

# Pressbeau Limited New Meppershall Care Home

### **Inspection report**

79 Shefford Road Meppershall Bedfordshire SG17 5LL

Tel: 01462851876

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### Ratings

### Overall rating for this service

Inspected but not rated

Is the service safe?	Inspected but not rated
Is the service caring?	Inspected but not rated
Is the service responsive?	Inspected but not rated
Is the service well-led?	Inspected but not rated

## Summary of findings

### Overall summary

#### About the service

New Meppershall is a residential care home providing personal and nursing care to 73 people aged 65 and over at the time of the inspection. The care home is split over two adapted buildings and two floors. One building is designed to support people living with dementia and the second building supports people who require personal and/or nursing care. Each building and each floor have access to outside garden space and each bedroom has ensuite facilities. The service can support up to 81 people.

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

People and relatives spoke very highly of the care they received and told us staff treated them with kindness. One relative told us, "So far as I can see, [my family member] couldn't be in a better place." People and relatives told us they felt safe. They were safe due to being supported by staff who understood how to minimise risks and report concerns. Systems for identifying and reporting concerns were in place and monitored by the manager.

The manager had made changes to ensure there were robust systems in place to reduce the risks of spreading infection and COVID-19 to people.

People were supported to visit with their relatives safely using in person visits as well as video calls.

People told us they had plenty to do, choices were respected and there was enough staff to support their needs and preferences. Staff understood how to communicate differently where people had different communication needs and were observed to treat people with compassion.

People and relatives knew how to complain and were confident to do so. The manager had good systems in place for managing complaints openly.

The home was well managed and people were supported to access a variety of other health professionals to ensure their physical and mental health needs were met.

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

Rating at last inspection and update:

The last rating for this service was requires improvement (published 27 September 2019) and there were breaches of regulations 9 and 18. 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 9 and 18.

#### Why we inspected

We undertook this targeted inspection to check on the outcomes of the previous breaches and the safe

management of the service due to the service not having a manager registered with the CQC. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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? At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about. Details are in our safe findings below.	Inspected but not rated
<b>Is the service caring?</b> At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about. Details are in our safe findings below.	Inspected but not rated
<b>Is the service responsive?</b> At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about. Details are in our safe findings below.	Inspected but not rated
<b>Is the service well-led?</b> At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about. Details are in our safe findings below.	Inspected but not rated



# New Meppershall Care Home

**Detailed findings** 

# Background to this inspection

The inspection

This was a targeted inspection to check whether the requirements of the previous breaches had now been met. We also looked at the safe management of the service due to the service not having a manager registered with the CQC.

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 two inspectors.

#### Service and service type

New Meppershall Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 did not have a manager registered with the Care Quality Commission at the time of the inspection. However, the managers registration was confirmed shortly after the inspection. 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 gave 10 minutes notice of the inspection in order to confirm with the manager the measures for visitors to reduce the risks of COVID-19 and the agreed use of Personal Protective Equipment (PPE).

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. 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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with five people who used the service and seven relatives about their experience of the care provided. We spoke with twelve members of staff including the nominated individual, quality lead staff member, the manager, senior care workers, care workers and housekeeping staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider

We reviewed a range of records. This included five people's care records. We looked at a variety of records relating to the management of the service, including policies and procedures which were reviewed. We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with four professionals who regularly visit the service.

### 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the breach we previously served about unsafe staffing levels. We will assess all of the key question at the next comprehensive inspection of the service.

#### Staffing and recruitment

At our last inspection the provider had failed to ensure there were sufficient staffing levels to safely meet people's personal care and mealtime needs and preferences within reasonable time frames. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- Staffing levels and deployment were sufficient to ensure people's needs could be met in a safe and timely manner. We observed a high number of staff supporting people safely and people did not have to wait more than a minute when they called for support.
- There were enough staff to support people with their personal care needs which ensured comfortable and safe care.
- People had been supported to have their meals without delay and we observed staff also offered regular drinks and snacks that were readily available in all areas of the home.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe because the building was secure and staff were kind and friendly and knew what to do.
- Staff had training and their competency checked by managers in areas of safeguarding and abuse awareness. Staff demonstrated a good understanding of how to keep people safe and what to look out for which might indicate a concern. They were confident to report any concern to the manager. They also understood how to report outside of the organisation if required.
- The manager had ensured there were clear procedures in place to report and record all concerns. These were then followed up by senior staff and reported to the appropriate authorities. Action was also taken to learn from incidents and reduce the risk of reoccurrence.

