

Havenmere Health Care Limited

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Inspection report

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Date of inspection visit: 05 December 2022

Date of publication: 06 February 2023

Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Havenmere Health Care Limited is a care home that provides nursing care and residential care to younger adults. The home is registered to accommodate 38 people. It is purpose built and provides disabled access. At the time of inspection 33 people were living at the service.

People's experience of using this service and what we found People received safe, effective and well-led care.

There was an effective quality monitoring system, which ensured checks and audits were carried out. People's views were obtained and listened to and shortfalls were addressed. Accidents and incidents were analysed so that lessons could be learned. The provider had oversight of the service and completed regular checks.

There were enough staff. Safe recruitment processes had been followed. Staff were trained and their skills and knowledge checked through competency assessments.

People were protected from abuse and avoidable harm. Staff had completed training on how to safeguard people. Risk assessments were completed and followed to identify and reduce potential hazards. People received their medicine as prescribed.

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 policies and systems in the service supported this practice.

People told us they were happy with the service provided. Staff understood the importance of providing person-centred care and developed positive relationships with people.

Staff worked closely with healthcare professionals and sought their advice, guidance and support on how to best meet people's needs.

The culture of the service was open, and people and staff felt able to raise concerns.

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 3 April 2019).

Why we inspected

The inspection was prompted in part due to concerns received regarding medicines, staff training and staffs

2 Havenmere Health Care Limited Inspection report 06 February 2023

clinical knowledge. A decision was made for us to inspect and examine those risks.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



Havenmere Health Care Limited

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Havenmere Healthcare Limited is a 'care home'. People in care homes receive accommodation and nursing and personal care as a single package under one contractual agreement dependent on their registration with us. Havenmere Healthcare Limited is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, clinical nurse managers, care practitioners and health care assistants. We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.



Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from the risk of abuse.
- Staff were aware of the signs of abuse and how to report any safeguarding concerns. They were confident the manager would address any concerns reported to them and make the required referrals.
- People felt safe. One person said, "I love it here the staff are brilliant and support me to do what I want safely.".
- The registered manager was transparent in reporting any issues or concerns to the local authority's safeguarding team. This helped to safeguard people from the risk of abuse or neglect.
- The provider analysed accidents and incidents to identify any patterns or trends to reduce future risk and support the improvement of care.

Assessing risk, safety monitoring and management

- People received safe care and support to meet their needs. Risk assessments in people's care plans provided guidance for staff on how to safely support people to maximise their independence whilst minimising risks.
- The registered manager sought advice from relevant healthcare professionals when making decisions about how to provide safe care for people.
- Staff were knowledgeable about risks associated with people's care, and knew what action to take if concerned about people's health or well-being.

Staffing and recruitment

- Appropriate staffing levels were in place to meet the needs of people in the service. The provider used a staffing and dependency tool for guidance on the number of staff required.
- The registered manager had robust oversight of staff rotas, which showed there were enough staff on shift.
- Staff told us there were enough staff to meet people's needs.
- Safe recruitment practices ensured staff were suitable to work with people who may be vulnerable.

Using medicines safely

- Medicines were managed safely.
- Audits had been used effectively to help monitor and make sure medicines were managed safely.
- Staff completed training to administer medicines and their competency was regularly checked.
- Guidance for staff to safely and consistently administer medicines prescribed 'as required' (PRN) was in place.
- Controlled drugs were stored appropriately, and stock levels were accurate.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

• Visiting was carried out in line with current government guidance.



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 our last inspection we rated this key question good. The rating for this key question has remained good. 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; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People received effective care and support to help meet their needs and improve their quality of life. One person told us, "The staff encourage me to have my independence and make my own choices about my care and what I would like to do.".
- People's needs were assessed, and care plans were in place to support and guide staff to deliver effective care.
- Staff made appropriate referrals to other agencies, when required, such as the falls team, dietician and people's GP.
- People were supported to attend medical appointments.

Staff support: induction, training, skills and experience

- New staff completed an induction to ensure they had the skills and knowledge to carry out their role. This included reading policies and procedures, completing training and shadowing other members of staff.
- Nursing staff completed specialist nurse training to ensure they had up to date clinical skills and knowledge to support people effectively.
- Regular supervisions and annual appraisals, alongside observations and competency checks helped management monitor and make sure staff had the skills and experience necessary to provide effective care.
- Staff felt supported in their roles. One staff member said, "I feel supported by the management team, I can go to them with any concerns professional or personal.". Another said "The management team are brilliant; the registered manager is really supportive and flexible with your working hours for things like childcare. You really get a good life work balance".

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

- People's nutritional needs were met, and choice was provided. One person told us, "The food is lovely".
- We observed several people attending the weekly breakfast club where people could go and have a cooked breakfast in a social setting.
- The cook had a good understanding of people's dietary needs, such as those who had difficulty swallowing, and ensured they followed the appropriate guidance to safely support with those with eating difficulties.

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

- The accommodation was arranged over two floors and the layout of the service met the needs of the people who lived there.
- Rooms were personalised and people chose how they wanted to decorate their rooms.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Care plans reflected the principles of the MCA. Where restrictions were in place, appropriate DoLS applications had been made to the local authority.
- Assessments had been completed when people lacked capacity and best interest meetings were held to protect people's rights.



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 our last inspection we rated this key question good. The rating for this key question has remained good. 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; 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

- The provider and registered manager fostered an open and inclusive culture. The focus was on delivering high standards of person-centred care.
- Staff understood the provider's values and put them into practice on a daily basis.
- The registered manager and staff promoted people's independence, allowing and supporting people to take positive risks appropriately.
- The provider and registered manager understood the duty of candour responsibility; they had been open, communicated well and apologised to people and relatives when things had gone wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- The registered manager was aware of their role and responsibilities and kept up to date with best practice.
- There were daily handover meetings with staff to ensure effective communication about key issues and make sure staff were clear about their tasks and responsibilities. Staff also attended a 'daily take 20' meeting, which allowed staff to communicate any changes in people's care.
- Staff worked in partnership with a range of health professionals who visited the service, such as dieticians and GP.
- The registered manager was aware of their responsibility to notify the Care Quality Commission and other agencies when incidents occurred which affected the welfare of people who used the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- A culture of high quality, person-centred care had been embedded in the service, which valued and respected people's rights.
- The provider had a quality monitoring system, which consisted of audits, checks and visits from the senior management team. Shortfalls were identified, and action plans produced to address them.
- People spoke positively about how the service was managed. One person told us, "The staff are brilliant, and the management are approachable, I have no concerns about the service".