

Hazeldell Ltd

Hazeldell Residential Home

Inspection report

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Date of inspection visit:
03 March 2017
06 March 2017

Date of publication:
22 March 2017

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

The inspection took place on 3 and 6 March 2017 and was unannounced. This was the first inspection for this location. Hazeldell Residential Home is a care service without nursing for 42 older people in a quiet residential area of Ipswich. At the time of inspection there were 37 people using the service.

The home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People felt safe living at Hazeldell Residential Home. Staff understood how to keep people safe and risks to people's safety and well-being were identified and managed. The home was calm and people's needs were met in a timely manner by sufficient numbers of skilled and experienced staff. The provider operated robust recruitment processes which helped to ensure that staff employed to provide care and support for people were fit to do so. People's medicines were managed safely.

Staff received regular one to one supervision and felt supported and valued. People received the support they needed to eat and drink sufficient quantities and their health needs were catered for with appropriate referrals made to external health professionals when needed.

People and their relatives complimented the staff team for being kind and caring. Staffs were knowledgeable about individuals' care and support needs and preferences and people had been involved in the planning of their care where they were able. Visitors to the home were encouraged at any time of the day.

The registered manager had arrangements to receive feedback from people who used the service, their relatives, external stakeholders and staff members about the services provided. People were confident to raise any concerns with staff or management and were satisfied that they would be listened to.

There was an open and respectful culture in the home and relatives and staff were comfortable to speak with the registered manager if they had a concern. The registered manager had arrangements to regularly monitor health and safety and the quality of the care and support provided for people who used the service.

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.

Staff knew how to recognise and report abuse.

Individual risks were assessed and reviewed.

People were supported by staff who had been safely recruited.

People's medicines were managed safely.

Is the service effective?

Good ●

The service was effective.

People received support from staff who were appropriately trained and supported to perform their roles.

Staff sought people's consent before providing all aspects of care and support.

People were supported to eat and drink.

People were supported to access a range of health care professionals ensure that their general health was being maintained.

Is the service caring?

Good ●

The service was caring.

People were treated with warmth, kindness and respect.

Staff had a good understanding of people's needs and wishes and responded accordingly.

People's dignity and privacy was promoted.

Visitors were welcomed at any time.

Is the service responsive?

Good ●

The service was responsive.

People's care plans were reviewed regularly to help ensure they continued to meet people's needs.

Regular meetings were held for people who used the service and their relatives to share their opinions about the service and facilities provided at Hazeldell Residential Home.

People were supported to engage in a range of activities.

People's concerns were taken seriously.

Is the service well-led?

The service was well led.

People had confidence in staff and the management team.

The provider had arrangements in place to monitor, identify and manage the quality of the service.

The atmosphere at the service was open and inclusive.

Good ●

Hazeldell Residential Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 3 and 6 March 2017 by two inspectors on the first day and by one inspector on the second day. The inspection was unannounced.

Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us. We also reviewed the provider information return (PIR) submitted to us. This is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

During the inspection we observed staff support people who used the service, we spoke with nine people who used the service, the chef, two activity co-ordinators, six staff members, the registered manager, deputy manager, a professional who was visiting the home and four relative who used the service to obtain their feedback on how people were supported to live their lives.

We also 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 care records relating to three people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality audits.

Is the service safe?

Our findings

People who lived at Hazeldell told us they were happy. One relative said, "[name] is safe here because there is always someone there." Another relative said, "We don't worry because we know [name] is here," One person said, "I'm happy here, staff are very good."

We saw throughout the home information and guidance was displayed about safeguarding and how to report any concerns, together with relevant contact numbers. Information was also made available in an 'easy read' format that used appropriate words and pictures to help support people with their understanding. One staff member told us, "We make sure there are no objects for people to fall over. We make sure people have their walking frame and ensure all equipment is safe to use."

All staff we spoke with were able to verbally demonstrate they could recognise signs of abuse and how to report any concerns both internally and externally should they need to. One staff member said, "If I had any concerns I would report them to the manager. I could go to the operations manager, CQC or social services."

Safe and effective recruitment practices were followed to help ensure that all staff were of good character, physically and mentally fit for the roles they performed. All staff had been through recruitment procedures which involved obtaining satisfactory references and background checks with the Disclosure and Barring Service (DBS) before they were employed by the service. We saw references had been verified as part of this process.

