

Cumbria County Council

Maudes Meadow

Inspection report

Town View
Windermere Road
Kendal
Cumbria
LA9 4QJ

Tel: 01539773092

Date of inspection visit:
28 March 2017

Date of publication:
19 May 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

This comprehensive inspection took place on 28 March 2017 and was unannounced. We last inspected Maudes Meadow in December 2015. At that inspection we found breaches of Regulation 12 Safe care and treatment and of Regulation 17 Good governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found that the provider had complied with the requirement notices in relation to those breaches.

Maudes Meadow is a residential care home that can accommodate up to 28 older people at the time of this inspection there were 14 people living at the home. The property is a two-storey building and accommodation is provided over two floors the upper being accessed by a passenger lift. There are two separate communal and dining areas on the ground floor and one is designated for people who are living with dementia. It is close to the town centre of Kendal.

There was a registered manager in post at the time of the inspection who had been appointed after the last inspection. A registered manager is a person who has registered with the (CQC) 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.

There were sufficient numbers of suitably qualified staff to meet people's needs and promote people's safety.

Where safeguarding concerns or incidents had occurred these had been reported by the registered manager to the appropriate authorities and we could see records of the actions taken by the home to protect people.

When employing fit and proper persons the recruitment procedures of the provider had not always been followed. We saw for one person recently employed that one of the checks the provider usually completed had not been done in line with the company's procedures.

The storage and records for medications had improved since the last inspection in December 2015. We saw medicines were being administered and recorded appropriately and were being kept safely. However two people's medicines had not been reordered in a timely manner.

We have made a recommendation that systems in place were reviewed for the management of reordering medications.

People's rights were protected. The staff team were knowledgeable about their responsibilities under the Mental Capacity Act 2005. People were only deprived of their liberty if this had been authorised by the appropriate body and was required to maintain their safety and welfare.

Staff had completed training that enabled them to improve their knowledge in order to deliver care and support safely.

People were supported to maintain good health and appropriate referrals to healthcare professionals were made.

There was a clear management structure in place and staff were happy with the level of support they received.

People living in the home were supported to access activities of their choice.

Since the last inspection in December 2015 more formal audits and quality monitoring systems had been implemented that were effective in monitoring the safety and quality of the home.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement 

The service was not always safe.

Prescribed medicines were stored and managed safely. We made a recommendation about the management of reordering medicines to prevent people's them running out.

Checks of suitability were made, usually, in line with the provider's policies to ensure that people being employed were fit and proper persons.

People told us they were safe and very well cared for in this home.

Is the service effective?

Good 

The service was effective.

People said they thoroughly enjoyed the meals provided and appropriate assessments relating to nutritional requirements had been made. People had their nutritional needs assessed and were appropriately supported by staff to eat and drink.

Consent to care and treatment had been obtained involving where required appropriate others.

Staff had received the relevant training to fulfil their roles.

Is the service caring?

Good 

The service was caring.

People were treated with kindness and compassion and their dignity was respected.

People told us they were well cared for and were valued as individuals.

People wishes for how they wished to be cared for at their end of life had been planned for.

Is the service responsive?

Good 

The service was responsive.

We saw there were activities which people took part in.

People and relatives felt able to speak with staff or the management team about any concerns they had.

Care plans and records showed that people were seen by appropriate professionals when required to meet their physical and mental health needs.

Is the service well-led?

Good ●

The service was well led.

More formal systems had been implemented to record quality monitoring and safety of the service provision.

Staff told us they felt supported and listened to by the registered manager.

People living at the service and their relatives were able to give their views and take part in meetings and discussions about the service.

Maudes Meadow

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 was 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 unannounced inspection took place on 28 March 2017. The inspection team consisted of an adult social care inspector and an expert-by-experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection, the registered manager completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the PIR and other information we held about the service to plan our inspection and the areas to look at.

We also looked at the information we held about the service and information from the local commissioners of the service. We also looked at any statutory notifications the registered manager had sent us. A statutory notification is information about important events which the provider is required to send to us by law.

During the inspection we spoke with the registered manager, one of the provider's operations managers, five staff members, ten people who used the service and a relative. We observed how staff supported people who used the service and looked at the care records for seven people living at Maudes Meadow. We also observed how people were supported by the staff during the day.

We looked at the staff files for staff recruited since our last visit. These included details of recruitment, induction, training and personal development. We looked at the overall training record for all staff. We also looked at records of maintenance and repair and other quality monitoring documents.

Is the service safe?

Our findings

People living and visiting at Maudes Meadow that we spoke with told us they felt people were kept safe. A relative we spoke with told us they had no concerns about the safety of people at the home. One person who had not lived at the very home long told us, "It's good, very good, welcoming and I have great care".

