

Heathfield (Horsham) Limited

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Inspection report

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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

Heathfield (Horsham) Limited is a residential care home providing personal care and accommodation for up to 36 older people. At the time of the inspection 35 people were living at the service. Heathfield (Horsham) Limited accommodates people in 1 adapted building.

People had a range of care and support needs including diabetes, epilepsy and some people were living with dementia and the frailties of old age. Any nursing needs were provided by community nursing services.

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

Risks to people's safety had been assessed, and actions taken to mitigate them. People's care plans detailed health needs and reflected the personalised care which was being delivered. One person told us, "They are keen for me to call staff if I need to go downstairs, so they can help because I can fall."

People and their relatives were happy with the care they received and felt safe with the staff that were supporting them. Staff knew how to identify potential harm and report concerns. People received their medicines safely from staff trained to administer them. Checks were carried out prior to staff starting work to ensure their suitability to work with people who used the service.

The culture of the service was positive, and people, relatives and staff were complimentary of the management and provider. Comments included, "Staff are caring and know what they are talking about." And, "Managers are approachable and there is good supervision and training. Big changes much better now." Improvements had been made to systems and processes that monitored the quality of the service being delivered and accuracy of records. Staff knew people well and provided support in line with people's preferences. People's diverse needs were catered for and they were treated with dignity and respect. People and relatives described the staff as caring and thoughtful and said they were treated with care and kindness. Feedback about the service from people and those close to them was positive.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 9 June 2021) and there were breaches of regulation. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced focused inspection of this service on 13 May 2021. Breaches of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

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 comprehensive inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Heathfield (Horsham) 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.

Heathfield (Horsham) 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.

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 1 inspector

Service and service type

Heathfield (Horsham) is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Heathfield (Horsham) is a care home without 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 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 6 people who used the service and 2 relatives about their experience of the care provided. We spoke with 6 members of staff including the registered manager, general manager, assistant manager, senior care workers, care workers and 2 visiting health professionals.

We reviewed a range of records. This included 4 people's care records and multiple medication records. We looked at 2 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; using medicines safely; learning lessons when things go wrong

At the last inspection in May 2021, the provider had failed to robustly assess the risks relating to the health, safety and welfare of people, doing all that is reasonably practicable to mitigate any such risks and the proper safe management of medicines. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection enough improvement had been made and the provider was no longer in breach of regulation 12.

- People's medicines were safely managed. Staff were storing, recording and administering medicines accurately. Medicines were given by staff who had been given training and supervision to help make sure they did this safely.
- When required medicine (PRN) had written protocols in place to guide staff when to offer medicine for intermittent issues such as pain relief. Staff spoken with, confirmed they were using the guidance to inform practice.
- We observed people being supported to know what medicine's they were being offered and individual needs were met. For example, 1 person needed to have a thickened drink to help swallow medicine. Staff carried out these tasks with care and attention.
- Medicine stock control systems were operating effectively to allow staff to know how much medicine was being kept in the service and avoid having too much or too little stock of medicines being stored.
- Risk assessments for people had improved since the last inspection and had been personalised. They contained detail relating to specific health care needs. For example, one person's risk assessment had type 2 diabetes recorded as a risk and identified what the risks of this condition were and what actions staff needed to take to mitigate the risks.
- People had assessments of their needs carried out prior to admission and these formed the basis of their ongoing care plans. Where needed, people had falls plans and mobility plans developed from the initial assessments or changes in their needs that happened during their stay at the service.
- Staff undertook regular safety checks of equipment and the premises to ensure these were safe. People had personal evacuation plans which guided staff to support them safely in case of emergency.
- Lessons were learnt when things went wrong, for example, when a person had a fall, the causes were investigated and action taken to reduce the risk with the use of aids and equipment such as falls sensor mats.

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. One staff member said, "We don't take choice away from people, even if they can't always make complex choices, they can choose what they want to wear or eat."

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to safeguard people from abuse. People and their relatives told us they felt safe and could speak to the registered manager if they had any concerns. One person told us, "I would talk to the people in the office if I needed to, but I do feel safe." Another said, "I very much feel safe here, the staff are attentive, they are kind, I have no complaints."
- Staff received training and demonstrated their knowledge of the safeguarding policy to prevent the risk of abuse to people. Staff understood their role in the prevention and reporting of potential abuse and told us they would speak to the registered manager if they had any concerns.
- The registered manager and staff understood their obligation to report any safeguarding concerns to the local authority and to CQC.

