

Netherwood Care Home Ltd

Netherwood Residential Care Home

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Netherwood Residential Care Home provided personal care to a maximum number of 39 older people and people living with a dementia in one adapted building. At the time of the inspection 27 people were using the service.

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

Medicines were managed safely. Risks to people were assessed and managed. People were supported by stable staffing teams who had been safely recruited.

Staff were supported with regular training, supervision and appraisal. 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.

People and relatives said staff were caring. We saw people being treated with dignity and respect. People were supported to access advocacy services where needed.

People received person-centred care. The provider had an effective complaints procedure. People were supported to access activities they enjoyed.

The registered manager and provider carried out checks to monitor and improve the service. Feedback was sought and acted on. The service worked effectively in partnership with other organisations for the benefit of people living there.

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 18 October 2016).

Why we inspected

This was a planned inspection based on the previous rating.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Netherwood Residential 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.

Inspection team

One inspector and one Expert by Experience carried out this inspection. 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

Netherwood Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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

This inspection was unannounced.

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 work with the service. 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

We spoke with five people and two relatives. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with four external professionals. We also spoke with 11 members of staff. This included the registered manager, deputy manager, nominated individual, senior care workers, care workers, the chef and domestic and maintenance staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people were assessed and action taken to address them.
- The premises and equipment were monitored to ensure they were safe to use. Window restrictor checks were carried out but not recorded. The registered manager said this would be done immediately.
- Effective systems were in place to manage emergency situations. These included checks of firefighting equipment and regular fire drills.
- People and relatives said the service kept people safe. One person told us, "I love it here. I feel totally safe."

Using medicines safely

- Medicines were managed safely. Medicine records were completed without unexplained gaps or errors.
- Medicines were safely and securely stored.
- Staff received training in medicines management and had regular competency checks.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse and staff were knowledgeable about safeguarding issues.

Learning lessons when things go wrong

- Systems were in place to learn from accidents and incidents to help ensure people were safe. These included a monthly review to identify and address any patterns that might be emerging.

Preventing and controlling infection

- Staff received infection control training and had access to ample supplies of gloves and aprons.
- The premises were clean and tidy and staff understood principles of infection control.

Staffing and recruitment

- Staffing levels were monitored to ensure people received safe support.
- Staff told us the service had enough staff and that they had time to provide safe support. One member of staff told us, "I think we have enough staff. It's all manageable."
- The provider's recruitment process reduced the risk of unsuitable staff being employed.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- A detailed assessment of people's care needs and preferences was carried out before they moved into the service to ensure the right support was available.
- Staff worked collaboratively with people, relatives and external professionals to ensure people's needs and choices were heard.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked effectively with external professionals to ensure people received the healthcare support they needed. One external professional told us, "(Staff) always give us a call if they have any concerns at all. Always take our advice."
- Care records contained evidence of regular appointments and check-ups with a wide range of external professionals.

Staff support: induction, training, skills and experience

- Staff received a wide range of training. This was regularly refreshed to ensure it reflected latest guidance and best practice.
- Newly recruited staff had to complete induction training. This included learning the provider's policies and procedures and observing experienced staff at work.
- Staff spoke positively about their training and said it equipped them with the knowledge and skills they needed. One member of staff told us, "It's very informative".
- Regular supervisions, an annual appraisal and competency checks took place to support staff in their roles.

Supporting people to eat and drink enough to maintain a balanced diet

- People's nutritional health was assessed and supported to ensure they were eating and drinking enough. This included ensuring any specialist dietary needs were met.
- There was a wide range of food available at the service and menus were based on what people said they liked to eat. People were encouraged to drink lots, especially in hot weather.
- People spoke positively about food provided. One person said, "The food is good and there is always something I like."

Adapting service, design, decoration to meet people's needs

- The building was designed and decorated for the safety, comfort and convenience of people living there.

- Appropriate decoration and signage was in place to help people move around the building. Bedrooms had been personalised to people's own tastes.
- Major building works were taking place to modernise and enlarge communal lounges and an enclosed garden, to create more spaces for people to enjoy.

Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff were knowledgeable about the principles of the MCA, and we saw them supporting people living with a dementia to make as many decisions as possible for themselves.
- DoLS had been appropriately applied for, and care plans contained evidence of MCA assessments and best interests decisions where needed.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well treated and supported and told us staff were caring and kind. Comments included, "I think they (staff) are lovely and very caring towards me" and, "The staff are lovely and very caring and understanding."
- Relatives said people were well treated and cared for. One relative told us, "The staff are excellent. They are compassionate, caring, knowledgeable and diligent."
- External professionals praised the care delivered by staff. One external professional said, "It is probably the best home I visit. It has a lovely welcoming atmosphere and staff are very confident and relaxed."
- People were valued as individuals and staff supported them to live the lives they wanted. This included supporting people to practise their faith and maintain relationships of importance to them.

Respecting and promoting people's privacy, dignity and independence

- People told us they were treated with dignity and respect. One person said, "They are conscious of my privacy and will always ask before doing anything."
- Staff had close and friendly but professional relationships with people. This included knocking on people's doors before entering their rooms and asking for permission before helping them.
- People were supported to maintain their independence and do as much as possible for themselves.

Supporting people to express their views and be involved in making decisions about their care

- Feedback was sought from people, relatives and visiting external professionals. This was done informally through regular discussion, questionnaires left in the reception area and in an annual survey.
- The last annual survey was completed in 2018 and contained positive feedback. The provider was carrying out the latest survey at the time of our inspection.
- Policies and procedures were in place to support people to access advocacy services. Advocates help to ensure that people's views and preferences are heard.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received personalised support based on their assessed preferences and needs.
- People told us they received the support they wanted. One person said, "I have everything I need here." A relative told us, "All aspects of the care here are very good and we are very happy with the care package."
- People and relatives were involved in creating and reviewing care plans, which ensured people's voices were heard.
- Staff were knowledgeable about the care people received. Effective systems were in place to update staff on changes to people's needs and preferences.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff communicated with people effectively to help ensure their voices were heard.
- Systems were in place to provide people with information in the most accessible format for them, including large print easy read documentation.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People took part in activities they enjoyed. Comments included, "I like to take part in most of the sing songs and things" and, "They try and keep us busy and happy."
- During the inspection we saw people enjoying a piano singalong and jigsaws. Planned future activities included trips to local amenities and attractions.

Improving care quality in response to complaints or concerns

- Systems were in place to effectively investigate and respond to complaints. This included meetings with those raising issues and discussing lessons learned.
- People and relatives said they knew how to raise issues and were confident these would be acted on.

End of life care and support

- At the time of our visit nobody was receiving end of life care but policies and procedures were in place to provide this where needed.
- Care plans were in place which documented people's wishes for their end of life care, including any

spiritual needs they had.

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 good. At this inspection this key question has remained the same. 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; 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

- Staff spoke positively about the culture and values of the service, and the leadership of the registered manager and deputy manager. One member of staff said, "It's very friendly, quite a lovely atmosphere. I'd put a family member in here."
- People and relatives said they were happy with the support provided. One relative told us, "The staff have a very good understanding of (named person's) abilities and support (them) as needed."
- The registered manager and nominated individual were a visible presence at the service and knew the people living there well.
- People and relatives said there was open and transparent communication from the service. A relative told us, "The office door is always open and they are very willing for us to call in at any time if we have concerns."

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

- The registered manager and provider carried out a range of quality assurance audits to monitor and improve standards at the service.
- The registered manager had submitted required notifications of accidents and significant events in a timely manner.

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

- Feedback was regularly sought from people and relatives and was acted on. One relative told us, "They treat us as a whole family and have respect for us by making us feel very welcome and involved."
- Staff told us they were regularly asked for their feedback and views on the service, which they felt was valued.
- Staff had received a number of written compliments and thank you cards on the quality of care they provided.

Continuous learning and improving care; Working in partnership with others

- External professionals told us the service worked effectively in partnership with them. Comments included, "The standard of practice I see here is outstanding" and, "As soon as we want something it's there."
- The service had a number of links with community organisations and agencies for the benefit of people

living there.