

# North Yorkshire County Council

## Neville House

### 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: The service is a care home that provides personal care for up to 26 older people. 18 people used the service at the time of our inspection.

People's experience of using this service: Without exception, we received positive feedback from every person we spoke with about the care and support they received. One person told us, "My daughter looked all over for a place for me. She couldn't have chosen a better place. You couldn't have a better home." A relative told us, "I just feel so happy about [Name of person being here]."

People told us they felt safe. There were enough staff to safely care and support people and staff understood how to protect people from abuse. People's individual needs were risk assessed and staff had the right information to support people safely when using equipment such as hoists and walking aids.

People told us they enjoyed the food. People were given a choice of meals which included specialist dietary options, including vegetarian meals. People ate at their own pace and were supported by staff in a patient and relaxed manner.

Staff told us they felt well supported by the management team and received regular supervision and appraisals. Staff received appropriate training and were supported to undertake additional training in areas of interest to them.

People were supported to be as independent as possible and staff encouraged them to make their own decisions wherever they could. Staff had a good understanding of people's individual needs and supported them to access healthcare services without delay.

We found a welcoming and relaxed atmosphere and observed a strong sense of community amongst the people who used the service. We observed kind and compassionate interactions between staff and people.

People told us the service was well-led. They could talk to the registered manager if they had any concerns and were confident they would be listened to. Relatives told us the registered manager was approachable and accessible.

For more details, please see the full report which is on the Care Quality Commission website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection: Good (Report published 8 September 2016).

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

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as

per our re-inspection programme. If any concerning information is received 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?

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.

# Neville House

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

**Inspection team:** An inspector and an inspection manager carried out this inspection.

**Service and service type:** The service is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement. 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 CQC. 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 was an unannounced inspection.

**What we did:** Before the inspection we reviewed information we held about the service. This included notifications from the provider and feedback about the service from the local authority contracts and safeguarding teams. A notification is information about important events which the service is required to send us by law.

We also used information the provider sent us in the Provider Information Return. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection we spoke with six people who used the service and three people's relatives. We spoke with three staff members, the registered manager, deputy manager, activities facilitator, chef, kitchen assistant, domestic assistant and a volunteer.

We observed the lunchtime experience and we looked around the building including people's bedrooms,

bathrooms and communal areas. We spent time looking at records, which included four people's care plans, two staff recruitment files and other records relating to the management of the service.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- The provider had effective systems in place to safeguard people from harm or abuse. All staff had received appropriate training in this area.
- People and their relatives told us they felt safe being supported by staff. Comments included, "I feel totally relaxed. People are very safe" and "I feel very safe here."
- Any safeguarding concerns had been submitted to both the local safeguarding team and the CQC.

Staffing and recruitment.

- Staffing levels met people's needs and kept them safe.
- Staff had time to engage with people in meaningful activity and to respond promptly to people who needed help. A relative told us, "[Name of person] loves having people around [them] that [they] can rely on."
- There was a low turnover of staff. There were in place to recruit staff safely.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong.

- Risk assessment documentation was in place and gave clear guidance to staff about how to reduce risks to people.
- People had access to equipment to support them to move safely around the service.
- Accidents and incidents were recorded and analysed to identify any patterns or trends to prevent them from happening again.
- Firefighting equipment was in date and available throughout the building. Each person's care plan contained information about how to support the person to leave the building safely.

Using medicines safely.

- Medicines were stored and administered safely and records accurately reflected the treatment people had received.
- We checked the quantities and stocks of medicines for three people and found all balances to be correct.
- Detailed guidance was in place to enable staff to safely administer medicines which were prescribed to be given only as and when people required them, known as "When required or 'PRN'."

Preventing and controlling infection.

- The service was clean, tidy and well maintained.
- Staff used personal protective equipment to help prevent the spread of infections.

# 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.

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

- People received person-centred care and treatment, based on a thorough assessment of their needs and preferences.
- Access to healthcare services was sought without delay; people's care plans clearly documented the involvement of other healthcare professionals.
- A relative told us the registered manager worked 'seamlessly' with the local authority and they felt well informed about their family member's care.

Staff support: induction, training, skills and experience.

- People received care and support from well-trained, capable and supported staff.
- Staff received training across a broad range of subject areas including, nutrition and hydration, moving and handling, equality and diversity and dementia awareness. Staff were supported to attend additional training in areas of interest to them.
- The registered manager held regular staff meetings and all staff received supervision and appraisal.

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

- People were provided with enough to eat and drink and received the support they needed.
- Meal times were an enjoyable, sociable experience for people. On the day of our inspection, people had chosen to eat Indian cuisine for lunch as part of a 'round the world' experience. Other options were available for people to choose from if they wished. One person told us, "The food is excellent!"
- Staff were aware of people's allergies and individual dietary preferences.