There were enough suitably experienced, skilled and qualified staff available at all times to meet people's needs safely and effectively. The registered manager looked at people's needs and regularly evaluated staffing levels which ensured there were enough staff to meet people's needs. Staff were happy with the staffing levels. One staff member said, "There is enough staff, we have time to talk with people." One relative told us, "Yes there is always enough staff; they have always got time for you. We observed during the inspection that the atmosphere was calm and staff were not rushed when meeting people's needs."

Where potential risks to people's health, well-being or safety had been identified, these were assessed and reviewed regularly to take account of people's changing needs and circumstances. This included in areas such as medicines, mobility, health and welfare. This meant that staff were able to provide care and support safely. For example, one person we looked at who had mobility issues had been assessed for bedrails due to the risks of falling from their bed. However at that time it was felt safer to reposition the bed and to have a crash mat due to the risk of entrapment. The crash mat would ensure the person was safe should they fall from the bed. We noted this had been regularly reviewed and recently the use of profile sides with padding had been introduced to manage the person's changing needs. We saw that risk assessments had been completed for the profile sides to ensure the person's safety. This meant that people's risk and changing needs were monitored and reviewed and action taken to keep people safe.

Information gathered in relation to accidents and incidents that had occurred had been documented and reviewed by the registered manager to ensure that people's changing needs were addressed and that

reoccurring patterns were identified.

There were suitable arrangements for the safe storage and management of people's medicines. People were supported to take their medicines by senior staff that were properly trained and had their competency assessed. Staff had access to detailed guidance about how to support people with their medicines in a safe and person centred way. One staff member told us, "I feel confident with giving medicine's as the training was excellent and the support from other seniors is great." Hazeldell residential home uses the bio pod system the staff we spoke with felt it was a safe and easy way to manage people's medicines. Each bio pod clearly identified the person who the medicine was intended and all the persons required medicines are contained within one bio pod. Pods are colour coded making it easy to distinguish between different dosages times whether breakfast, lunch, dinner or evening. We found where medication that was given when required, for example pain relief. Protocols were in place that gave guidance to staff on how to manage this appropriately.

Plans and guidance were available to help staff deal with unforeseen events and emergencies which included relevant training such as first aid and fire safety. Regular checks were carried out to ensure that both the environment and the equipment used were well maintained to keep people safe. For example, the fire alarm systems were regularly tested. We saw people had personal evacuation plans in place.

Is the service effective?

Our findings

People received support from staff that had the appropriate knowledge, experience and skills to carry out their roles and responsibilities. One person told us, "staff are friendly and the food is very good."

Staff completed an induction programme, during which they received training relevant to their roles, and had their competencies observed and assessed in the work place. Both the registered manager and deputy manager confirmed that on a day to day basis they observed staff interactions to ensure best practice is followed. Staff received training and regular updates in a range of subjects designed to help them perform their roles and meet people's needs effectively. This included areas such as moving and handling, dementia, medicines and infection control. Staff confirmed they had completed inductions. One staff member said, "I had my induction which included being shown round the home and fire drills."

Staff confirmed they felt supported by the registered manager and were encouraged to have their say. Staff attended regular meetings and discussed issues that were important to them. They also had regular supervisions where their performance and development were reviewed. One staff member said, "We have supervisions and appraisals, we get feedback on our work and we are recognised for doing a good job." Staff told us that the managers' door was always open and they could see them at any time to discuss any issues. Another staff member commented, "Managers are very approachable always there if you have any concerns." They went on to explain that they had approached the registered manager about a work related issue and they confirmed that the matter was dealt with appropriately and that they had felt supported.

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. We checked whether the service was working within the principles of the MCA and found that they were.

Staff understood the importance of choice. They were able to verbally demonstrate how they offered people choice. One staff member said, "People have the right to choose." Another staff member commented, "Choice is important it is about their independence. I encourage people to do as much as they can." One person said, "Staff always ask me what I want." We saw staff used visual aids to support people with different choices. For example we observed staff asking people what they would like for their meal; they used pictures to support people with making their choice.

We saw people were provided with food and drink throughout the day. At lunchtime we saw people were given the meals that they had chosen. We observed people were supported to eat their lunch where required. One person said, "The food is good here." We spoke with the chef who confirmed there were systems which ensured people's dietary requirements were met. For example soft diets and fortified food where required. We saw people's requirements were documented for the chef to follow.

