

Acceptus Healthcare Limited

Yaxley House

Inspection report

Church Lane
Yaxley
Eye
Suffolk
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Tel: 01379783230

Date of inspection visit:
10 February 2020

Date of publication:
05 March 2020

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

Yaxley House is a residential care home providing personal care for up to 34 older people, some of whom may be living with dementia. At the time of our inspection 30 people were living at Yaxley House.

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

Risks to people had been assessed before they moved to Yaxley House and staff understood how to keep people safe. There were enough staff available to meet people's needs, and robust recruitment procedures were followed. Medicines were managed safely by staff who had received appropriate training. The service was clean throughout and well maintained. The registered manager held meetings with their managers and senior staff to review how the service could improve and develop.

Staff had been provided with training and developed skills which linked to the needs of the people they cared for. People enjoyed their mealtime experiences, which reflected their choices, and people were provided the assistance they required so they would have enough to eat and drink. People were taken to or were visited by health and social care professionals promptly when needed. 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 informed us the staff cared for them and treated them with dignity and respect. Each person had a care plan which was reviewed at regularly intervals or sooner should the need arise. People benefitted from working with designated activity staff which arranged games and events in line with peoples choices. The service had a complaints policy and also a grumbles book which was reviewed frequently by the registered manager and resulting action taken to resolve any issues. The service staff worked closely with other professionals following agreed care plans that people had made regarding their end of life care.

People and their relatives told us the service was managed well and the staff team provided good care. The registered manager and senior team carried out quality checks to ensure that care was being carried out safely.

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 21 July 2017).

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 ●

Yaxley House

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

The inspection was carried out by two inspectors.

Service and service type

Yaxley House 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

This inspection was unannounced.

What we did before the inspection

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 contacted the Local Authority and Healthwatch for information they held about the service to help us plan our inspection. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and four relatives about their experience of the service

provided. We spoke with two regional managers present at the service on the day and the registered manager, a member of the catering staff, activities staff and three care staff. 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 reviewed a range of records. This included four people's care records and multiple medication records. We saw records relating to the management of the service. These included minutes of meetings with staff and checks undertaken by the registered manager, senior staff and provider on the safety and quality of care, such as audits and surveys. We also saw systems used to manage complaints. In addition, we reviewed the compliments which had been received by staff and records of interesting things people liked to do.

After the inspection

We analysed the information we had received about the service.

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.

Systems and processes to safeguard people from the risk of abuse

- People told us they continued to be kept safe by the staff who cared for them. One person told us, "I feel very safe here, I know the staff well and they look after me."
- Staff demonstrated a good understanding of different types of abuse and what approach they would take in the event of any concerns. One member of staff told us about safeguarding training and how the different types of abuse were covered.
- The service had a policy and procedure for safeguarding and the registered manager knew the actions required to protect people from abuse, should this occur.

Assessing risk, safety monitoring and management

- Each person had an individual risk assessment in place from which their individual care plans were written.
- Staff gave us examples of actions they took to promote people's safety. This included ensuring people had the equipment they needed to remain as safe as possible and monitoring people's health.
- People told us they felt safe with the staff when supporting them to get up or move from a wheelchair to a lounge chair. One person told us, "They tell me what they are doing when they move me and are very gentle."

Staffing and recruitment

- People told us there were sufficient staff on duty to care for them. One person told us, "Always enough staff here." This view was supported by the relatives we spoke with.
- The registered manager explained they recognised some people's needs could fluctuate from day to day. Staff gave us examples of when staffing had been increased, in response to people's changing needs.
- The service continued to have a robust system to check the suitability of staff before they commenced employment.

Using medicines safely

- People told us they relied upon the staff to administer their prescribed medicines when they needed them. One person told us, "They always bring me my medicines they never forget."
- The service was following safe protocols for the receipt, administration and disposal of medicines.
- Medicines were audited regularly to check people received their medicines as prescribed.

Preventing and controlling infection

- Staff had been supported through training to know the importance of maintaining good standards of

cleanliness throughout the service.

- Staff had access to the range of equipment they needed to promote good hygiene within the home, such as gloves, and to reduce the likelihood of the spread of infections. Staff confirmed with they had enough equipment.

Learning lessons when things go wrong

- Systems were in place to learn any lessons from incidents and accidents, such as people experiencing falls. The registered manager reviewed these to see if any patterns were emerging and if there any preventative measures that could be put into place.

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

- People's needs were assessed before they moved into the service to ensure the staff could support them to meet those individual needs.
- People's assessments considered their physical needs and choices and care plans were based on best practice guidelines for staff to follow, for example, in relation to oral care.
- Staff supported people flexibly to meet people's needs. One person told us, "The staff ask me when I want to get to up each day." Relatives also confirmed with us the staff were flexible and supportive to the needs of people.

Staff support: induction, training, skills and experience

- Staff received regular appraisals, supervisions and planned training. A member of staff told us, "Training is discussed at every supervision to check it is up to date and is there anything further we would like to do."
- People and their relatives told us staff knew how to provide care. A relative informed that the care that was provided to [their relative] showed the staff were knowledgeable and well trained.
- New staff were supported to understand how to care for people through an induction programme.

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

- People enjoyed the wide range of meals available, which reflected their choice. One person told us, "The meals are nice and always enough."
- People were encouraged to drink between meals and we saw that hot and cold drinks were available.
- Staff weighed people monthly or more frequently should they have concerns about their weight and made referrals to other professionals as required.

