

Aldanat Care Limited

Seaview House Nursing Home

Inspection report

14-16 Colne Road
Clacton On Sea
Essex
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08 August 2019

23 August 2019

27 August 2019

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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:

Seaview House Nursing Home provides accommodation, care and support for up to 20 people with mental health needs. As a nursing home, the service is also registered to provide the regulated activities 'treatment of disease, disorder or injury'. There were 19 people living at the service on the day of inspection.

People's experience of using this service:

People, relatives and professionals were extremely complimentary about the care provided at Seaview House Nursing Home. People received care from staff who understood how to recognise and report issues of concern. Staff were recruited safely and there were enough staff to meet people's needs. Detailed risk assessments were in place to keep people safe which also promoted people's wellbeing, choice and independence. People's medicines were managed safely. Incidents and accidents were investigated, and actions taken to prevent any recurrence. The environment was clean, comfortable and safe.

People's needs were assessed prior to them moving into the service to help ensure they could be supported effectively. Staff received relevant training, support and supervision to enable them to carry out their roles and responsibilities. People enjoyed a nutritious and varied diet. Staff worked well with external professionals to promote people's health and wellbeing.

People were 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.

The culture of the service was positive, caring and person-centred. Staff were kind, motivated and passionate and supported people with dignity and respect. Trusting relationships had been formed between staff and people using the service which promoted people's engagement.

People were supported by competent staff who knew them very well and supported them according to their needs and preferences. People were encouraged to be as independent as possible and had the choice to participate in activities which promoted their self-esteem and quality of life.

Everyone we spoke with were very complimentary about how the service was managed. The registered manager was visible and approachable, and we received feedback that they went above and beyond their role to ensure people were well cared for. Staff had a clear understanding of their roles and responsibilities. Audits were completed and there were effective quality assurance systems in place to drive continuous improvement.

Rating at last inspection: Good (published 11 February 2017)

Why we inspected: This was a planned inspection based on the previous rating.

Follow up: We will continue to monitor all intelligence received about the service to ensure the next planned inspection is scheduled accordingly.

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 ●

The service was safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

Seaview House Nursing 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 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.

Inspection team:

The inspection was carried out by two inspectors.

Service and service type:

Seaview House Nursing Home is a care home. People in care homes receive accommodation and nursing or personal care. 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 visit took place on the 08 August 2019 and was unannounced.

What we did:

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service must let the CQC know about by law. We also reviewed information received from a local authority. We used all this information to plan our inspection.

During our inspection:

We spoke with four people and observed interactions with staff. We spoke with the registered manager, the deputy manager, and five staff. We spoke with one person's relative and two professionals involved with the service. We reviewed two people's care plans and medication records. We looked at records relating to recruitment, training and systems for monitoring quality.

After our inspection:

We spoke to professionals and one relative to gather feedback about their experience of the service on the 18 and 23 August 2019.

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 the same.

This meant people were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from the risk of harm and abuse.
- Staff had received training in how to safeguard people and knew how to report any concerns.
- The registered manager understood their responsibilities to safeguard people from the risk of abuse and any concerns were acted on so people were protected from harm.

Assessing risk, safety monitoring and management

- Risk assessments were in place which provided a holistic overview of the person and were very detailed and informative. They identified progress and included a review of interventions to see if they were working for the person or not.
- Where people could become anxious or distressed, guidance was provided on how to safely support the person and staff knew how to respond to reduce the distress or the risk of injury to the person and others. One professional said, "It is really good to know I can rely on Seaview House to ensure people are safe, happy and comfortable."
- Environmental risks were identified, assessed and managed.
- Evacuation plans were in place to guide staff on how to support people in case of an emergency and equipment was regularly checked.

Staffing and recruitment

- Recruitment systems continued to be effective and ensured suitable people of good character were employed to work at the service.
- Staffing levels were flexible and there were enough staff to keep people safe. Staff were visible, responded quickly and had time to spend with people during our inspection. One person had recently experienced a change in needs and extra staffing was being provided as a result.
- Staff and people's relatives confirmed staffing levels were adequate.

Using medicines safely

- People received their medicines when they should, in a way they preferred, and staff checked people were happy to take their medicines before administering these.
- There were systems for ordering, administering and monitoring medicines. Medicines were kept securely, and records were completed correctly.
- Staff received training in medicines administration and had their competency checked to ensure their

practice was safe.