At the last inspection we found a breach of Regulation 12 Safe care and treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the information recorded about people's medication requirements was not always current or accurate. We also found the fridge used for the storage of some medications had not had the temperature monitored on a regular basis to ensure the safe storage of medications.

During this inspection we found that improvements had been made to the records and information recorded was current and accurate about people's medicines. We also found that the storage of medicines was appropriate and safe. However we saw that in the last month medicines for two people had run out as the management of the reordering had not been done in a timely manner. We recommend that systems in place are reviewed for the management of the reordering of medications.

During the inspection we saw that there were sufficient numbers of suitable staff to meet people's needs and promote their safety. Staff we spoke with told us they felt that staffing levels were sufficient for the current number of people living in the home and for their level of needs. We observed there to be sufficient staff available at lunchtime and were aware of how people were managing their meals and provide assistance if they required it. There were consistently two members of staff on duty at night and this was seen as adequate to meet the needs of the people living in the home at the time of the inspection. We were told that this number of staff could, if required, be increased based on the needs of people should they vary.

We looked at two staff files for recruitment and saw that the necessary checks on employment had been completed. References had been sought and we noted that they were usually from the most recent previous employer in accordance with the homes recruitment policy. Disclosure and Barring Service (DBS) checks had been conducted to ensure persons being employed were fit and proper.

Staff we spoke with had a good understanding of how to protect people from harm. They understood their responsibilities to report any safeguarding concerns to a senior staff member. We looked at records of the accidents and incidents that had occurred. We saw that where necessary appropriate treatment had been sought and notifications to the appropriate authorities had been made.

Care records relating to any risks associated with their care were current and accurate. Staff managed the risks related to people's care well. Each care record had detailed information about the risks associated with people's care and how staff should support the person to minimise the risks.

Is the service effective?

Our findings

People who used the service spoke very highly about the food served in the home. One person said, "There is a good choice of food" another person said, "The food is excellent quality." People told us there was plenty of choices and we saw that food was available at any time throughout the day. We saw some people who chose to get up later in the day were offered breakfast at whatever time they got up. We also saw that people were encouraged and supported by staff to make their own drinks and snacks.

We saw that people had nutritional assessments completed to identify their needs and any risks they may have when eating. Where people had been identified as at risk of malnutrition and weight loss this had been appropriately managed. We saw people received the right level of assistance they needed to eat and to drink. This was provided in a patient and discreet way.

At the last inspection we made a recommendation that staff received refresher training in certain topics relevant to their roles. During this inspection we looked at the staff training records which showed what training had been done and what was outstanding. We saw that staff had completed induction training when they started working at the home and staff had received regular updates on important aspects of their work such as dementia care. Staff we spoke with were able to tell us about training they had received. One carer we spoke to said they were up to date with all of their training. During the inspection a number of staff were taking part in moving and handling training.

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. The application procedures for this in care homes are 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 were being met.

At the last inspection we made a recommendation that the provider reviewed the process used when completing decisions made in peoples best interest. We found at this inspection the registered manager and care staff demonstrated a good knowledge and understanding of the Mental Capacity Act 2005 (MCA), which applies to people aged 16 or over. Best interest decisions had been made and the process recorded for people who were not always able to make decisions for themselves and where relevant independent advocacy could be arranged.

We saw that relatives or relevant persons had been consulted where people lacked the capacity to do so and had agreed with the level of care and treatment provided. We also saw that consent to care and

treatment in the care records had been signed by people with the appropriate legal authority. This meant that people's rights were being protected.

Where people were living with dementia there was signage to show people what different areas were for. This was to help people with memory problems to be able to move around their home more easily and independently. We saw that people had been able to bring some personal items into the home with them to help them feel more comfortable with familiar items and photographs around them. Bedrooms had been personalised with people's own furniture and ornaments to help people to feel at home and people were able to spend time in private if they wished to.

Is the service caring?

Our findings

People who lived at Maudes Meadow we spoke with told us they felt they were, "Well cared for" and that the staff were, "Very kind". One person we spoke with said, "I have never been better looked after. They [staff] are lovely." Another person told us, "The staff are all very good, very helpful couldn't be better." A relative we spoke to said, "I visit weekly, my sibling visits weekly and my other siblings visits fortnightly and we feel that our [relative] is well cared for."

