

Qualia Care Limited

Hillside Care Home

Inspection report

Hillside Avenue
Liverpool
Merseyside
L36 8DU

Tel: 01514430271

Date of inspection visit:
15 February 2023

Date of publication:
08 March 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Hillside Care Home accommodates up to 119 people who require personal and nursing care. At the time of the inspection there were 67 people using the service across three separate units over two floors.

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

People felt safe living at the service and family members were confident their relative was kept safe. Risk assessments were completed, and staff had guidance on how to minimise the risk of harm to people. Staff understood their responsibilities for protecting people from the risk of abuse and were confident about reporting any concerns about people's safety. People received care and support from the right amount of suitably skilled and experienced staff who were safely recruited. Medicines were safely managed by staff who were suitably trained and deemed competent. Accidents, incidents and near misses were reported and responded to appropriately and lessons were learnt and shared across the staff team. Safe infection prevention and control practices were followed to minimise the spread of infection including those related to COVID-19.

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 registered manager had influenced and embedded improvements to the service since the last inspection with the support of a committed and passionate staff team. The providers quality assurance systems and processes were used effectively to assess, monitor and improve performance and the quality and safety of the service. There was good partnership working with other agencies and professionals resulting in good outcomes for people. The culture of the service was positive and inclusive of all. The views of people, family members and staff were listened to and acted upon.

Rating at last inspection

The last rating for this service was requires improvement (published 30 July 2021).

Why we inspected

This was a planned inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the

overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Hillside Care Home on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Hillside Care Home

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Hillside is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We reviewed all the information we held about the service since it registered with the Commission. We also

obtained information about the service from the local authority and local safeguarding teams. 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection visit

We spoke with 7 people and 6 family members about their experience of the care provided. We also spoke with the registered manager, 2 nurses, 8 care staff, a maintenance person and 4 ancillary staff.

We reviewed a range of records. This included 4 people's care records and a selection of people's medication records. We looked at recruitment records for 4 staff members employed since the last inspection. A variety of other records relating to the management of the service, including audits and checks 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 the last inspection we rated this key question requires improvement. At this inspection this key question has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- Staff understood the different types of abuse and how to report concerns of harm or poor care.
- Allegations of abuse were reported and raised with all relevant agencies in a timely way.
- People told us they felt safe and family members told us they were confident their relative was kept safe. One person said, "Oh yes, I feel very safe indeed." A family member said, "No worries on that score, I leave here sure [relative] is safe."

Assessing risk, safety monitoring and management

- Risk was assessed, monitored and managed.
- Risk assessments were completed to identify hazards and the measures needed to remove the hazard or minimize the level of risk. Staff had access to information to guide them on how to provide people with safe care and support and monitor their safety. Staff completed care monitoring records in line with people's risk management plans and they were reviewed daily.
- Each person had an individualised personal emergency evacuation plan (PEEP) detailing the safest way for them to be evacuated from the building in the event of an emergency. PEEP's were updated to reflect any changes in people's circumstances.
- Regular safety checks were carried out on equipment, utilities and the environment and a record of outcomes was maintained. Prompt action was taken in response to any hazards or faults identified.
- Staff received training and regular updates in topics of health and safety including emergency procedures.
- There was a business continuity plan for responding to emergencies and unforeseen circumstances.

Staffing and recruitment

- There were enough suitably trained and skilled staff to meet people's needs and keep them safe and they were safely recruited.
- A staffing rota was developed for each area of the service and they showed the right numbers of suitably skilled and experienced staff. Each area had a designated senior member on each shift.
- Applicants fitness and suitability was assessed through a series of pre-employment checks before a job offer was made. This included a check with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were used safely.
- Staff with responsibilities for managing medicines were trained and deemed competent. Training updates and competency checks were regularly completed.
- Regular checks and audits were undertaken to make sure medicines were being safely stored, administered and recorded.

Preventing and controlling infection

- Safe practices were followed to minimise the spread of infection.
- Staff received training in infection prevention and control and the safe use and disposal of personal protective equipment (PPE). Staff had access to a good stock of PPE, and they used and disposed of it safely.
- Staff were provided with current government guidance around the safe management of infections including those related to COVID-19.
- People's health was monitored for signs of infection and they were supported to access vaccination programmes.
- Staff followed robust cleaning schedules and used the right standard of cleaning products and equipment. The cleanliness and hygiene across the service was maintained to a good standard. One person told us, "Oh yes my room is kept spotlessly clean" and a family members told us, "They are on top of the cleaning, keep [relatives name] room clean and tidy" and "Always smells nice and kept clean."
- Visits to the service were carried out safely in line with current government guidance.

Learning lessons when things go wrong

- Lessons were learnt when things went wrong.
- Root cause analysis records were completed for incidents, accidents or near misses. These records included any actions taken to reduce the risk of recurrence. Lessons learnt were discussed with staff teams.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

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 we rated this key question requires improvement. At this inspection this key question has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and staff had a clear understanding of their roles and responsibilities.
- There was a clear management structure which everyone understood. The registered manager had overall responsibility for the running of the service with the support of unit managers, senior care staff and the organisations quality assurance team.
- The registered manager had good knowledge of the regulatory requirements which apply to the service and of their responsibility for making sure they were met. They facilitated sessions for staff to help develop their knowledge on how to achieve and sustain the required standards.
- The provider's quality assurance systems and processes were used effectively by the registered manager and other senior staff to measure performance and the quality and safety of the service. They carried out regular audits, spot checks and daily walk arounds to ensure a safe environment and good quality care was being delivered.
- Representatives from the providers quality assurance team completed monitoring visits as part of the providers governance systems to ensure they remained effective. Any areas for improvement found were added to a service improvement plan.
- The registered manager was committed to sustaining improvements made following previous inspections. They promoted learning and continuous improvements through leading by example and communicating effectively with staff. The sharing of learning has helped to develop consistent practices which have led to positive changes.

Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was effective partnership working with others including agencies and professionals.
- The registered manager and staff worked consistently with others such as family members and local authority commissioning and safeguarding teams to promote and ensure good quality care for people. A family member told us, "They keep us up to date and let us know if any changes are needed to [relatives name] care."
- Feedback from other visiting professionals was positive. They were confident in the leadership of the service and felt the service had improved since the last inspection.
- The registered manager engaged and involved people, family members and staff through regular care reviews, meetings, general discussions and questionnaires. Questionnaires were sent out to people, relatives and staff to gain their views and feedback on the service. The results of surveys and responses to

any ideas and suggestions for improvement, were shared.

- Regular staff meetings were held as a way of sharing any learning and development, good practice, and any changes and updates about the service. Staff felt the registered manager communicated well with them. Staff meeting minutes showed evidence of staff involvement and their contributions.

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

- The registered manager promoted a positive culture which was person-centred and inclusive.
- Staff told us that the registered manager was professional, approachable, supportive and a good listener. Staff comments included "[registered manager] is really supportive and always listens and takes on board what you say" and "No worries about asking for help or advice, always gives you an answer."
- Continuous improvements led to people receiving good outcomes. Staff spoke passionately about ensuring people received the best possible care and they showed good values and a lot of respect towards people. Staff told us, "Our residents deserve the best care" and "I treat the residents like they are my own family."

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 registered manager and provider understood and acted on the duty of candour.
- The required notifications were sent to the CQC in a timely manner.
- The provider displayed their CQC rating on their website and at the service.