Preventing and controlling infection

• The provider had implemented robust systems to reduce risks related to COVID-19 and the spread of

infection. Visitors had separate protocols to follow and a special visiting room with separate access had been set up. The room facilitated booked visits, had been designed with a full height plastic screen and was cleaned between visits. Posters were placed in strategic areas to remind staff and visitors of the rules of managing COVID-19 and good hand hygiene.

• People and staff were tested regularly for COVID-19 and measures taken to isolate where required as per government guidelines. The manager had created a designated 'red zone' for any person who was self-isolating to avoid the risk of spreading infection. Furniture had been placed in communal areas to create natural social distancing.

• People told us their home was kept clean. There were various stations for PPE and designated areas for staff to put on and safely dispose of PPE. Staff understood how to use items correctly such as masks, aprons and gloves and were observed to be following protocols for this. Hygiene standards were effective and all areas of the home were clean. We were assured in all areas of infection prevention and control.

### 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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the breach we previously served about person centred care. We also looked at the management of the home in the absence of a registered manager. We will assess all of the key question at the next comprehensive inspection of the service.

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

- People told us staff were caring. One relative told us, "The staff have taken time to get to know [Family member]. They sit and chat and have a laugh with them." Another relative told us, "Staff couldn't have been more caring."
- Staff were observed to offer choices and spoke to people with patience and respectful tones. People were able to choose when to get up and when and what to eat. We observed a staff member gently rubbing one person's arm to provide encouragement and reassurance while they supported them to eat.
- People were supported to go to the in-house hair salon to have their hair cut and styled and staff understood people's preferred styles. Other people were supported to contact their family via a computer tablet to video call them in the privacy of their room.

### 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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the breach we previously served about the consistent lack of meaningful engagement and control over how people spent their time. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to ensure adequate staffing levels were in place to meet people's needs and preferences within reasonable time frames. There was a lack of meaningful engagement and control over how people spent their time. This was a breach of regulation 9 (Person-Centred Care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 9.

- People told us there was always something to do. One person told us how staff had worked together to facilitate a spa pamper day for the people who lived at the service. We observed staff encourage people to pursue their interests and hobbies. One relative told us, "I have purchased [Family member] art supplies which staff support them to use. I have received video and photos of them enjoying activities in the home."
- There was a weekly plan of varied activities that people could choose to access. The home enabled people and relatives to visit as well as use technology which encouraged people to stay in touch with their relatives. This was especially important for people who were self-isolating in their rooms.
- People's care plans contained information to support their needs and preferences. Care plans had been written with the involvement of people and their relatives. This enabled care to be provided with a person-centred approach. One relative told us, "Staff have taken time to know [Family member] and what their likes and dislikes are. They have sat with them and looked through their wedding photos and reminisced about their [Partner] and family."

Improving care quality in response to complaints or concerns

- People and relatives felt the manager and staff were approachable and were happy to raise concerns and complaints. One relative told us, "The manager and staff are very helpful and always happy to listen."
- Complaints were clearly recorded and actioned on. Outcomes were logged and lessons learnt shared with all concerned. The manager viewed complaints as a positive tool to help make improvements to the home and was very open about them.

### 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the service was well managed in the absence of a registered manager We will assess all of the key question at the next comprehensive inspection of the service.

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

- Managers and staff had a clear understanding of the requirements of their roles and understood how to assess information to support improved performance. The manager had plans to further develop staff's skills to enable them to perform some tasks currently provided by external health professionals. This would give people more freedom to choose to be treated at the home rather than go into hospital and prevent them having to wait for appointments.
- The manager in particular demonstrated a good understanding of person-centred approaches and had good plans for further improve this aspect of care at the service such as implementing a 24-hour restaurant style kitchen so that people could choose what to eat and the time they wished to eat rather than to fit in with the home's routines. This was already in progress. They had plans for the further development of staff engagement and activities for people.
- The manager understood about their duty of candour and was always very open about concerns or events at the service, reporting these and following up.
- People, relatives, professionals and staff gave very positive feedback about the manager, their work ethic and approach. One professional said, "We deal with [The manager] regularly, they are very responsive to emails and phone calls, exceptionally helpful and accommodating. They will always listen to any advice and take it on board." They went on to say, "[The manager] definitely goes above and beyond to ensure each person she accepts will be happy and comfortable and that New Meppershall can meet the individual needs of each resident. It is an absolute pleasure dealing with [The manager] and the rest of the staff at New Meppershall."