We saw in people's care plans that people received care, treatment and support which promoted their health and welfare. People had access to GP's and other care professionals when required. We spoke with one professional who was visiting the home to support people with their health needs. They confirmed they visited the home twice a week, they commented, "The staff are lovely, very helpful and good with patients [people who lived at the home]." They also commented, "People are getting good care here, the interaction I see is really good."

Is the service caring?

Our findings

We saw kind and caring interaction between staff and the people who used the service. People we spoke with were complimentary about the staff, we were told by one person, "Staff are friendly, and they seem to know what they are doing. Some people need a lot of help especially with those lifts and staff take their time and help them." Another person commented, "I like all the staff they are kind and good." One relative we spoke with said, "I like it here everybody is friendly. Staff are nice, they also look after me. I don't know what I would have done without them quite frankly."

We saw that staff helped and supported people with dignity and respected their privacy at all times. For example when staff entered people's rooms they were seen to knock on the door. We saw throughout the inspection the staff approach was calm, caring and respectful of people's needs. For example, we observed staff discreetly asked people if they wished to use the lavatory. One relative said, "Staff understands [relative] they are so kind and understanding. Staff have helped me understand [family members] condition." During lunchtime we observed one person's relative arrive to take the person out. The staff member said, "Your [relative] is here to take you out, would you like to have your dessert before you go." The person declined and the staff member said, "Are you sure you have had enough to eat." This meant that staff were thoughtful about people's needs.

Staff members were able to verbally demonstrate they understood how to promote independence and respect people's privacy and dignity. One staff member told us that they felt staffing levels and training were good and they were not rushed and could provide good care. In particular they felt the service encouraged people to maintain independence especially with walking, encouraging people to use their walking frames to mobilise. One relative said, "Happy with the home it's just wonderful." Another relative said, "When I go home I don't have to worry because I know [name] is in a nice place, best care home I have been in."

People were well presented throughout the day and it was evident that staff had developed positive and caring relationships with people they supported and were knowledgeable about their individual needs and preferences. We observed good kind interaction from staff throughout the day. People, and their relatives where appropriate, had been fully involved in the planning and reviews of the care and support provided. One relative said, "I have been involved with my [relatives] care."

Confidentiality was maintained throughout the home and information held about people's health, support needs and medical histories were kept secure. Information about advocacy services was made available to people and their relatives should this be required. We were told by the registered manager that advocates were used. They told us about one resident who was supported in making a decision about access to the community. We found that the person accesses the community on a regular basis and that there are safe measures in place which ensured their safety.

Is the service responsive?

Our findings

Care plans we looked at were person centred and had been reviewed regularly there was guidance for staff to meet people's needs. Staff we spoke with were able to verbally demonstrate they knew the people they supported. For example, we asked staff about people they supported and they were able to tell us about the people's care needs and what was important to them.

Care plans had completed pre-assessments in place with risk assessments for areas such as mobility, falls, and bedrails and capacity assessments. The registered manager had recently introduced a new electronic system for staff to record all care activities on their individual IPod. This was proving to be an effective way to monitor and the deliver care. For example, the amount of fluids a person had consumed, when a person had been assisted to be moved, and what activities they had taken part in could all be easily monitored on this system. Staff we spoke with confirmed that this new system saved time with regard to writing and recording information 'as it was recorded live and they had more time to spend with people. The registered manager also confirmed that relatives had access to the system via the portal, where appropriate consent had been given. (A portal is used to navigate a person to the correct page on the provider's web site). This allowed relative's to login and view the care notes and activities that their relatives had received. At present only a two relatives were using the portal and had reported to the registered manager how great it was to be able to see what was happening and the care their relatives had received.

People's preferences were responded to. We saw one person who liked to have music playing in their room and there was a particular object they liked to have with them at all times as this provided them a feeling of security. We visited their room and found that there was music playing from their CD player and they had the object close to their side. We looked at people's turning, food and fluid charts on the electronic system and found these had been completed. We were told by the registered manager that people who had repositioning charts in place were monitored using the new electronic system which alerted staff when the person required repositioning to ensure all tasks and activities were completed.

