

Mr & Mrs M Jingree

Norfolk House

Inspection report

34 Norfolk House
Springfield
Wigan
Greater Manchester
WN6 7BJ

Tel: 01942495777

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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

Norfolk House is a residential care home providing personal care to 13 people aged 65 and over at the time of the inspection. The service is registered to support up to 18 people. The house is a large converted property situated in the Springfield area of Wigan close to local amenities.

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

People and relatives were very positive about the home and said that it was safely run. The risks to people were assessed and minimised and people were protected from the risk of abuse. People were supported to take their medicines as required and this was regularly reviewed with the doctor. There were suitable systems for ensuring the home was clean and equipment was safe for use.

Staff worked very closely with other healthcare professionals to ensure that people had the right type of support. Professionals told us the registered manager was highly proactive in ensuring that people had their needs met and had an excellent understanding of best practice. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. The home had very detailed assessments of a person's mental capacity which were decision specific and the right people were involved in best interested decisions for people who lacked capacity. The policies and systems in the home supported this practice.

People told us staff were kind and caring. Staff supported people to maintain their independence and encourage people to remain mobile. The registered manager, provider and staff knew the people living at Norfolk House very well and had excellent rapport and supporting relationships.

Care plans were very detailed and provided guidance for staff to support people with their care and support needs. These records were maintained and updated as required. People felt able to raise any concerns and make complaints and these were addressed by the registered manager. Staff provided a range of activities based on input from people living at Norfolk House and we observed that people engaged well with these activities. The home accessed a range of activities available within the local community and support people to engage with their individual interests and preferences.

People and their families were very happy and felt the home was being well run. Everyone spoke very highly of the registered manager and felt the home had significantly improved. People were supported by a team of staff who were happy in their jobs and passionate about delivering good quality care. The registered manager completed a range of regular checks on the quality and safety of the service and was committed to driving improvement within the home.

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

Rating at last inspection

The last rating for this service was Good (published 21 March 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

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.

Norfolk 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. 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.

Inspection team

The inspection was undertaken by one inspector.

Service and service type

Norfolk House is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 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

The first day of this inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. We reviewed the information we held about the service including notifications the provider had sent to us. We contacted local commissioning teams to obtain their views about the service. We contacted Healthwatch for any feedback they had received. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. All this information was used to identify key lines of enquiry as part of the inspection.

During the inspection

During the inspection we looked at three people's care records which included a wide range of support plans and risk assessments. We reviewed a range of documents relating to how the service was managed including; three staff personnel files, staff training records, policies, procedures and quality assurance audits.

We spoke with three people who used the service and four relatives about their experience of the care provided. We spoke with five visiting professionals. We spoke with seven members of staff including the registered provider, registered manager, and care workers. 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.

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.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt the home was safe. Comments they made included, "Yes, I am being well looked after." "Staff know what they are doing." "My [family member] is getting the proper care. I find the home very good." "[Family member] has settled in very well. We have had no problems whatsoever." and, "I cannot praise the staff enough for what they have done for my [family member]. I know I can relax and know that they are safe."
- People had individual safeguarding care plans which provide staff with guidance on how to keep people safe. Staff had all completed training in safeguarding and understood their responsibilities in this area.

Assessing risk, safety monitoring and management

- There were a variety of risk assessments in place. These covered generic risk in relation to the environment and running of the home, as well as specific risks in relation to people's individual needs.
- There were systems in place to ensure equipment was fully checked and maintained. This included checks of gas, electrical and water systems.
- The home had a grab file which included important information about people's care needs and relevant contact details. There were detailed Personal Emergency Evacuation Plans (PEEPs) to guide staff with the actions required to support people in the case of an emergency.

Staffing and recruitment

- There was a robust system for the recruitment of staff and the home undertook appropriate checks prior to a new member of staff commencing employment.
- The home undertook regular reviews of people's dependency to ensure sufficient staffing levels were in place to meet people's needs. Staff told us they felt there was enough staff but noted, "There is enough staff but it can be difficult when people ring in sick." and that, "[Registered manager] will always help out if we need. At weekends they will ring to check in with staff and pop in if needed." One relative said, "There is definitely enough staff. They always seem to find time to sit down and spend time with my [family member]."

