

Edgehill Care Home Limited

# Edgehill Care Home

## 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

Edgehill Care Home is a residential care home providing personal care to 36 people aged 65 and over at the time of the inspection.

Edgehill Care Home can accommodate up to 60 people in one building which is on one floor. The service supports people living with dementia.

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

Improvements had been made to the service to ensure people received safe care. Medicines were managed safely. Risks to people were assessed and staff supported people to ensure risks were managed. There were enough staff and people received support in a timely manner from staff who were not rushed.

There were effective Infection prevention and control systems in place. The home was clean, and staff wore personal protective equipment in line with current guidance.

Effective systems for monitoring and improving the service were in place and ensured the provider and registered manager had an overview of the quality of the service. We received extremely positive feedback about the registered manager and the improvements they had made. The registered manager promoted a positive, caring culture that ensured people were at the heart of all the service did.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 20 November 2020) and there were multiple breaches of regulation. The provider sent monthly reports after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

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 coronavirus and other infection outbreaks effectively.

We carried out an announced focused inspection of this service on 12 August 2020. Breaches of legal requirements were found. The provider was required to send monthly reports to CQC showing the improvements made.

We undertook this focused inspection 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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Edgehill Care on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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.

# Edgehill 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 three inspectors and an Expert by Experience (EXE)

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

Edgehill Care Home 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.

The service had a manager registered with the Care Quality Commission. 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.

#### Notice of inspection

We gave the service short notice of the inspection to check the COVID-19 status of the service.

#### What we did before 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 spoke with seven relatives about their experience of the care provided. We reviewed a range of documents relating to the management of the

service and looked at five people's care records. We spoke with the registered manager, the operations director and the quality lead. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service about their experience of the care provided. We spoke with seven members of staff including the registered manager, the area operations manager and members of the care team.

We looked at two staff files in relation to recruitment. We looked at a range of care records including medicines records and three people's care records.

After the inspection

We spoke with the quality manager and looked a range of quality assurance records.

# 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 this key question was rated as requires improvement. At this inspection this key question improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people and failed to manage medicines safely. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People's care plans detailed information relating to diagnosed health conditions, which included epilepsy, diabetes and Parkinson's disease. Where risks were associated to these conditions, care plans detailed how people were supported to manage risks.
- Medicines were managed safely. Systems ensured people received their medicines as prescribed.

At our last inspection the provider had failed to ensure there were systems in place to ensure risks to people were effectively managed. This placed people at risk of harm. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Care plans were regularly reviewed to ensure they were accurate and up to date. Care plans contained information relating to the management of risks. This included risks associated with pressure damage, falls and choking.
- Systems had improved to ensure risk to people were managed. This included risks associated with medicines management.

Staffing and recruitment

- People told us there were enough staff. One person said, "They have enough staff and they do their best. They are good, they are brilliant. I have a call bell, but I have never had to use it. Carers are always near."
- Staff were confident there were enough staff to ensure people's needs were met. One member of staff told us, "Things have improved, and we are much better now with staffing levels."
- The provider had effective recruitment processes in place to ensure staff were suitable to work with people living in the service. This included recruitment checks prior to staff commencing work.

#### Systems and processes to safeguard people from the risk of abuse

- People and relatives felt people were safe. One relative told us, "Yes, I feel [person] is safe. The staff are super. The staff are respectful to [person] and they treat them with dignity.
- Staff had completed safeguarding training and had a clear understanding of their responsibilities to identify and report any concerns relating to harm or abuse."

#### Learning lessons when things go wrong

- There were effective systems in place to monitor accidents and incidents. This enabled the provider to identify trends and patterns.
- Where actions were identified following an incident, these were shared with staff to provide learning.

#### 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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.



# 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 this key question was rated as requires improvement. At this inspection this key question improved 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 our last inspection, the provider had failed to ensure there were effective systems in place to assess, monitor and 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 sufficient improvement had been made and the provider was no longer in breach of Regulation 17.

- There were effective systems in place to enable the quality of the service to be monitored and improved. This included improved auditing systems that enabled the registered manager and provider to have oversight of the quality of the service.
- Auditing systems identified any issues and areas for improvement. Audits included action plans which ensured issues were addressed and promoted continuous improvement.

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

- The registered manager promoted a person-centred culture that ensured people were at the centre of all the service did. One person told us, "[Registered manager] is the best. It is impossible to find anyone better than her. She is always there and if you want to talk and to get something of your chest, she is there for you."
- Relatives were positive about the open culture in the home. One relative said "The manager is lovely, and I feel I can go to them to ask anything. All the staff are nice. I feel we have a great relationship with the staff who are open and honest."

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 were aware of their responsibilities in relation to duty of candour.
- Relatives were contacted appropriately following any accidents or incidents and felt they were kept fully informed about their loved ones.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There were regular meetings that enabled people to give feedback about the service. Records of meetings showed people were consulted about changes and how the service was run.
- Staff felt valued and were well supported. One member of staff told us, "Since [registered manager] took over I feel much more supported. We also have a strong deputy who knows the home well and who is more than able to run the service in [registered manager's] absence."

#### Working in partnership with others

- The service had worked closely with health professionals and commissioners during the recent COVID-19 outbreak to ensure risks were being managed.