We saw that there were activities for people to take part. The activity coordinator was observed throughout the day completing activities in the main lounge. During our visit we saw some people were enjoying a painting activity. One person said, "When my family brought me for a look around, I saw the painting. Always wanted to do that but never have so that did it for me, wanted to come here so I could paint."

The activities coordinators provided nail care which they confirmed was popular with some people. They told us about the sensory room that had been set up and explained how this had been used to good effect, particularly for one person who could get quite distressed and anxious at times. We noted that the inner courtyard had been turned in to a farm with a chicken coup and the eggs that were laid were offered to visitors of the home. We noted raised beds were being created to offer the opportunity of gardening in the spring. People we spoke with enjoyed having the chickens and looked forward to helping out in the garden.

The activity coordinator told us that when a new person moved into the home they were asked what their hobbies and interest were in order to ensure the current activity programme provided the person with

choices and preferences that met their individual interests and their hobbies. One person said, "I like to be active. They also told us that they were supported to go into the town twice a week and they had been taken to see a football match at Wembley by staff. This had been as part of a project called 'sparkle' that was run by the provider to help make people's wishes to come true.

We saw there were notices on how to complain and people we spoke with knew how to report any concerns they might have. One relative said, "I had to complain once and the situation was resolved quickly." We saw complaints had been responded to in line with the provider's complaints procedures and we also saw that people had taken time to compliment staff on the care provided.

Is the service well-led?

Our findings

People who lived at Hazeldell Residential Home, their relatives and staff were all very positive about how the home was run. We were told that the registered manager was approachable and supportive. One relative said, "The managers are very approachable, they are always friendly. I always attend the relatives meetings; I feel supported." One person said, "I am happy to talk with the manager or the senior staff; everyone is very helpful."

The registered manager told us they completed regular walks around the home where they talked with people to ensure they were happy with the service they received and to check the environment was safe and clean. They were clear about their vision regarding the purpose of the home, how it operated and the level of care provided. They regularly checked staff competency and ensured the environment was safe. Staff we spoke with confirmed the registered and deputy manager were visible around the home. The registered manager commented, "The office door is always open."

The registered manager was knowledgeable about the people who were used the service, their different needs, personal circumstances and relationships. Staff understood their roles; they were clear about their responsibilities and what was expected of them. One staff member said, "At handovers we are informed of the duties for the day but this can change, we communicate and work well as a team." The registered manager told us that it's was important for staff to have responsibilities to be able to grow and develop. For example staff completed audits for medicines and the cleanliness of the home. Regular weekly and monthly audits were carried out in areas such as medicines, infection control, care planning and record keeping. This meant there were systems in place to monitor the quality of the service.

Services that provide health and social care to people are required to inform the CQC of important events that happen in the service. The registered manager had informed the CQC of significant events in a timely way. This meant we could check that appropriate action had been taken.

We saw there were regular staff, residents and relative meetings. We looked at resident feedback and noted lots of positive comments. The registered managers told us that they sat down with individual groups in the home and asked for their feedback and new ideas. They confirmed this proved better than trying to get everybody together in one area.

The registered manager told us about some positive improvements they had made for people who lived at the home. They had introduced 'No frame the same' this is an initiative where the residents decorate their walking frame with the support of activities staff. This helps the residents recognise their frames and remember to take them when they get up to mobilise. We were told that this had helped reduce falls.

The farm area has had a positive impact on people since it was created in 2016. We were told by manager that currently they have some chickens in the farm area and are looking at getting a goat later in the year. We also created a sensory room with sensory toys and other equipment that the residents have enjoyed. The television played various DVD's that have whale music, woodland sounds etc. The registered manager also

told us about the 'Sparkle' initiative run in the home, this involved staff trying to support people to achieve a dream that they thought they were unable to achieve since moving into a residential home. For example, we have taken resident's to a football match at Wembley, a spa, the theatre, and a boat trip.

The registered manager received support from their operations manager and they had regular meetings to support their learning. They also had bi-monthly manger meetings to discuss relevant issues and share ideas. The registered manager said, "The support I receive is excellent, I am looked after. If I need a new hoist it will be delivered." The registered manager told us they had regular supervisions and felt listened to and supported. They told us that they can just pick up the phone for support, they told us, "I have lots of other managers I can turn to for advice. "