

Heathfield Care Homes Limited

# Tudor Lodge Nursing Home

## Inspection report

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Date of inspection visit:  
17 October 2017

Date of publication:  
20 November 2017

### Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We previously inspected Tudor Lodge on the 29 and 30 of June 2016 and found the provider did not have robust governance systems in place to recognise and implement measures for improvement. People's records were not always updated to reflect their care needs and the requirements of the Mental Capacity Act 2005 were not consistently applied. Risks to people's health and wellbeing were not always appropriately documented. We found a breach of Regulation 17 Good governance and told the provider to improve.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Tudor Lodge nursing home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

After our inspection the provider sent us an action plan which detailed the improvements they were going to make. We were satisfied with the content of their action plan and we returned to conduct a focused inspection on the 17 October to check they had made the improvements needed. At this inspection we were satisfied improvements had been made and they had met the requirements of the regulation.

The provider had good arrangements in place to monitor the quality of care people received. .

People's records were regularly reviewed and provided accurate information.

Effective arrangements were in place for the monitoring of the Mental Capacity Act 2005.

Staff were knowledgeable about people's care needs.

The introduction of an electronic recording system allowed staff to document, review and assess people's care needs more thoroughly.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service well-led?

Good ●

The service was well led.

The provider had good arrangements in place to monitor the quality or care provided and to drive improvement.

People's records were regularly reviewed and provided accurate information.

Effective arrangements were in place for the monitoring of the Mental Capacity Act 2005.

# Tudor Lodge Nursing Home

## **Detailed findings**

### Background to this inspection

We carried out this focused inspection of Tudor Lodge Nursing Home under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection of 29 and 30 of June 2016 had been made.

This inspection took place on 17 October and was unannounced.

One inspector carried out the inspection.

Before our inspection we reviewed previous inspection reports and notifications we had received. A notification is information about important events which the provider is required to tell us about by law.

During our visit we spoke with the registered manager, the provider, four people and six members of staff. We also spoke with three relatives and two healthcare professionals.

We looked at staff records, quality assurance audits, training records, reviewed policies and procedures relating to safeguarding and checked the provider was complying with the requirements of the Mental Capacity Act 2005.

We last inspected the home on 29 and 30 June 2016 where we identified the provider did not have robust arrangements in place to monitor the quality of care people received.

# Is the service well-led?

## Our findings

We previously inspected Tudor Lodge on the 29 and 30 of June and found the provider did not have robust governance systems in place to recognise and implement measures for improvement. People's records were not always updated to reflect their care needs and the requirements of the Mental Capacity Act 2005 were not consistently applied. Risks to people's health and wellbeing were not always appropriately documented. We found a breach of Regulation 17 Good governance.

After our inspection the provider sent us an action plan which detailed the improvements they were going to make. We were satisfied with the content of their action plan and we returned to conduct a focused inspection on the 17 October to check they had made the improvements needed. At this inspection we were satisfied improvements had been made and they had met the requirements of the regulation.

Effective arrangements were in place to check the implementation and the recording of the Mental Capacity Act 2005 (MCA). For example, the registered manager was able to show us a spread sheet which detailed who was subject to deprivation of liberty safeguards (DoLS), people who were waiting to be assessed for DoLS and people who required decisions to be made in their best interest. Records were detailed and demonstrated the registered manager had assessed people's capacity to make specific decision. They had considered the least restrictive options available to people and regularly reviewed and recorded any changes in cooperation with people's next of kin or people's power of attorney (POW). Quality audits showed staff had received training in how to apply the MCA and records showed the registered manager and senior staff were knowledgeable about people who needed help to make decisions.

Records associated with people's care needs were updated in reasonable time scales and accurately reflected the care they received. We asked four members of staff to tell us about the care needs of four different people who lived in the home. They accurately described their needs; the risks associated with their care and were able to show us how they recorded any form of care which was documented on an electronic recording system. The registered manager told us the electronic system had recently been implemented and said staff were in the process of developing their knowledge of the system. A member of staff was unable to locate one person's nutritional details but said, "Hang on, I can't find it on here but I can show you what you need to see in his paperwork". The staff member showed us the person's care plan which detailed their allergies, nutritional needs and their speech and language guidelines.

People's repositioning needs, food and fluid intake, health needs and social activities were recorded and reviewed with input from nursing staff and the registered manager when needed. When describing the benefits of the homes computerised system the provider commented, "A warning bell reminds staff repositioning is due". Improvements also identified through quality audits included the need for updated equipment, improved staffing levels at night, decoration within the home, staff training and medication. Action plans were put in place and were regularly reviewed. The provider acted as a positive role model and told us other care services had visited their home to obtain advice and guidance about how to improve the quality of care they provided in their own services.

