home and the standard of care provided. One relative said; "They provide five star care."
- Morale amongst the staff team was good. Staff told us that they appreciated support, guidance and direction of the registered manager, deputy manager and colleagues.

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

- The registered manager understood their responsibilities to act in an open and transparent way when things went wrong. Incidents and accidents were analysed, and learning shared with the staff team, to help ensure people received safe and effective care.
- The manager and staff completed training and kept up to date with the law and current good practice guidance to update their knowledge and learning.
- The provider met the regulatory requirements to be open and transparent with people using the service when things went wrong.
- The CQC had been notified about incidents and events which occurred at the service, in accordance with the regulations.
- The ratings from the last inspection were clearly displayed at the service and on the providers website.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service continued to involve people and their relatives in discussions about the quality of care provided and were kept up to date through telephone discussions, residents meetings and emails during the COVID-19 pandemic.
- Staff told us that they felt involved in decisions made about the service; and were confident sharing their

ideas and views and felt they were listened to.

- Managers and staff worked in partnership with other agencies to ensure good care. Visiting healthcare professionals told us how the home had improved in the last 12 month period with positive outcomes for the people who lived at the home.