Staffing and recruitment

- There were enough staff on duty. A review of staff rotas showed that staffing hours were consistent and provided a mix of staff skills. One relative told us, "There are enough staff, my relative has regular staff who know him."
- People were protected by safe recruitment processes. The provider carried out checks such as Disclosure and Barring Service (DBS) status. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The service obtained suitable references, previous training and experience, up to date information about staff's eligibility to work in the UK and a full work history.
- People received care and support in a timely way. We observed staff taking the time to sit and talk to people. People told us they liked the staff and we observed friendly, respectful and light-hearted conversations between people and staff.
- People, relatives and visiting health professionals told us that staffing was consistent and staff knew people well. One person said, "The place is well stocked with staff, they come quickly if I call."

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

- The provider was facilitating visits to people living at the home in accordance with current infection prevention and control guidance. We observed a number of relatives visiting during the inspection.

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 requires improvement. At this inspection the rating 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

At the last inspection in May 2021, the provider failed to have effective systems in place to check the quality and safety of the service. Accurate, complete and contemporaneous records were not always maintained regarding people's care and the provider had failed to act on feedback from the recommendation in the last report to improve the service. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection enough improvement had been made and the provider was no longer in breach of regulation 17.

- Staff demonstrated a detailed understanding of people's needs and risks were well managed. Risk assessments identified risks and gave guidance to staff about how to mitigate these.
- People and their relatives told us that care and support were person-centred. We observed this in practice. Care plans recorded people's health needs clearly. Health was monitored and actions taken when needed. One health professional told us, "(Name of registered manager) refers appropriately, staff communicate well and ask all the right questions, they follow guidance."
- A range of audits had been completed which included checks on moving and handling equipment, health and safety, incident and accident reports and medicines. The registered manager showed us how they were working to further improving these to aid the analysing of trends. This ensured good governance of the service and continued service improvement.
- Audits of medicine and care plans had improved and demonstrated errors or omissions were picked up. For example, incorrect daily medicine stock records were found, traced back to individual staff who had miscalculated. Support was given to the staff and a calculator placed with the medicine records to help in the future.
- The registered manager understood their responsibility to notify us of significant events, as they are required to by law. The registered manager understood their responsibility to notify the local safeguarding authority of concerns. Records showed this had happened appropriately and in line with safeguarding guidance.

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 understood their responsibility to be open in the event of anything going wrong. They reviewed any feedback and incidents, so any learning would be taken from them and the service would

continue to develop. Outcomes were shared with people and staff to ensure lessons were learnt. For example, changes were made to staff deployment following concerns about availability of housekeeping staff.

- Staff told us communication was good and they were kept up to date. Staff felt able to speak to any of the management team, they knew how to whistle-blow and felt confident they would be listened to. We observed a pleasant and friendly atmosphere among people, the staff and managers. One person told us, "I can talk to anyone in the office, whenever I need to."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The culture of the service focused on providing person-centred care and support. Staff knew information about people and their preferences about how they liked to be supported. One person said, "They (staff) know how I like things done."

- Relatives told us they were kept up to date and involved in their loved one's care. One relative said " (Name of registered manager) is always happy to talk with us, always welcoming and never dismissive, always helpful."

- We observed people being offered choices such as food and drink and what activities they wanted to participate in. One staff told us, "We always offer choice, people need to be able to have control in their lives."

- There were positive relationships between people and staff; interactions were warm, friendly and respectful. Relatives told us staff treated their loved ones with kindness, compassion and knew them well.

- People felt able to raise concerns. The service had a complaints procedure, and relatives said that they knew how to complain and who to complain to. One person said, "I have no concerns, but would go to the managers if I did."

- People were asked their views regularly. A recent survey had resulted in a "You told us – We did." report which was displayed for all to see. One of the points was about laundry and ironing. The service subsequently employed a person specifically for laundry and ironing.

- One health professional told us, "My experience of Heathfield has been very good. Working alongside them it is apparent they are very knowledgeable and keen to promote best practice for their residents. When I visited Heathfield on the many occasions I was there, it was apparent they were proactive with their approaches for person-centred care and show nothing but respect and dignity for their residents."

Working in partnership with others

- The service worked in partnership with other agencies. These included healthcare services. There was evidence of healthcare professionals visiting the service in addition to undertaking telephone consultations.

- Visiting health professional's fed back that the service worked well with them. One said, "I felt I was able to work collaboratively with the care home and they would listen, ask appropriate questions and implement changes recommended by myself." Another told us, "They are brilliant, always have staff ready to help me with notes, (registered manager name) is very caring and knows our patients very well."

- Records showed that staff had contacted a range of health care professionals. This enabled people's health needs to be assessed so they received the appropriate support to meet their continued needs.