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

- People lived in a homely environment with space for them to socialise or spend time with relatives and friends. One person told us, "It is like a home from home."
- People were free to access all areas of the service they needed to. Handrails were provided along each corridor and a lift was available for people who could not use the stairs.
- Wide corridors provided people with walking aids space to move around without obstruction.
- People had direct access to an outside garden area with seating. Large windows in the dining room looked out onto the garden; staff told us people enjoyed watching birds and other wildlife.
- The registered manager understood the environment was not suitable for people with an advanced diagnosis of dementia and this formed part of the assessment, prior to people being offered accommodation at the service.



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.

- Everyone at the service had the capacity to consent to and make decisions about their care and treatment.
- People's care plans clearly documented where they had given consent to specific aspects of their care, including their medicines and to be checked on by staff during the night.

# 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.

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.

- The atmosphere was open and welcoming with a sense of community amongst people, their relatives and staff. A relative told us, "I think it is fab. [Name of person] is very happy here."
- Staff spoke about people with fondness and respected people's individual likes and dislikes.
- One person was able to have a hot drink and supper provided in their bedroom on an evening so they could retire to bed earlier than other people.
- People and their relatives spoke highly of staff. Comments included, "You can't find a bad one amongst them;" "Staff will bend over backwards for people" and "It's fantastic here. The way the staff are; they respect [Name of person] and everyone here."

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

- Staff supported people to make decisions about their care and this was recorded in people's care plans.
- People and their relatives were involved in care planning and reviews took place regularly to make any changes that were needed.
- The registered manager held regular meetings where people were invited to contribute ideas for activities and social engagements.

Respecting and promoting people's privacy, dignity and independence.

- Staff treated people with respect and ensured people's dignity when they gave care and support.
- We observed staff asking for permission from people before offering help and support. Staff told us, "Everything is their choice" and "If [Name of person] chooses to sit in their room that's fine, I have to respect that." One person told us, "I come and go, where I do what I want."
- People were supported to maintain relationships with those close to them. Visiting times were not restricted and space was available for people to spend meaningful time with their relatives and friends.

## Is the service responsive?

### Our findings

Responsive – this means we looked for evidence that the service met people's needs.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- Information regarding people's communication needs was recorded in their care plans.
- People received personalised care and support, tailored to meet their needs and preferences.
- People's care plans contained person-centred information about their routines, interests, important relationships and communication needs. A relative told us, "There is no pressure on [Name of person] to do anything. They (staff) know [they] likes card games and they play with [them]."
- Staff responded quickly to people's changing needs and continued to provide them with the right care and support. One relative told us additional mobility aids had been sourced for their family member without delay.
- Each person was given a 'key worker'. The function of the key worker was to take a social interest in the person and to ensure their care plan remained in date and accurately reflected their person's needs.
- People were provided with a varied programme of activities that promoted social interaction and connected with their interests. One person told us, "They even have a hairdresser; what more could you want."

Improving care quality in response to complaints or concerns.

- People and their relatives told us they would feel comfortable providing feedback to the management team. One person told us, "Anything that you might need to complaint about, which is not much, you could go straight to the management. Nothing is too much trouble. We are well looked after."

End of life care and support.

- People's care plans included their wishes, views and thoughts about end of life care. The registered manager told us, should a person require end of life care, they would liaise closely with other health professionals and relatives in line with the person's individual wishes.

# 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.

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.

- People received a consistently high standard of care and support.
- A set of values, embraced by the service, were displayed in the entrance to the service. Staff spoke passionately about delivering person-centred care and we observed this throughout our inspection.
- People, relatives and staff told us the management team were approachable and open to feedback. The registered manager operated an open-door policy and made themselves available to speak with people.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care.

- The service had an effective management and staffing structure in place. Staff had a clear understanding of their roles and knew what was expected of them.
- People and their relatives spoke positively about the management team and of the care and service they received.
- The registered manager led a structured audit programme which included, medicines, care planning and health and safety and monitored the progress of actions taken.
- The registered manager told us, they delegated responsibility for some audits to senior care staff as part of their ongoing development.

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

- The Equality Act 2010 introduced the term 'protected characteristics' to refer to groups that are protected from discrimination under the Act. People's individual needs were assessed and regularly reviewed by staff and they received care and support free from discrimination.
- The registered manager chaired regular meetings with people to gain their views. Activities and social engagements had been organised as a result of peoples' feedback. One relative described a Christmas party, held at the service as "excellent". The party included presents and games and peoples' relatives and friends were invited to attend.
- Staff supported people to maintain relationships with their local community. People attended the local community centre and events held at the village hall.
- The registered manager worked closely with local health professionals and sought specialist training for staff in areas including speech and language therapy and end of life care.