Preventing and controlling infection

- The environment was clean and fresh.
- Staff completed training in infection control.
- Information about how to prevent the spread of infection was available in the service and was being followed.

Learning lessons when things go wrong

- Systems were in place to analyse incidents and accidents and the registered manager used this to identify themes. Action was taken to prevent any future re-occurrence and to ensure continuous improvement.
- Medicine errors were discussed in staff meetings and measures put in place to reduce any re-occurrence.

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 the same.

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 before they moved into the service and a care plan was put in place to ensure they were effectively supported.
- Care plans contained information about people's preferences in relation to sexuality, culture and religion. Staff received training in equality and diversity.
- The registered manager supported staff to provide care in line with best practice guidance. They said in their Provider Information return (PIR), "We ensure people are not excluded or isolated by adopting an approach that is welcoming and supports people's differences."

Staff support: induction, training, skills and experience

- Upon joining the service, staff received an induction and shadowed more experienced staff which provided them with the knowledge and skills needed to support people effectively.
- Staff completed the Care Certificate where they did not have care experience or had not achieved a National Vocational Qualification (NVQ). The Care Certificate is a set of standards that social care and health workers should adhere to in their daily working life. One staff member said, "I will be doing the Care Certificate and am working through online learning which I am finding very interesting. I am learning a lot of things I did not know about schizophrenia."
- People were supported by skilled and knowledgeable staff who received ongoing training and knew how to provide effective support to maximise people's wellbeing and ensure positive outcomes. One professional said, "Seaview House do incredibly well with people and we see a marked improvement in people placed there."
- Staff felt well supported by the registered manager and received regular supervision meetings. One staff member said, "It can be difficult to have team meetings, but we talk so often during handovers and we have supervision to discuss how things are going." Another staff member said, "[Registered manager] has mental health knowledge and I feel it spreads out onto the staff. [Registered manager] guides us and gives us direction. It gives the staff confidence and reflects on how people living here are."

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

- People were supported to maintain a healthy, balanced diet if they chose to do so. Drinks and snacks were provided throughout the day. One person said, "We have sandwiches and crisps. I like tuna mayo."
- People were mostly complimentary about the food and said they could have something else if they didn't like what was on offer.

- People were offered choices of where to sit, what to drink and what to eat. The mealtime experience was relaxed, and people were given support to eat where needed. One person ate their lunch when the dining room was quieter.
- People's care plans contained information about their nutritional needs, likes and dislikes and staff were knowledgeable about people's dietary requirements.

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

- People received support to access health and social care appointments to meet their needs. Where links to services were at risk of breaking down due to a person's behaviours, staff worked with other agencies to find a way to reduce concerns and promote positive outcomes.
- Staff knew people well and were very responsive to any change in people's physical needs. One person had recently suffered a major health concern and due to the quick action that was taken, the person suffered no long-term effects.
- Staff and the management team worked effectively with other organisations such as GP's, the local mental health team and the district nursing team. One professional said, "[Registered manager] always keep me up to date about [person]. Staff keep detailed, up to date notes so they can always provide me with feedback."

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

- People were supported to personalise their bedrooms with their own belongings and rooms were very individualised. One person had a train track permanently set up in their bedroom and another person had a hamster as a pet.
- Some areas of the service had recently been decorated and new flooring had been laid. Some areas of the service, for example, the main bathroom, looked tired and in need of refurbishment. The registered manager confirmed there was a plan of continual refurbishment and decoration in place. One staff member said, "We are always decorating and making it nice."

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Staff had a good understanding of the MCA and understood the importance of gaining consent before providing support. One staff member said, "The MCA protects people who lack capacity to make decisions for themselves."
- People were encouraged to make decisions for themselves and there was a strong emphasis on involving people as much as possible. One staff member said, "We cannot force anyone to make a choice. We sit and talk to the person and support them to understand the decision they are making."

- People's rights were protected, and appropriate applications had been made to the local authority for DoLS assessments.

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 the same.

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 told us staff were kind and caring. Comments included, "The staff are quite obliging. They are nice," and, "Staff are nice and help me with my tablets."
- The relative we spoke with was extremely complimentary about the care at Seaview House and said, "I am aware of the difficult circumstances under which the staff work, and the staff handle people with enormous empathy and patience. I have never seen anything other than a high level of professionalism."
- Professionals provided positive feedback and comments included, "The care is absolutely fantastic," and, "The staff are very good and caring and they do a lot with people."
- Staff supported people with compassion. They had a good knowledge about individual's needs, strengths, anxieties and how they communicated, and encouragement was given at every opportunity.
- Staff engaged in meaningful conversation and interaction with people. There was lots of laughter and the atmosphere was relaxed.
- Where required, staff provided emotional support and reassurance.

