

Loven Spinney Limited

# The Spinney Nursing Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

The Spinney Nursing Home is a residential care home providing personal and nursing care for up to 35 people. The service provides support to older people and people living with dementia, younger adults and people with a physical disability. At the time of our inspection there were 32 people using the service.

The Spinney Nursing Home is set across three floors and has a good amount of communal areas, garden and parking available.

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

People were kept safe by staff that had good knowledge about people's needs and how to manage them. Staff understood their safeguarding responsibilities and people told us they felt safe living at the home. The manager made sure staff were recruited following safe processes and there were enough staff to keep people safe. We have made recommendations about the administration of some medicines and the management of infection and prevention control.

People benefitted from the fact that the home was run by a strong leadership team, meaning risks were assessed and mitigated. There was a positive culture at the home, we received positive feedback from people and their relatives. A relative said, "Everywhere is clean and tidy, the food is fine, and they offer alternatives if the menu options aren't suitable." Staff enjoyed their jobs and spoke highly of the manager.

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](http://www.cqc.org.uk)

Rating at last inspection

The last rating for the service was requires improvement, (published 4 June 2021).

Why we inspected

The inspection was prompted in part due to concerns received about staffing numbers, maintenance of the home, and seeking timely medical input. A decision was made for us to inspect and examine those risks. We reviewed 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.

Although we found some areas that needed to be improved, we did not find evidence that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

The overall rating for the service has remained requires improvement.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Spinney Nursing Home 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, 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.

# The Spinney Nursing 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 Health and Social Care Act 2008.

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

This inspection was conducted by one inspector 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.

The Spinney Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Spinney Nursing Home 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not a registered manager in post, however the application to register with the Care Quality Commission was in progress for the current manager.

#### Notice of inspection

This inspection was unannounced.

Inspection activity started on 9 September 2022 and ended on 12 September 2022.

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 (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 three people that used the service and four relatives. We spoke with eight members of staff including care staff, kitchen staff the manager and the nominated individual.

The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We looked at a range of records including four care plans and their associated risk assessment and medicine records. We looked at policies and procedures, incident reporting and audits.

We looked at three staff recruitment records, and health and safety records.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection we recommended the manager considered additional recording systems and prompt storage when managing powder to thicken drinks. The provider had made some improvements but changes to recording was still required.

- People were protected by the safe management of medicines.
- We checked medicine records and found these to be signed appropriately to show that people received their medicines as prescribed.
- The manager completed regular medicine audits and acted on anything that required improving.
- The manager made sure that staff received medicines training and checked staff competencies.
- We checked the storage of medicines and found this to be safe, medicines were in date and the date of opening topical items was recorded.
- Relatives told us they thought medicines management was safe. One person said, "The medicines are kept secure, I used to work in care, so I look for those sorts of things! None have ever been missed."
- Some people were prescribed thickener to be added to their drinks. Thickener is added to the drinks of some people to reduce their risk of choking. Care plans had thorough guidance and staff were given information to direct their practice. We checked staff knowledge and found they knew how much to administer. However, we found that not all staff recorded how much they had added to drinks, meaning we could not be sure that everyone always had the correct amount. The manager immediately addressed this by providing a team brief to remind staff to record, and daily checks to make sure staff completed.

We recommend the provider follow current guidance about the administration of thickener.

### Preventing and controlling infection

- People were protected from the spread of infection, however there were areas which would be difficult to clean properly.
- There was a regular cleaning schedule in place and the home looked clean and tidy. However, we found some items were broken or needed replacement, such as a broken tile in a communal toilet, and scuffed chairs in communal areas, meaning it would be difficult to maintain hygiene in these areas properly.

We recommend the provider consider current guidance about managing the spread of infection.

- At the time of the inspection there was an unconfirmed case of scabies, however the manager was following all guidance provided by the local infection prevention and control team and kept in regular

contact with professionals. People had been treated with cream and responded well.