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

- People living at the service informed us, and their relatives confirmed, that the staff would arrange healthcare appointments as necessary.
- People were supported to attend health care appointments outside of the service, such as GP and hospital appointments.
- Professionals visited people at the service such as dieticians and members of the Speech and Language Therapy (SALT) team in response to staff referrals.

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

- People's rooms had been individualised in accordance with their preferences and were highly personalised.
- The service was well maintained and adaptations to the service had been carried out in keeping with the overall environment. There was a specific garden area available which had focused on the needs of people living with dementia.

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 had received training and understood how the MCA process worked to support people with their needs.
- We found the MCA and associated DoLS were applied in the least restrictive way and authorisation correctly obtained.

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 had developed meaningful and caring relationships with staff who they described as considerate and understanding.
- We observed a positive rapport between the people living at the service and the staff. One person told us, "I like the staff you can have a laugh and a joke with them."
- Staff responded promptly to people's needs and provided reassurance as necessary for example when supporting a person with their meal.

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

- People were directly involved in the planning of their care and support. Their views were detailed in their care plans regarding their preferences and choices.
- People informed us that they were offered choices and staff listened to them. One person told us, "Questions all the day, when you want to get up, go to bed and what you want to eat or do in between."
- People informed us there were meetings they could attend to discuss their views with the registered manager.

Respecting and promoting people's privacy, dignity and independence

- The registered manager informed us that they were seeking to increase the hairdressing service available to the people at the service. We discussed how people would enjoy and benefit from this increased resource.
- People were treated with compassion by knowledgeable staff who respected people by addressing them with the name they wished to be called and helping them to wear the clothes they preferred.
- The staff promoted people's independence by discussing options with them and supporting the choices they made. One person told us, "I like it here because you are encouraged to do as much for yourself as you wish but the staff are here to help as well."

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's care plans reflected their care preferences, assessed risks, personal histories and reviews of the care plan. A relative told us, "The staff arrange a review of care with us every six months or so."
- People told us they were happy at the service, and they received personalised care which met their needs. One person told us, "The staff are always here for you and they frequently ask me how I am?"
- We saw people enjoying playing games of their choice with members of staff during the inspection.

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.

- People communication needs had been assessed and plans put in place to support people, so their needs would be met. For example, checking hearing aids.
- A range of information was available in alternative formats such as pictorial signage and large print to support people as necessary.
- People's communication needs were regularly reviewed and adapted as their needs changed.

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 were supported to enjoy a wide range of activities and told us they had made friends with other people living at Yaxley House.
- People using the service spoke with each other and the staff throughout the day at organised activity and meal times. Staff were mindful to visit people who liked to spend time on their own in their rooms to check on their well-being.
- People told us their family and friends were encouraged to visit at any time and the staff arranged for entertainers to visit the service.

Improving care quality in response to complaints or concerns

- People and relatives knew how to raise any concerns or complaints and were confident these would be listened to. One person told us, "I have never had to raise a complaint, but I am sure the manager would sort anything out."
- Systems were in place to manage to any complaints or concerns and to take learning from these. The registered manager had introduced a grumble's book to record and address minor issues of what people

reported but the person did not want to complain. The registered manager used this information to discuss with senior staff to see how the matter could be resolved and also recorded their response in the grumble book.

End of life care and support

- Staff used their knowledge of people's spiritual and care needs when providing end of life care. The registered manager encouraged people especially at reviews to discuss this subject so that the information could be recorded and plans made.
- People's relatives had complimented staff for the quality of care provided to their family members at the end of their lives.
- Staff were supported through training to provide care to people at the end of their lives and were able to discuss situations in their supervision..

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

- People were complimentary about the way the service was led by the registered manager and support provided by the staff. One person told us, "The manager is very nice and knows what they are doing."
- Relatives told us the service was managed well, and senior staff made time to speak to them whenever they had a concern.
- Staff were supported to provide care through supervision and training. One staff member told us, "I like working here as you are supported by the manager they always have time for you."

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 responsibilities under the duty of candour and were open and honest throughout the inspection process.
- People living at the service and their relatives told us they were kept informed of situations that had occurred within the service and asked for their views. A relative informed us, "The manager or the senior on duty always rings me if there is something I need to know."

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

- The registered manager understood what information needed to be notified to CQC and their responsibilities to be open in the event of something going wrong with people's care.
- The area managers supported the registered manager through regular visits and discussions about people's care needs.
- The registered manager and senior staff checked the safety and cleanliness of the service through planned auditing.
- Staff knew how they were expected to care for people through regular one-to-one and group meetings with senior staff.

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

- People and their relatives told us they saw the registered manager and senior staff regularly and had opportunities to be involved in decisions about the way the service was run.
- We saw that the registered manager arranged and acted upon the information received from surveys,

residents' and relatives' meetings and one to one discussions with staff.

- Staff spoke positively about the support they received from the registered manager. A member of staff told us, "We have been asked about what we should do for each shift, for example when do we do the laundry."

Continuous learning and improving care

- The registered manager had established a process of service governance which included audits each month to learn how the service could be improved.
- The registered manager and staff gave us examples of work they did with other health and social care professionals and the local community. We identified that the service sought advice appropriately regarding the support people needed for their care, such as the falls team.
- Staff were encouraged to make suggestions for improving people's care at regular meetings and told us senior staff and the registered manager welcomed their views on improving the care provided to people.

Working in partnership with others

- The service worked with other key organisations to support people to meet their care needs. This included people who used the service, their families and representatives, GPs, community nursing teams and other health care professionals.
- The service worked with other professionals as necessary to support people at the service such as psychiatric and district nurses.