

Moorings Care Home Ltd

Moorings Nursing Home

Inspection report

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Canvey Island
Essex
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Ratings

Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Is the service effective?

Requires improvement



Is the service responsive?

Requires improvement



Is the service well-led?

Requires improvement



Overall summary

This inspection took place on 5 October 2015 and was unannounced.

Moorings Nursing Home provides accommodation, personal and nursing care for up to 39 older people who may be living with dementia and/or mental health issues. On the day of our visit there were 29 people who lived in the service.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our last inspection in February 2015 we had concerns about people's care and support and the lack of information in their care plans, a nurse working against their condition of practice, staff training and support, the application of the Mental Capacity Act 2005 (MCA) and the quality assurance system and records.

You can read the report of our last comprehensive inspection by selecting the 'all reports' link for Moorings Nursing Home on our website at www.cqc.org.uk

At this inspection we found that the service had improved in all of the areas we reviewed and were no longer in breach of the Regulations.

Summary of findings

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People were protected from abuse and harm because safeguarding procedures had been followed and medication was managed safely.

There were sufficient numbers of staff provided to meet people's needs. Staff had the knowledge and skills that they needed to support people. They received training and on-going support to enable them to understand people's diverse needs.

People were supported by staff that understood them. Staff had undertaken training in the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS) and demonstrated an awareness of the issues around people's capacity and to consider people's best interest when supporting them to make decisions. People's capacity and ability to make informed decisions were assessed and recorded clearly. The service had complied with the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (DoLS).

People's care plans provided staff with sufficient information to meet their needs. Staff knew how to support people in ways that they wished to be supported. Risks to people's care and welfare had been fully assessed and they had been involved in make decisions about their care and welfare.

The records were clear and provided staff with important information to protect people against risks to their health, safety and welfare.

People and their relatives were positive about the quality of the service. The registered manager had carried out checks on its systems and practices.

The provider had taken steps to mitigate the risks to people and address the shortfalls found at the last inspection. This included implementing systems to monitor the quality and safety of the service. However, these measures need to be embedded and sustained over time to ensure people are provided with a consistently safe quality service. The overall rating of the service will not change at this time.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

Staff had a good knowledge about how to keep people safe and safeguarding issues had been dealt with appropriately.

There were sufficient staff to meet people's assessed needs.

Medication was managed safely and effectively.

People were no longer at risk of receiving unsafe care because the registered nurse who had not adhered to their condition of practice was no longer employed by the service and other nurses did not have conditions on their practice.

Requires improvement



Is the service effective?

The service was effective.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

Staff had knowledge of the Mental Capacity Act (2005) and the Deprivation of Liberty Safeguards (DoLS) but it had not always been applied appropriately.

People were cared for by staff had received training and supervision.

Requires improvement



Is the service responsive?

The service was responsive.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

People received personalised care and support and had been involved in planning and reviewing their care.

Requires improvement



Summary of findings

Is the service well-led?

The service was well-led.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

There was an effective system in place to assess and monitor the quality of the service people received. People were happy with the quality of the service and provided many positive comments.

Records were now of a satisfactory standard.

Requires improvement



Moorings Nursing Home

Detailed findings

Background to this 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.

This inspection took place on 5 October 2015 and was unannounced and carried out by two inspectors and an expert by experience. An expert by experience is a person who has personal experience and knowledge about similar services.

Before our inspection we reviewed information that we held about the service such as previous inspection reports, safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

We spoke with nine people who used the service, three visiting relatives/friends, the registered manager and 14 members of care staff. We reviewed four people's care records and six staff recruitment and support files. We also looked at a sample of the audits and staff rotas.

Is the service safe?

Our findings

At the last inspection in February 2015 we had concerns about a qualified nurse's condition of practice that had not been adhered to, medication, care plans and staffing.

At this inspection we found that all qualified nurses who were working were doing so appropriately. The qualified nurse who had not adhered to their condition of practice no longer worked at the service. Staffing levels had improved and medication care plans were reflective of people's needs.

Staff were positive about staffing levels and one said, "Things are 100% better now. Nine times out of 10 we can find cover for shifts and we don't need to use agency staff as there is a bank staff list that we share with our sister home." The registered manager was in the process of recruiting more staff. They told us that recruitment was on-going and that they were employing more bank (as and when required) staff.

The registered manager told us and the staff duty rotas confirmed that one qualified nurse and six care assistants worked throughout the day and that one qualified nurse and three care assistants worked at night. The staff duty rotas viewed over an eight week period showed that staffing levels had been consistent.

People told us that they received their medication appropriately. Staff were trained and had a good knowledge of medication policy and procedure and the medication dosage system that was in use.