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

- People were involved in how they wished to be cared for and given choices about what they wanted to do and where they wanted to be within the service and the staff respected their choices.
- People were able to express their views about the care provided. Annual questionnaires were completed by people and the responses were very positive regarding food, activities, cleanliness and trustworthiness of staff.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. People were encouraged to take pride in their appearance to enhance their self-esteem, although their individual choice was respected.
- Staff spoke to people kindly and maintained their privacy when talking about sensitive subjects. They lowered their voices or moved so they were not within earshot of other people.
- People were encouraged to be as independent as possible. Care plans included what people could do for themselves and the areas where they required further assistance.
- People's confidentiality and privacy was protected, and records were securely stored.

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 the same.

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

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

- Care plans were detailed and had information about people's specific emotional, physical and financial needs, personal preferences, and how staff should support them to ensure their wellbeing.
- Staff provided individualised care and respected people's diversity. One relative said, "Person is unique and [Registered manager] understands this and they and the staff are brilliant with them." One staff member said, "We have to understand people's complexities. It's all about the people that live here and giving them the best."
- People were encouraged and supported to take part in things which were important to them. We saw people playing chess and completing jigsaws. One person did voluntary work and enjoyed knitting. People took part in bowling and another person enjoyed playing pool.
- Due to the nature of some people's mental health needs, their ability to consistently participate in activities varied from day to day. One staff member said, "Where people have got older, they don't want to engage as much or go out. It takes great encouragement to motivate people." Staff organised activities for people at their request, even if they then decided they didn't want to take part.

, please list any accreditation schemes and initiative

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 identified people's communication needs.
- Staff adjusted how they communicated with people according to their individual needs.

Improving care quality in response to complaints or concerns

- The complaints policy was displayed in the service.
- People and relatives knew how to raise a concern and felt able to speak to the registered manager at any time. One relative said, "I have absolutely no concerns."
- Although no complaints had been received since the last inspection, a complaints system was in place which ensured complaints were investigated.

End of life care and support

- People generally chose to remain at Seaview House at the end of their life and this choice was respected and people received the support they required. One professional said, "Seaview House go above and beyond in caring for people at the end of their life and don't expect them to move on. They involve districts nurses because people want to stay there at the end of their lives."
- Some people had end of life plans in place which included their preferences, cultural requirements and their wishes following their death.

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. 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.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- At our last inspection, there was no registered manager at the service. A registered manager was now in post and they had very good oversight of what was happening in the service and demonstrated an in-depth knowledge of all areas.
- The registered manager was aware they had duty of candour responsibility and they were very open and transparent about when things had gone wrong and what could be improved as a result.
- Staff were aware of the whistle-blowing processes. Although they felt very well supported by the registered manager, staff told us they felt confident in escalating any issues they may have with the local authority and CQC if they felt they were not being listened to.
- The culture of the service was incredibly caring, and staff were passionate and motivated about supporting people. One staff member said, "It's all about giving people the best. We are all passionate about what we do and we all want to be here for them."
- Staff understood their roles and responsibilities. One staff member said, "Everyone has got their role and we work as part of a team."

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

- The registered manager and the staff team knew people very well which enabled positive relationships and a good quality of life for people using the service.
- Staff felt the registered manager was approachable and the service was well managed. One staff member said, "We all know what we are doing. [Registered manager] is a great boss and does lead it well. If there are any issues you can ask them, and they will help put it right."
- We received consistently positive feedback about the registered manager. One professional said, "[Registered manager] goes above and beyond. They really genuinely care about every person and that's what makes it a brilliant nursing home." One relative said, "[Registered manager] is incredible. It goes deeper for them than running a business. She puts the people first and is totally dedicated to them."
- Staff were able to give their views and suggestions for improvements regarding the service. One staff member said, "[Registered manager] takes ideas on board and is very inclusive. They listen to our opinions."

Continuous learning and improving care

- Information gathered from audits and the review of incidents and accidents was used to make improvements. For example, to reduce the risk when people became upset.
- The registered manager had an open and positive approach to developing the service. There was an ethos of continually moving the service forward.

Working in partnership with others

- The registered manager and staff team worked well with other professionals such as CCG's, local mental health teams, GP's and district nurses to provide joined-up care and support.