Using medicines safely

- We checked to see whether people were safely supported to take their medicine and saw that there were detailed records in place. This included information about medicines that should be taken 'as required' such as medicine for pain relief. Medication administration records (MARs) were being completed and stock checks were accurate.
- People's medicines were being safely stored, staff completed training in the administration of medicine and had competency checks prior to taking on this areas of responsibility.

Preventing and controlling infection

- People told us, "The home is always clean and tidy." and our observations during the inspection confirmed this was the case. There were cleaning schedules in place to ensure all areas received a deep clean at regular intervals.
- The registered manager undertook regular audits of infection control and staff had completed training in this area. We saw that staff used appropriate protective equipment such as disposable gloves and aprons when providing support with personal care.

Learning lessons when things go wrong

- Detailed records of incidents and accidents were completed, and action was taken to prevent future reoccurrence. The registered manager undertook team meetings where learning from these incidents was shared and reflected upon.

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 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 care plans contained a detailed pre-admission assessment which considered people's needs and risks to ensure the home could safely meet these.
- We saw that the registered manager undertook research to ensure the home had a full understanding of best practice when meeting people's needs. For example, we saw guidance in relation to meeting the oral health care needs of people living with dementia and dietary advice for improving the calorie content for people living with diabetes.
- The care plans were person centred, highlighted people's needs and included information and advice from healthcare professionals. These were reviewed and updated when changes occurred.

Staff support: induction, training, skills and experience

- The feedback we received from the people we spoke with included, "Staff seem well trained. They know me and what I need." and, "The staff are very good. They are very helpful and professional."
- Staff told us, "We get all the support and any training we need. We are encouraged to do as much training as we want." and, "The induction was good. It really helped prepare me for the role."
- The registered manager had a matrix in place to ensure staff had regular supervision and appraisal. Staff told us they felt well supported and said "[Registered manager] is lovely, we get plenty of support." and, "We get all the support and supervision we need. You discuss any concern about anything with [the registered manager]."

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

- There were clear detailed information within care records for people who had specific dietary requirements. This included information from the speech and language therapy (SALT) and dietician services and this information was clearly displayed within the kitchen so that staff could readily access this when preparing meals and snacks.
- Staff had completed training to meet people's nutritional need and the registered manager had undertaken additional support sessions to help staff in preparing specific diets, such as for those who required soft or pureed diets and thickened fluids. People told us, "Yes the food is good. I'm treated like royalty."
- We observed meal times were a calm and social experience for people. People were encouraged to retain their independence. This included the use of adapted equipment, such as coloured plates to help people living with dementia. When people needed support to eat, staff would do this gently and with patience.

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

- The registered manager had an excellent understanding of meeting the needs of people with dementia and there were dementia friendly signs to help people move independently around the home.
- The home had a variety of tools to engage people living with dementia including photographs for reminiscence and items such as tools for people to engage with. Such items can provide people with stimulation and a sense of purpose which provides reassurance and reduces distress and we observed that resources were used by the people living at Norfolk House.
- We observed and received feedback from people that the décor was dated in some areas of the home. The registered manager told us that there were ongoing plan for redecoration and planning permission had been requested to make improvements to the building and communal spaces.