Staff told us that their competence to administer medication had been regularly checked. There were detailed medication care plans to explain when, why and how people were to receive their medication. People received their medication safely.

People told us that they felt safe living in the home. One person said, "I feel safe here. I think it is a safe home and the staff all seems good." One visiting relative told us, "It is good to know that my relative is well looked after and when we leave we're very comfortable to know they are in a safe place."

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

Is the service effective?

Our findings

At the last inspection in February 2015 we had concerns about staff's training and support and the application of the Mental Capacity Act 2005 (MCA).

At this inspection we found that improvements had been made and staff had received regular supervision and a good level of training since the last inspection. Staff told us, and the records confirmed, that they had received training which included MCA and the Deprivation of Liberty Safeguards (DoLS), person centred care, dignity and respect, mental health and dementia. One staff member said, "There has been a lot of improvement in the training and we work as a nice team and are all very people focussed."

Staff told us that they had received supervision every six to eight weeks which included observations of their practice and that it had been recorded on the computer system. They said that they felt well supported by the manager and could always contact him if in doubt about anything.

People told us that the staff were very good and knew what they were doing. The registered manager said, "We work

with people and get to know them well and accept their condition and they do tend to settle down after a while. I ensure that all staff have training in mental health care." People received their care from staff who were well trained and supported.

The staff and registered manager had a good knowledge about the MCA and DoLS and they had been appropriately applied when needed. There were mental capacity assessments in place where required and staff had access to the information on both the main computer and the computer tablets. Staff told us that they preferred to enter information on the main computer but liked the convenience of the computer tablets for easy access to up-to-date information about people's needs. People were involved in decisions about their care and their human and legal rights were respected.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

Is the service responsive?

Our findings

At the last inspection in February 2015 we had concerns about people's care and support.

At this inspection we found that improvements had been made and people had received their care and support appropriately.

People told us that they received good care. Staff had a good knowledge about people's needs and the care plans were reflective of this. The tablet computers contained information such as pre-admission assessments, medical, health, medication information and mental capacity assessments. They also contained risk assessments and management plans for skin care, mobility, communication and dietary needs. There was clear information about people's likes, dislikes and their personal and social histories. The care plans had been regularly reviewed and updated to reflect people's changing needs.

Staff told us that the information on the computer tablets was quickly accessible to enable them to be responsive to any changes in people's needs. One staff member said, "I like using the computer tablet to record information, it's much quicker than writing and I can now log things as I go so I have more time to spend caring for people."

Where people were able to use their call bells they had access to them. There was information in people's care plans to describe how people who were not able to use their call bells were to be kept safe, for example staff would make more frequent checks on people who were in their rooms. One person told us, "I don't have a call bell extension but if I need help I use my knitting needle to press the call bell on the wall and it works." Another said, "They [staff] are pretty quick if I ring the call bell when I need help with anything."

People said that the service was responsive to their needs and we saw that staff were readily available to support them throughout our visit. This showed that people received a responsive, personalised service that met their needs, choices and preferences.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.

Is the service well-led?

Our findings

At our last inspection in February 2015 the service had improved in some areas of quality monitoring, however, further improvements to the auditing systems were needed.

At this inspection we found that the registered manager had carried out detailed care plan checks and any shortfalls had been identified and rectified. They had spoken with people and with members of staff to obtain their views on the quality of the service. The registered manager had carried out regular monthly audits.

There were positive comments from the 2015 quality assurance survey displayed in the foyer. They included, 'a safe and pleasant home', 'competent and dedicated staff with a friendly attitude', 'the home constantly provides a very good level of care', and, 'the home has greatly improved since the new manager has taken over'. The information had been analysed and an action plan was put in place to address any shortfalls.

One visiting relative told us, "My relative was unable to speak for a long time following a health problem. We have heard the staff talking to [person's name] and encouraging

them and they can now say a few words and we think that it is due to the staff input. My relative has a nice room and is always well groomed and nicely dressed when we visit. It's good to know how well they are looked after."

All records were stored electronically and they had been regularly updated. We were able to track accident and incident reports and saw that any accidents had been followed up appropriately to ensure people's safety.

The daily allocation sheets, which showed who worked where, and when staff took their breaks had been fully completed. They showed where staff had worked in the building and when they had taken their breaks and this ensured that all areas of the home had staff cover throughout the shift. The allocation sheets were filed in good order and the registered manager had checked them as part of his regular audits.

Important information was now stored electronically to ensure that people's health, safety and welfare were protected.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term delivery of consistent good practice.

We will review our rating for this key question at the next comprehensive inspection.