We saw that everyone in the home was well groomed and dressed. On the day of the inspection most ladies had an appointment with the visiting hairdresser. Men were helped or encouraged to shave and to dress well. The atmosphere in the home was calm and relaxed. We saw that the interactions between staff and people living in the home demonstrated genuine affection, care and concern. Staff treated people with kindness and were respectful. We observed staff knock before entering people's rooms. The staff took appropriate actions to maintain people's privacy and dignity. We saw people were asked in a discreet way if they wanted to go to the toilet and the staff made sure that the doors to toilets and bedrooms were closed when people were receiving care to protect their dignity.

We heard conversation and laughter between staff and people living in the home. We observed staff going down to ear and eye level to talk to service users or to ask discreet questions. We saw that the staff gave people time and encouragement to carry out tasks themselves. This helped to maintain people's independence. Staff took the time to speak with people and took up opportunities to interact and include them in general chatter and discussion.

We saw that people's care records were written in a positive way and included information about the tasks that they could carry out themselves as well as detailing the level of support they required. This helped people to maintain their skills and independence. Care records showed that care planning was centred on people's individual views and preferences. People and their families were encouraged to talk with staff about the person's life.

We saw that where possible people's treatment wishes had been made clear in their records about what their end of life preferences were. The care records contained information about the care people would like to receive at the end of their lives and who they would like to be involved in their care.

Is the service responsive?

Our findings

We saw people could engage in activities of their choice. One person wanted to have a walk outside so they went out into the secure garden that was easily observed by staff based on the dementia unit. Two other people made arrangements to go out later in the day with their relatives or friends. The hairdresser who comes into the home regularly was also available on the day of the inspection. There were no regular organised or many structured activities at the time of the inspection and staff told us this was because there were not many people residing at the home currently. However we saw that people were encouraged by staff to partake in table top games on a one to one basis and a mini exercise routine.

We looked at the care records for seven people living in the home. We saw that a full assessment of people's individual needs had been completed prior to admission to the home to determine whether or not they could provide people with the right level of support they required. Care plans recorded people's preferences and provided information about them and their family history. This meant that staff had knowledge of the person as an individual and could easily relate to them.

At the last inspection we made a recommendation that records about people's care needs were consistent and accurate in providing information about them. During this inspection we saw that information available for staff about how to support individuals was very detailed and accurately recorded. We saw from the care records that people's health and support needs were clearly documented in their care plans along with personal information and histories. We could see that people's families had been involved in gathering background information and life stories.

People's care plans demonstrated that there was effective working with other health care professionals and support agencies such as local GPs, community nurses, mental health teams and social services. We spoke with a visiting health care professional who supported people who lived in the home. They told us that the staff were very good at contacting them and asking for advice and support promptly and made appropriate referrals where necessary.

The home had a complaints procedure and we saw that complaints had been managed in accordance with the home's procedures. People we spoke with were aware of who to speak with if they wanted to raise any concerns. One person told us, "If I have a problem with staff I just tell them." The registered manager told us they preferred to deal with people's concerns as and when they arose.

Is the service well-led?

Our findings

The home had a registered manager in place as required for their registration with the Care Quality Commission (CQC) who had been appointed after the last inspection. People we spoke with told us they thought the home was well managed and staff said that they enjoyed working in the home. One staff member said, "I am happy working here" another staff member told us they had worked at the home for over 13 years because it was a good place to work.

At the last inspection in December 2015 we found a breach of Regulation 17 Good governance of the Health and Social Care Act 2008 (regulated activities) regulations 2014. This was because areas of safety and quality monitoring had been ineffective and there had been lack of consistency of management in the home. Since the last inspection we could see the changes that had been implemented to improve the quality of the service including the appointment of a registered manager. These improvements meant that during this inspection we found that all the essential fundamental standards had been met.

The premises were well maintained. Maintenance checks were being done regularly and we could see that any repairs or faults had been highlighted and acted upon. There was a cleaning schedule in place and records relating to premises and equipment checks to make sure they were clean and fit for the people living there.

There were processes in place for reporting incidents and we saw that these were being followed. There was regular monitoring of incidents and these were reviewed by the registered and deputy manager to identify any patterns that needed to be addressed. Where required CQC had been notified of any incidents and accidents and when safeguarding referrals had been made to the local authority.

Relatives and advocates of those living in the home were regularly involved in consultations about the provision of care and its quality. We saw that regular reviews were held. This meant that people and or their representatives could make suggestions or comment about the environment they lived in.

As well as informal discussions with people and their relative's about the quality of the home, surveys were undertaken to find out what people felt about living at Maudes Meadow. We saw that people's views about the quality of the care and the home had been obtained via questionnaires. We looked at what people had said during the last survey completed in April 2016 and what actions or responses had been made by the provider and registered manager to improve the quality of the service. People who used the service had commented positively and said the care received was excellent and they were happy with the care provided.