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

- People told us they got support with their health care needs. One person said, "I've not been feeling very well today. They've arranged for the doctor to come and see me later." A relative told us, "The communication is really good here. They always let us know when [family member] has seen the doctor and what the outcome was."
- We observed a regular doctor visited the home on a weekly basis to follow up an issues and review people's needs. The registered manager told us how this had helped with reviewing people's medication, and ensuring the people were only on medication that was beneficial for their current healthcare needs. In many cases this helped to ensure that people were on the minimum medication required.
- The home had close working relationships with other healthcare professionals who would visit to support people. Records clearly documented the input from other professionals and any changes in people's needs and advice about how these should be met. This included input from doctors, nurses and specialist services such as they dietician, speech and language therapy, podiatrist and optician.
- Healthcare professionals were very positive about how they home supported people. They told us, "Communication is very good. They are on the ball and always take on board the advice given." "They are very proactive at identifying any issues and getting the right support." and, "I came to see a person who is at risk at developing pressures sores. I spoke to staff about referring this person to the dietician and arranging for pressure relieving equipment, but they had already done this."

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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The were very detailed assessment regarding people's mental capacity and these were decision specific. Best interest decision were clearly recorded and, where needed, the home would make arrangements for the involvement of an independent advocate.
- DoLS application were made when people were subject to restrictions and the registered manager had a system to ensure oversight of these applications. Staff were aware of who had DoLS restrictions in place and this information was recorded with care records.

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 that staff were very kind and caring. They said, "Staff are lovely." and, "Yes, staff are good here." Relatives told us, "Staff are very friendly and always have time for you." and "[Registered manager] is a real angel. You can tell they love their job, and this is the same for all the staff."
- Throughout the inspection we observed kind and caring interaction between staff and the people they were supporting. It was clear that staff knew people very well and had built good relationships and rapport.
- Care records contained detailed information about people's life stories. The registered manager showed an example of a photograph album they had made with a person which included photographs of holidays and family members. Written descriptions and details of the photographs enable staff to discuss and reminisce with the person. Staff told us that this information was important in building good relationship with the people they were supporting.
- The registered manager would go to extra lengths to provide people with opportunities to build relationships and share experiences. For example, in one case a person who had an interest in football was supported to attend football exhibitions, to play football outside, and were looking to identify a person with similar experiences and interest as a volunteer befriender.
- People were supported to practice their faith. Clergy would visit the home and people were supported to access the church of their choice. The registered manager discussed with people and families about how best the home could support people to engage with their faith. The registered manager gave us one example where various visual aids were present within the persons bedroom as a prompt and subsequently the person had experienced less distress.

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

- People were encouraged to make decisions whenever possible about their daily lives. The home used a variety of tools to enable people to make decisions such as photographic menus to enable people to make decisions about what they ate.
- Care plans contained detailed information about people's preferences and staff gave us numerous examples of how they promoted choice and ensured people's preferences were met.
- People told us, and we observed that choice was promoted, and decisions were respected. They said, "Choice is definitely promoted. If you want to stay in bed and only have breakfast at lunch time then it is fine, you can."

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with respect. They said, "Staff are very respectful" and we observed

respectful and discrete interactions between staff and people.

- The home had various tools to promote independence which included specialist tool for eating and drinking and alarms and sensors so that people could safely spend time alone in their bedroom.
- The feedback we received from professional was positive about how staff supported people. One professional told us, "They are really good at promoting independence. They encourage people to keep waling. They try to keep people's mobility and they don't seem to get many falls."

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 and to meet their needs and preferences

- Care plans clearly evidenced that people and relatives had been involved in developing their package of care and people said, "We have been very much involved in the care plan and reviews."
- People had detailed care plans in place which gave staff the guidance they required to meet people's individual need based upon personal preferences. Staff told us, "The records are very informative." and, "The information about people's care needs is very clear so you know what people need."
- Health care professionals provided positive feedback about the care records. The comments included, "The care plans are good, up to date and person-centred." and, "The registered manager works hard to provide a personalised service for individuals."
- We observed that people had their care needs met in line with the care plans and staff respected people's choice. The right to refuse was care planned for and guidance on how staff should support people refusing personal care was provided. Staff were clear on what action needed to be taken to ensure a person was safely supported

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.

- The home used a variety of tools to support communication which included pictorial menus and signs and flashcards which supported people to communicate their feeling. The registered manager told us they could provide information in a variety of formats as required.
- Care plans had detailed information about people's communication needs and preference. For example, in one care plan we reviewed there was detailed information about the persons non-verbal communication and how they communication distress as well as guidance about how staff could best support and reassure this person.

