

Key inspection report

Care homes for older people

Name:	Overdene House Nursing Home
Address:	John Street Winsford Cheshire CW7 1HJ

The quality rating for this care home is:	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:
Joan Adam	1 6 0 9 2 0 0 9

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Overdene House Nursing Home
Address:	John Street Winsford Cheshire CW7 1HJ
Telephone number:	01606861666
Fax number:	01606861757
Email address:	overdene@schealthcare.co.uk
Provider web address:	

Name of registered provider(s):	Modelfuture Limited
Type of registration:	care home
Number of places registered:	70

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
learning disability	7	0
old age, not falling within any other category	0	70
physical disability	70	0
Additional conditions:		
<p>The registered person may provide the following category of service only: Care home with nursing Code N to service users of the following gender. Either whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - Code OP - (maximum number of service users - 70). Physical disability - Code PD - (maximum number of service users - 70). Learning disability - Code LD - (maximum number of service users - 7). The maximum number of service users who can be accommodated is: 70.</p>		

Date of last inspection	1	9	1	1	2	0	0	8
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Brief description of the care home
<p>Overdene House Care Centre is a modern purpose built care home providing nursing care, located close to Winsford town centre. It is a two storey building and service users are accommodated on both floors. Access between floors is via a passenger lift or one of the staircases. Service users' accommodation consists of 70 single bedrooms, 30 of which have en-suite facilities. A choice of lounges and dining rooms are available</p>

Brief description of the care home

on each of the three units. Nursing staff are on duty at the home twenty-four hours a day.

The current charges for the home are #353:91 to #624:62 per week. This information has been provided by the home manager.

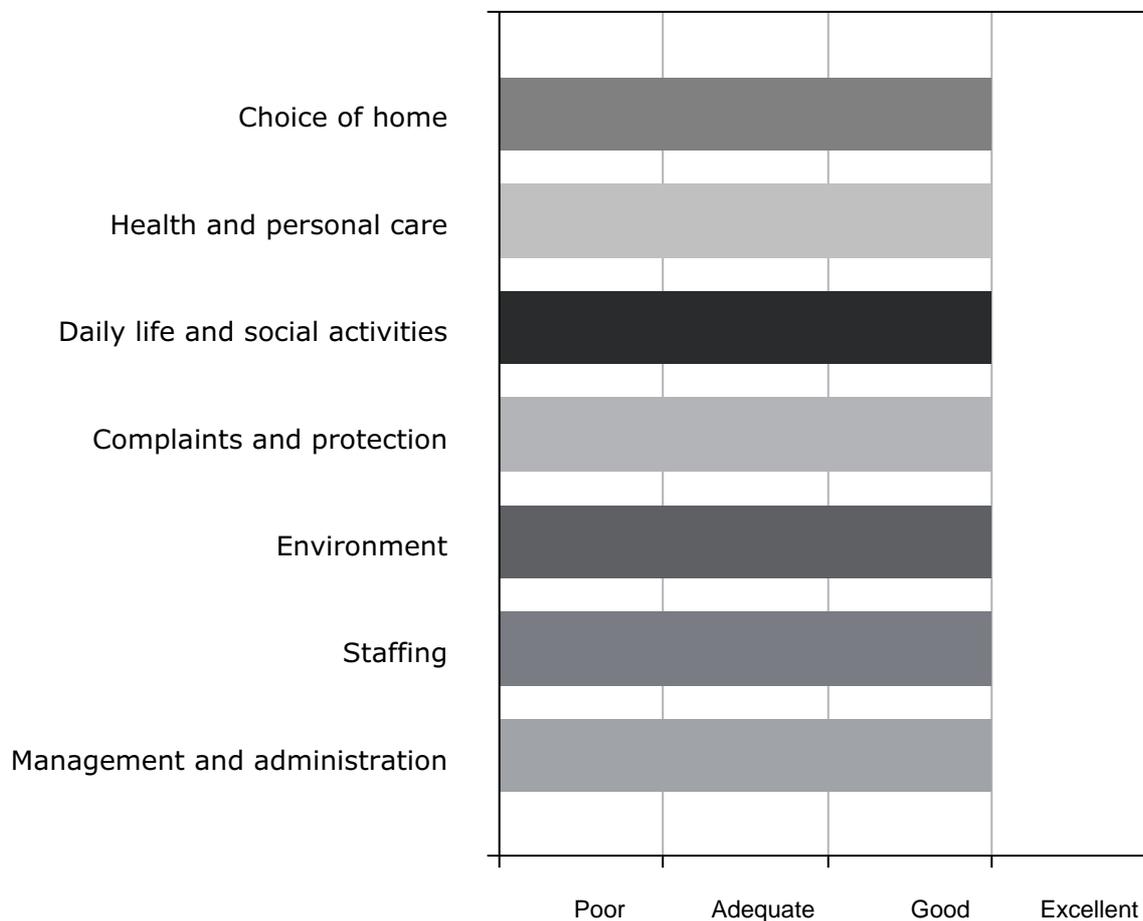
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

Our judgement for each outcome:



How we did our inspection:

This unannounced inspection took place over six and a half hours and was completed by two inspectors. This was to assess if people's needs were met at the home. A tour of the premises took place and included a majority of the bedrooms and the shared areas such as the lounges, dining rooms, bathrooms and toilets. The operations manager, acting manager, some staff and people cared for were spoken with and their views contributed to the report.