- There were two full time cleaning staff and two laundry staff, and we observed thorough cleaning of rooms during the inspection.
- People and relatives told us they saw the home being cleaned regularly and observed staff wearing PPE.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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's infection prevention and control policy was up to date.
- We were assured that the provider supported visiting in line with current guidance.

### Assessing risk, safety monitoring and management

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)

At our last inspection we recommended the provider take advice from a reputable source, on ways to individualise all capacity assessments to accurately reflect individual situations. The provider had made improvements.

- 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.
- The manager provided training around the MCA and DoLS and this was up to date.
- We looked at care plans and found that people had the necessary MCA assessments in place, for example for their care and treatment, medication and bed rails.

### Staffing and recruitment

At our last inspection we recommended the manager considered ways to ensure rota records were always an accurate record of who was on duty and in what capacity on all the shifts being worked. The manager had made improvements.

- People were protected by safe recruitment and staffing practices.
- The manager completed reference checks and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staffing numbers were adequate to keep people safe. Feedback from people was mixed, some people said staff seemed busy and call bells took a while to be answered. A relative said, "Staffing is okay, there are more now than last year."
- The manager planned to commence call bell audits and on-going recruitment of care staff was in place.
- The provider recently recruited an activities coordinator to support people to take part in both one to one



and group activities.

- Training was up to date and staff told us they received thorough inductions and ongoing training.

Systems and processes to safeguard people from the risk of abuse

- People were protected by systems that safeguarded them from abuse.
- There was safeguarding guidance available for staff and staff knew what to do if they had concerns.
- The manager provided safeguarding training to staff and this was up to date.
- All relatives we spoke to said that people were well cared for.

Learning lessons when things go wrong

- The manager had effective systems to make sure that lessons were learned if anything went wrong.
- The manager was supported by the nominated individual to look at incidents, analyse what went wrong and make changes.
- Any changes to practice was communicated to staff through regular team briefs, and we saw minutes of these. For example, changes to practice following a fall.

# 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 requires improvement. At this inspection the rating has changed to 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

- People benefitted from a positive culture at the home.
- People told us the care was of a high standard and staff went above and beyond. One person said, "I can't speak highly enough of the staff."
- Staff enjoyed working at the home and one staff member told us, "I love working here, the managers are very supportive."
- Staff were committed to supporting people to achieve good outcomes. The nominated individual regularly monitored and reviewed people's outcomes, such as whether people had infections, or how many falls were sustained.

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 manager understood their responsibilities around the duty of candour.
- Relatives told us that the manager informed them about any concerns or any changes to people's health.
- The manager monitored incidents and shared information about these when required.

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

- The manager and staff were clear about their roles and had a good understanding of risk and quality performance.
- Following recent changes to management, the nominated individual identified gaps in the governance of the service and had worked hard to make improvements and make sure actions were taken to address the gaps.
- There was a new manager in post that had applied to us to become the registered manager. The manager had full support of the nominated individual to monitor the quality of the service and mitigate risks.
- Outcomes were monitored, and the manager completed audits for example medicine, care plan and falls audits.
- The manager made statutory notifications to different organisations when required.

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

- The manager was committed to engaging with people that used the service, their relatives and staff.
- The manager planned to arrange resident and family meetings. A relative told us, "We've had involvement with the care plan when mum first went in and have been kept up to date with any changes that have been needed."
- The manager planned to send out surveys to relatives in the next couple of weeks following the inspection, and invited relatives to care reviews.
- Staff were invited to complete staff surveys and had regular opportunities to provide feedback during team briefs.

#### Continuous learning and improving care; working in partnership with others

- The manager was committed to continuous learning to improve care and worked in partnership with others.
- The service worked closely with external professionals such as advanced nurse practitioners and district nurses. They worked alongside the local authority who provided support to improve care.
- The manager monitored staff skill base and was keen to provide extra support and training to make sure staff had the right skills and abilities to provide effective care.