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

- We saw that a variety of activities were undertaken with people daily. This activity plan had been developed following discussion with people about their interests and preferences and we could see how the activities had changed depending on who was living in the home.
- The home worked closely with local service and engaged in a variety of group activities that had been run with in the local community. For example, the home had recently attended an activity called 'The care home

Olympics' and subsequently had become more involved in a programme of physical activities for older people. People and staff spoke positively about this activity and how engaged people had become.

Improving care quality in response to complaints or concerns

- Everyone we spoke to told us they felt able to discuss any issues with the registered manager. The comments we received included, "I can say anything I need to [registered manager]. I know they will fix it." and, "We have lots of contact with the registered manager. I think they would do anything that needed if we had any concern, but we've never needed to raise anything."
- The home had a complaints policy in place and this information was available within the service user guide and on display in the home. The registered manager advised that either they or the provider were onsite and available most of the time should anyone wish to make a complaint. They had an open-door policy for people, staff and relatives to discuss any issues.
- The home had not received many complaints, but the records demonstrated that when complaints or concerns were made these were fully investigated and action taken to address the concern. Feedback was provided to the complainant and learning shared with all staff.

End of life care and support

- At the time of the inspection nobody was receiving support in this area. Care plan did, however, contain information about people's end of life wishes and preferences to ensure that appropriate end of life care and support could be provided.
- The home had good working relationships with professionals, such as the local doctors, district nurses and local hospice so that a joined-up approach could be taken when supporting people with end of life care. Training had been arranged for staff in this area, but dates had not yet been agreed.

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

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

- We observed that people and visitors knew the registered manager and spoke very highly of them. They said, "Things have really improved since the registered manager came here. They are so caring. They understand people really well and what their needs are." and, "The registered manager is amazing. They are so knowledgeable, and you tell it is more than a job to them."
- Staff told us the registered manager and provider were very hands on and would get involved and support staff. They told us "[Registered manager] is so lovely and you can discuss anything with them." and, "[Registered manager] is always discussing things to improve the home and the quality of service. They will take on suggestions."

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

- The registered manager conducted many comprehensive audits around the quality of service provision and worked closely with the provider to drive improvement. The records showed that where required, action was taken to maintain or improve the home.
- The registered manager understood their regulatory requirements. The previous inspection report was displayed and available within the home. The registered manager had submitted relevant statutory notifications to the CQC.
- The registered manager had a system for oversight with accidents, incidents and near misses and used this information to drive improvement within the service. This included action to prevent future reoccurrences.
- Families told us that communication was excellent and that staff kept them informed of everything in relation to their family members. One relative said, "Communication is excellent. Every little thing that goes on they tell you about."

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

- The home held regular meetings with residents and relatives. Records demonstrated that these provided people with an opportunity to provide feedback and share ideas and suggestion to improve the home.
- The home held regular staff meetings which were used as an opportunity to share knowledge and information, discuss good practice and provide positive feedback to staff. Staff told us they found these

meeting useful and informative.

- People, relatives, staff and professionals were all asked to complete quality assurance surveys throughout the year. The surveys from this year were very positive and included, "The food is good, and I am glad I came." These surveys were analysed by the registered manager and where ideas and suggestions had been made, we could see that the registered manager had taken these forward. For example, the registered manager had developed more activities following suggestions.

Working in partnership with others; Continuous learning and improving care

- The home had excellent working relationship with local services. This included health care service and other local homes and allowed resources and opportunities to be shared fully.
- The registered manger was highly proactive in identifying and developing staff awareness of best practice. There were champions who took the lead in promoting good practice in a variety of areas such as infection control and dementia and the registered manager would identify numerous learning opportunities for staff to engage in.
- Team meetings and supervisions demonstrated that staff were encouraged to reflect on practice and discuss learning. We saw that ideas and suggestion were welcomed and implemented within the home when possible.