

Lifeline Nursing Services Limited

# St Edmunds Nursing Home

## Inspection report

Worcester Road  
Grantham  
Lincolnshire  
NG31 8SF

Tel: 01476576811

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18 May 2017

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection on 4 October 2016. A breach of a legal requirement were found. After the inspection, the provider wrote to us to say what they would do to meet the legal requirement in relation to the breach.

At the last inspection on 4 October 2016 we found that the provider was not meeting the standards of care we expect. This was in relation to the registered persons not taking into consideration the complex needs of people. Therefore there were insufficient staff to meet people's needs.

We undertook this focused inspection on 18 May 2017 to check that they had followed their plan and to confirm they now met the legal requirement. During this inspection on the 18 May 2017 we found the provider had made improvements in the area we had identified. The legal requirement for Regulation 18 was now met.

This report only covers our findings in relation to that requirement. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for St Edmund's Nursing Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

St Edmund's Nursing Home provides care for people who require personal care. It provides accommodation for up to 49 people. At the time of the inspection there were 49 people living at the home.

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.

On the day of our inspection we found that the registered provider had ensured that there were sufficient staff on duty to keep people safe and meet their needs. The manager ensured that people's dependency levels were reviewed on a regular basis, in consultation with each individual. Staff were consulted about the staffing levels and told us they felt their opinions were valued.

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

We always ask the following five questions of services.

### Is the service safe?

We found that action had been taken to improve the safety of the service.

This meant that the provider was now meeting legal requirements.

There were sufficient numbers of suitable staff to keep people safe and met their needs.

The dependency levels of people were regularly reviewed to ensure their complex needs were taken into consideration when allocating staffing levels.

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 track record of consistent good practice.

**Requires Improvement** 

# St Edmunds Nursing Home

## **Detailed findings**

### Background to this inspection

We carried out an unannounced focused inspection on 18 May 2017. This inspection was completed to check that improvements to meet a legal requirement had been met. This was in regard to the registered persons not taking into consideration the complex needs of people. Therefore, there were insufficient staff to meet people's needs at our last inspection.

The provider told us improvements would be made after our comprehensive inspection on 4 October 2016.

We inspected the service against one of the five key questions we ask about services; is the service safe. This is because the service was not meeting the legal requirement in relation to that section.

The inspection was undertaken by a single inspector.

During our inspection we spoke with 10 people, three relatives, four care workers, one registered nurse, a housekeeper, a cook and the manager. We also spoke with the project manager who was overseeing the home. We looked at records which included staff rotas, dependency levels of people using the service, the training planner and training statistics, the policy on absence, the concerns and complaints folder and the audit checklist.

# Is the service safe?

## Our findings

At our previous inspection on 4 October 2016 we identified that the registered persons had not taken into consideration the complex needs of people. Therefore, there were insufficient staff to meet people's needs. This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

After our inspection the provider wrote to us to say what they would do to meet the legal requirement. At our focused inspection on 18 May 2017 we found that the provider had followed the action plan they had written to meet shortfalls in relation to Regulation 18 described above.

At this inspection people we spoke with told us their needs were being met. They told us that there were sufficient staff around at all times, including through the night. Comments included, "looked after really well" and "all needs being met" and "get everything done."

People told us the staffing levels had improved especially at weekends and when staff had a handover period between shift changes. One person said, "It's better than it was at weekends." Another person told us, "I can get up and go to bed when I want to." People also told us that the response time to call bells being activated had also improved. One person said, "If I press my call bell they come right away." Another person told us, "I press my call bell and they do their best to come quickly." We asked a person's permission to test their call bell whilst speaking with them. Staff came within a short period of time. They were unaware we were in the bedroom with the person at that time.

Relatives told us that they felt their family members were looked after by the staff. They said their family members had never complained to them that their needs were not being met. Comments included, "staff are brilliant" and "looked after well" and "happy for them to be here." We looked at the concerns and complaints folder and there had been none raised since our last inspection about staffing levels or needs not being met.

Staff told us that there were sufficient staff on duty to meet people's needs as long as everyone on the staff rota turned up for duty. Staff told us if there were gaps then the manager would obtain other staff from an agency, but sometimes other permanent staff volunteered to work an extra shift or change shifts. They said they felt the skill mix of staff was right and they would also support each other in different departments. We saw that the sickness and absence policy had been reviewed in May 2017. This gave clear guidance to staff on how to report to the manager if they intended to be absent. This was robustly being implemented and action being taken with staff if the registered persons felt they needed a second medical opinion on a staff member's sickness record.

We saw the calculations of how the present staffing rota had been worked out. This took into consideration the dependency levels of each person and their complex needs. A new system had been put into place for the auditing of care plans to ensure they were up to date and the dependency level correct for each person. The project manager had also completed an audit on the use of agency staff alongside sickness level

records to see at what times agency staff had been used. This then gave them a clearer understanding of the need to employ extra staff to cover any staff vacancies, absences and training needs. We saw that the registered persons were waiting for clearance from the Disclosure and Barring service (DBS) to commence employment of some staff. There was also an active recruitment advertisement in the local press.

To ensure the skill mix of staff was correct the project manager had undertaken a review of all registered nurses competency levels and identified further training where necessary. They had also ensured that all registered nurses were on the 'live' Nursing and Midwifery Council (NMC) register, which showed they were fit to practice. A further review of the training of all other staff had also been undertaken. The training statistics gave us details of how many staff were employed and the numbers who had attended different courses. Any gaps in training were being addressed with individual staff members at their supervision.

During the inspection we saw that staff responded to people's needs quickly. They were pleasant to people and asked them how they could help. Staff calmly went about their work and there was a lot of laughter within the home.

The registered persons now had systems in place to ensure people were safe and all their needs were being met. They did this by regular reviews of people's dependency levels, the skill mix review and calculations of staff requirements.

The legal requirement was now being met for Regulation 18. 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 track record of consistent good practice.