The visit was just one part of the inspection. Before the visit the home was asked to complete an annual quality assurance assessment (AQAA) to provide up to date information about services of the home. Other information since the last key inspection was also reviewed.

Feedback was given to the operations manager and acting manager at the end of the visit.

What the care home does well:

A senior staff member visits people wherever possible to carry out an assessment of their care needs before they move in to the home to ensure that their needs can be met there.

Individualised care and attention is provided and there is a welcoming cheerful environment so that people who are cared for feel comfortable and at home.

People's plans of care were documented and reflected each person's individual needs. People's medications were managed well so that they can be sure they receive their prescribed medicines.

Meals were varied and offered choice and variety.

The home provides a wide and varied range of activities so that people who live in the home have enough to do.

A good standard of hygiene was seen throughout the home and the standard of decor was good.

Comments from residents were " we are looked after very well " " staff are respectful" " staff are pretty good". Staff were seen to treat people they cared for with respect and had an easy friendly manner. Staff were seen to provide support in a sensitive and caring way.

We found that the management team are involved in the day to day running of the home and that a number of systems are in place to check that peoples expectations are being met .

What has improved since the last inspection?

The home is in the process of a total refurbishment so that the home is a comfortable place to live.

The home has a sensory garden which is enjoyed by people who live in the home and their visitors.

What they could do better:

The dependency levels of people who live on the frail elderly unit need to be assessed so that the management can be sure the staffing levels for trained staff are adequate and that the needs of people can be fully met.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line 0870 240 7535.

Details of our findings

Contents

Choice of home (standards 1 - 6)

Health and personal care (standards 7 - 11)

Daily life and social activities (standards 12 - 15)

Complaints and protection (standards 16 - 18)

Environment (standards 19 - 26)

Staffing (standards 27 - 30)

Management and administration (standards 31 - 38)

Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People's needs are assessed before they live at Overdene care centre so they know their needs can be met.

Evidence:

We looked at the AQAA and this told us that each person and their family is given information regarding the home before they are admitted. When we visited the home we found this to be true. The care plans for two newly admitted people for respite stay were looked at. These contained detailed pre-admission documents in the form of a ticklist, however, these need to be fully completed by senior staff before the person is admitted to the home. Details from the hospital and social services were present. This information was used to write a plan of care to let staff know what their needs were and how they could meet them.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who live at Overdene care centre have their health, personal and social needs met in a dignified way.

Evidence:

We looked at the AQAA. This informed us that each person who lives in the home should have a comprehensive care plan in place. When we visited we found this to be true. Care plans were looked at for people living at the home on all three units and it was found that although the plans were not person centred the care plans did give guidance to staff as to how to meet the needs of the people living at the home. A moving and handling assessment had been completed on most of the people who live at the home so that staff would know how to move them safely. Two people who had been admitted for short stay had not had this assessment completed. This was discussed fully with the acting manager who said she would speak to the staff concerned. A nutritional assessment had been filled in so that staff would know if the residents were at risk of losing weight. However, there were two types of documents being used, each giving a different outcome. One of the forms, when completed, gave the score which stated the risk was high and another when completed gave the score

Evidence:

as low risk. It was discussed with the acting manager that one of these forms should be used so as not to cause confusion. Monthly weights were recorded. Choices were recorded such as when they liked to get up, where they spent their day and how their spiritual needs were met. Visits from other health care professionals such as G.P's and district nurses were recorded so staff would know when these visits had taken place and why. The reviews were detailed as were the daily records so staff would know what changes, if any, had been made. Staff, when observed, treated people with respect and spoke to them in a kind and caring way. Information from staff said that they feel they give good care. People who live at the home looked well cared for and when spoken with said that " the home is nice" staff are good" " staff are busy but very nice." Medicine management was looked at two units and these appeared to be managed well. The home uses a blister pack system for medication so that staff can see which medicines have been given out each day but some bottle and boxed medicines were used. These had all been recorded as to the amount delivered to the home so that staff were aware of how many medicines were in the home at any one time. All medication administration sheets had been completed. Controlled drugs were checked and the checking of these by staff had been recorded appropriately. Items with a short shelf life in the drug fridge had been dated and signed so that staff would know when these had been opened. However, people who lived at the home were not taking their medicines with them if they went out for the day which meant that they were not taking the medicines that they were prescribed each day. This was discussed with the acting manager.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who live at Overdene care centre are able to take part in activities and mealtimes were a positive experience.

