

Akari Care Limited

Wheatfield Court

Inspection report

Wheatfield Road
Westerhope
Newcastle upon Tyne
Tyne and Wear
NE5 5HQ

Tel: 01912145104

Date of inspection visit:
28 August 2020
01 September 2020
02 September 2020

Date of publication:
15 September 2020

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

Wheatfield Court accommodates up to 60 people with residential care and nursing needs in a purpose-built building. 37 people were using the service at the time of the inspection.

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

People were protected from risks. Appropriate arrangements were in place for the safe administration and recording of medicines. There were enough staff on duty to meet people's needs. Infection prevention and control procedures were in place to reduce the risk of infection and to keep people safe.

The provider and registered manager monitored the quality of the service to make sure they delivered a high standard of care. People and family members spoke positively about the registered manager and staff. Staff said they were comfortable raising any concerns and the registered manager was very approachable. People, family members and staff were able to feedback on the quality of the service.

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 13 August 2019). At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating. We carried out an announced comprehensive inspection of this service on 8 and 9 May 2019. A breach of legal requirements was found. We undertook this focused inspection to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of 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 Wheatfield Court on our website at 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.

Wheatfield 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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Wheatfield Court 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 announced. We gave the service 24 hours' notice of the inspection. This was to ensure we could visit the service safely.

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 also contacted Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two people who used the service and three family members about their experience of the care provided. We spoke with the registered manager, two care staff, the housekeeper and two healthcare professionals.

We reviewed a range of records. This included various care or medicines records and staff recruitment records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found.

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 has now 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, we found the premises were not always safe for people living at the home and medicines were not always safely managed. 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.

- The premises were well maintained, clean and suitable for people living at the home. Regular checks were carried out to ensure the environment was safe.
- Risks were well managed. Positive risk taking was discussed with people and staff to help enable people to maintain their independence.
- Appropriate arrangements were in place for the safe administration and recording of medicines. Medicine administration records were regularly audited.
- Records described the support people required with their medicines. Appropriate guidance was in place for the administration of 'as required' medicines.

Staffing and recruitment

At our last inspection, we found the provider and registered manager had failed to ensure staff were competent to fulfil their role. This was a breach of regulation 19 (Fit and proper persons employed) 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 19.

- The provider had an effective recruitment procedure in place. They carried out relevant security and identification checks when they employed new staff.
- Staff supervisions and competency checks were regularly carried out. These included agency staff.
- There were sufficient numbers of staff on duty to keep people safe. One person told us, "There's always plenty of staff, both daytime and night-time." Another person told us, "You just ring it [call bell] and someone comes and asks you what the problem is. They [staff] come quite quickly."

Learning lessons when things go wrong

- At the previous inspection, we found lessons learned were not always documented or shared with staff. At this inspection, we found the provider learned from accidents and incidents and shared with staff via supervisions and meetings.

Systems and processes to safeguard people from the risk of abuse

- People and family members told us they felt the service was safe. One person told us, "My family love me being in here because they know I am being well treated. They know I am happy here."
- People were protected from the risk of abuse. The registered manager understood safeguarding procedures and had followed them. Staff had been trained in safeguarding vulnerable adults.

Preventing and controlling infection

As part of CQC's response to the coronavirus pandemic we are conducting a review of infection prevention and control measures in care homes during our inspections.

- Appropriate infection prevention and control procedures were in place to reduce the risk of infection and to keep people safe.
- Staff had been trained in the use of personal protective equipment (PPE). PPE was readily available for staff and appropriate guidance was in place.

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 has now 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 failed to fully address issues previously identified and the systems in place did not allow for appropriate oversight of the service. 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.

- The provider and registered manager monitored the quality of the service to make sure they delivered a high standard of care.
- Regular audits were carried out. The registered manager maintained the home's development action plan to ensure any identified issues were documented and actioned.

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

At our last inspection, the provider had failed to make appropriate arrangements following a notifiable incident. This included providing staff with additional training and support. This was a breach of regulation 20 (Duty of candour) 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 20.

- The management team provided appropriate support to staff. Training was regularly carried out and supervisions were up to date. One staff member told us, "There have been a lot of changes, all for the better."
- The registered manager acted in an open and transparent way. They submitted notifications in a timely manner for significant events that had occurred, such as accidents and incidents.

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

- People and family members spoke positively about the quality of the service and of the registered manager. Comments included, "She [registered manager] is always flying around the building. She's good, she's always cheerful. She's always friendly and I see her laughing and joking with the staff" and "Since [registered manager] has been there it has been such a turnaround. Everything has improved. The team are great."
- Staff told us they were comfortable raising any concerns and the registered manager was very approachable. Comments included, "[Registered manager] will do anything to help you day or night. Everybody is happier, it's a better atmosphere" and "I can go to [registered manager] with anything and I know she will help. I love coming to work now."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, family members and staff were able to feedback on the quality of the service. This was via regular questionnaires and telephone calls. Feedback was analysed and actions put in place for any identified issues.
- Staff felt involved in the running of the service. They told us the provider kept them up to date with the latest updates and guidance.
- The registered manager and staff worked closely with other health and social care professionals to achieve positive outcomes. These included the local clinical commissioning group, GPs and Public Health England. A healthcare professional told us, "[Registered manager] is welcoming and very willing to listen and act upon any advice I give."