

Malhotra Care Homes Limited

Abbey Court

Inspection report

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Tel: 01912851720

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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

Abbey court is a residential care home with nursing providing personal care for up to 44 people. The service provides support to older people living with dementia. At the time of our inspection there were 43 people using the service.

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

Risks to people were regularly assessed and appropriate measures were in place to minimise risk. People's medicines were managed safely, and staff followed correct infection control procedures. Health and safety checks were regularly conducted. Accidents and incidents were recorded, and actions were taken to mitigate the risk of reoccurrence.

Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and knew how to do this. The service had enough safely recruited staff who were appropriately skilled and knew people's needs to help keep them safe.

People and their relatives spoke positively about the care and support they received. One relative said, "We trust the staff, they're canny, they're on the ball."

The registered manager was clear about their role and responsibilities. The registered manager was well respected by staff. Staff felt well informed and supported to undertake their roles. There were effective systems in place to monitor the quality and standard of the service. The service worked in partnership with others including health professionals and the local community.

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.

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 January 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 is good. This is based on the findings of 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Abbey Court 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.

Abbey Court

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 1 inspector, 1 specialist nurse advisor 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.

Service and service type

Abbey Court 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. Abbey Court 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.

Inspection activity started on 21 August 2023 and ended on 30 August 2023. We visited the service on 22 August 2023.

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 worked 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 4 people who used the service and 5 relatives about their experience of the care provided. We spoke with 11 members of staff including the operations manager, compliance manager, deputy manager, 1 nursing assistant, 3 seniors care assistants 3 care assistants and 1 laundry assistant. We gained feedback from external professionals.

We reviewed a range of records. This included 6 people's care and medication records. We looked at 3 staff files in relation to recruitment and a variety of records relating to the management of the service. 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

- Systems were in place to protect people from the risk of abuse. The provider had procedures in place and staff knew and understood who to contact if they had concerns about people being abused.
- Staff had received training on recognising and reporting abuse. Staff were able to tell us what they would do in the event of concerns relating to abuse.
- People told us they felt safe and were well cared for. We observed people in the home and interactions with staff. People were relaxed, engaging with staff, and going about their day. One person said, "I am ok, I am safe and well cared for, therefore I am happy."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health, safety and welfare were assessed and managed. Assessments included risks within people's environment, relating to equipment they used, their healthcare needs, communication, nutrition, skin integrity and moving them safely. There was information about what the risks were and how to manage these to enable people to be safely cared for. Risk assessments and management plans were regularly reviewed.
- Health and safety certifications were up to date including water checks, electrical, gas and fire safety procedures. Regular audits were in place to ensure the environment was safe for people.
- Accident and incidents were managed safely. The registered manager had oversight of accidents and incidents through a tracker and used this information to drive service improvements. Analysis of incidents was used to assess whether preventive measures could be introduced, and lessons learnt to keep people safe. These learnings were shared with staff at team meetings.

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.

Staffing and recruitment

- Staff were recruited safely. A range of pre-employment checks were carried out to ensure only suitable staff were employed. These included DBS checks (Disclosure and Barring services), obtaining references and checking employment histories.
- There were enough suitably trained staff to meet people's needs and care for them well. Staff knew people well and could provide a consistent person-centred approach. People and their relatives told us they felt there were enough staff to look after them. One relative said, "There are enough staff, we always see them, they're lovely." One person said, "There are so many staff I don't always remember their names."
- Nurses were registered with the Nursing and Midwifery Council.

Using medicines safely

- Medicines were managed safely. Staff supported people to take their medicines in a person-centred way. Medicines were stored at the service securely and records were completed accurately. We counted a random sample of medicines and found that they tallied with records held.
- Protocols for PRN medicines (as required medicines) were robust. Protocols were in place and had information of how to assess when a medicine should be given.
- Checks of room temperatures and fridges were completed. Controlled Drugs were stored correctly and securely, records in relation to Controlled Drugs were completed in line with requirements.
- Staff had received training and their competence in administering medicines was assessed periodically.

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 in line with government guidance and health professionals' advice. Visitors were not restricted in any way and safety was promoted while on site.

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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- The culture was person-centred. Systems were in place to obtain and respond to the feedback from people, relatives and staff. One relative told us, "I've had surveys sent, but I have nothing to say. We've also been invited to meetings."
- Relatives spoke positively about the care their loved one's received. One relative said, "The staff are just lovely, they sit and talk to them and joke with them. They really care. The atmosphere is lovely. They're supportive to me too."
- The registered manager created an environment which was open and inclusive. Staff felt well supported and said they could always talk with the registered manager if they had any worries or concerns. One staff member said, "[Registered manager] is excellent and very supportive."
- Governance processes were effective. These processes helped to keep people safe, protect people's rights and provide good quality care. For example, the management team undertook a range of regular audits across the service looking at things like medications, infection control and care plans.
- Policy and procedure documentation was up to date and relevant to guide staff on how to carry out their roles.

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 understood their responsibility in relation to the duty of candour. They had responded appropriately, being open and transparent when things went wrong. There were systems in place should they need to report certain incidents.

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

- A system was in place to involve staff in the service. Staff meetings were held monthly and daily flash meetings were held. Staff were given updates about people who used the service as well as reminders about training.
- Relatives commented on the communication between themselves and the home, which had given them reassurances. One relative said, "They keep me informed, they're always ringing me up. I would recommend this service."
- Staff had a good understanding of equality, diversity and human rights and explained how they would

make sure nobody at the service suffered from any kind of discrimination. This was reinforced through training.

- Information relating to the running of the home was openly discussed and shared amongst management and staff. This information provided accountability and oversight of what was happening in the home, and staff at every level contributed towards future development plans of the service.

Working in partnership with others

- The service worked well in partnership with other health and social care organisations, which helped people using the service improve their wellbeing.

- The service worked with many organisations. The local church visited the home monthly. The provider also worked with a charity called 'Wags Charity'. They bring dogs into the home for a couple of hours a week to provide people, with something to look forward to, some company, a chat and a cuddle with that much missed furry friend. Relatives spoke positively about this. One relative said, "They're always putting stuff on for the residents, they have singers come in and pets come in to visit, which is lovely."