Evidence:

The home has two activity co-ordinators employed who will work flexibly to suit the needs of the people living there. Both these staff members have achieved an NVQ level three in care and have worked at the home for some time. The AQAA said that the activities on offer were varied and we found this to be true. One to one sessions are offered for people who can not or do not want to join in group activities. An individual record is kept of all the activities people complete on a weekly basis. Some of the people who live in the units on the ground floor like to go out shopping to buy their own toiletries and this is facilitated. Entertainers are booked to visit the home on regular basis. People who live at the home said that " there is always something on offer to do" " I dont like to join in things but like to go to local shops"
A varied menu is on offer with a good range of choices. One person said" food is very good" " homemade cakes are good" " we get good choice." The dining room is a pleasant and relaxed environment.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who live at Overdene care centre are confident that their complaints are listened to and staff have received training so that they know what to do to protect people.

Evidence:

The home has a complaints procedure that advises people how any complaint they make will be dealt with. This is displayed in the main entrance area of the home. All complaints had been logged and the action taken following the investigation had been recorded.

The home had one incident that had been reported as safeguarding adults and this had been dealt with correctly. Policies and procedures are in place and the home is aware of Cheshire "No secrets" policy. Staff working at the home had received training regarding safeguarding so that they would know how to recognise abuse and would know what to do and who to report it to.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is a clean and comfortable place to live and visit.

Evidence:

We walked round the home and looked in all communal areas, bathrooms and some bedrooms. The home was cleaned to a good standard and there were no unpleasant odors. The home is at present undergoing a complete refurbishment with new carpets, furniture and curtains. A sensory garden area has been built so that people who live at the home can sit out and enjoy the scents and peaceful atmosphere.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The dependency levels of people need to be assessed to ensure that there are adequate numbers of trained staff on duty at all times. Recruitment procedures are robust so that people who live at the home are kept safe.

Evidence:

We found that on the frail elderly unit two RGN'S were on duty between 8am and 2pm with the support of five care staff. After 2pm there is one RGN and four Care staff. Staff spoken with felt that a further trained nurse should be on duty after 2pm as some care plans were not being regularly completed and up dated as they have very little time to do this. It was also felt that more time should be given to the handover of information between each shift. This was discussed with the acting manager and the operations manger for the home and they agreed to assess the allocation of staff and the use of senior care staff. Staff felt that they did not compromise the care of the people living there . On the two units on the ground floor it was felt that staff are supplied in sufficient numbers to meet peoples needs and people who work on these units said they thought that there was enough staff on duty on each shift. We saw that some of the staff working in the home have achieved a national vocational qualification in care, this qualification shows that staff have had formal training to carry out their roles. Other staff have been enrolled to undertake the qualification. We saw staff training is on-going and that all staff have received mandatory training in key subjects. This means that staff have been given the skills to promote people's

Evidence:

health and welfare. We looked at four staff files and these had the appropriate checks carried out before staff commenced work so that the home was sure that people are safe to work with elderly people.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is well managed.

Evidence:

The acting manager of the home is an experienced nurse with relevant management qualifications and has been at the home for two weeks. She is registered with CQC for another home belonging to the company but intends to apply for the permanent post at Overdene.

Staff spoken with said that they felt supported by the management of the home and feel that they receive good training. We viewed records that showed that monthly checks are carried out on all systems in the home which gives support and care. This is good practice and shows a commitment from the home to provide a good service. We looked at how the people who live at the home and their relatives are consulted about the service. Meetings have been held and minutes taken. Questionnaires are sent out and a report is written and shared with the people who live there. Comments such as "kind staff" "my relative has settled well"

We looked at how the health and safety of the people who live at the home is

Evidence:

protected and found that there are regular checks on all equipment. We also saw that necessary checks are carried out to the services of the building.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	3	The pre-admission form must be fully completed for all people admitted to the home including those admitted for respite stay so that a full picture of the persons needs is obtained.
2	8	It is recommended that one tool is used to measure the nutritional needs of the people living at the home so as not to cause any confusion.
3	9	It is recommended that the medicines of people who are going out for the day are given to the person, carer or relative so that prescribed drugs are administered.
4	27	It is recommended that the dependency levels and needs of people who live on the frail elderly unit are assessed so that management are sure that there are adequate trained staff on duty at all times.

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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