

Mr & Mrs J A Barton

Inglewood Residential Care Home

Inspection report

Coppice Lane
Disley
Stockport
Cheshire
SK12 2LT

Tel: 01663762011

Date of inspection visit:
22 July 2019

Date of publication:
14 August 2019

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

Inglewood is a residential care home providing personal care to 20 people at the time of the inspection. The service provides care and accommodation to people living with dementia and older adults. The service can support up to 22 people. Accommodation is set out over three floors.

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

People and their relatives told us that they were happy with the standards of care in the home and that staff met all their needs. People's experience was summed up by two people, who said, "The atmosphere is good, it's more like a family home" and "I don't want to be in a home, but if I had to be anywhere, I'd be here. I think this is the best you'll get".

There were enough staff to meet the needs of the people living in the home. Many staff had worked in the service for a long time and had developed good relationships with the people living there. The registered manager told us they never needed agency staff. Recruitment was managed safely, and staff received training when they started with the service and on an ongoing basis.

Medication was managed safely, and people received their medication when required.

The home was clean and well maintained. Equipment was checked regularly to ensure this remained safe. Staff had access to protective personal equipment to reduce the risk of infection. The garden was undergoing extensive renovations to create a fully accessible dementia friendly sensory garden that people were looking forward to using.

Accidents and incidents were recorded and analysed for patterns and lessons were learnt from any incidents within the home through staff briefings. Safeguarding incidents were recorded and reported.

People were supported to eat and drink enough and people had choice in relation to food. The feedback was very positive about the food.

People were supported to access other healthcare services and we received positive feedback from healthcare professionals who worked regularly with the service.

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 told us that staff were very kind and compassionate and knew them well as there was a consistent staff team. They always respected their dignity and privacy.

People had access to activities that they were interested in and felt they were supported to maintain relationships with people that were important to them.

People knew how to complain and were confident they would be responded to. No recent complaints had been received by the service.

There was a registered manager who was also the owner of the home. They and their management team provided consistent oversight of the service and everyone was positive about how the home was run.

Checks and audits were carried out regularly. The registered manager actively sought people's feedback about the service and were open and transparent when things went wrong. The management team looked at good practice and ways to improve the service on a continuing basis.

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 25 March 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 ●

Inglewood Residential Care 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 Care Act 2014.

Inspection team

The inspection team consisted of one inspector.

Service and service type

Inglewood Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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. The registered manager was also the owner or nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Notice of inspection

This inspection was unannounced.

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. We used all this information to plan our 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.

During the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, the deputy manager, the general manager and two care staff. We spoke with two healthcare professionals visiting the service. We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision and training. A variety of records relating to the management of the service were reviewed.

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 good.

This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Recruitment was safely managed. All the necessary pre-recruitment checks were carried out and recorded to check staff were appropriately qualified and fit to work with vulnerable people.
- There were enough staff to provide safe, consistent care that met the needs of the people living in the home. People told us they felt safe. Comments included, "I feel safe, there are always plenty of staff" and "There are enough staff, they come quite quickly".
- Many staff had worked in the home for a long time and were able to provide consistent care to people. The registered manager explained that they never used agency staff and absences were covered by existing staff.

Using medicines safely

- Staff administering medication were trained and underwent checks on a regular basis to ensure they knew how to administer medication safely. Where any errors occurred, staff underwent further training and checks before they could administer medication again.
- Medications were stored safely, and we saw from records that people received their medication at the prescribed times. Regular audits were undertaken to monitor medicine procedures and identify any areas for improvement.

Systems and processes to safeguard people from the risk of abuse

- Staff were familiar with the provider's safeguarding policies and procedures. They could describe what constituted harm and what action to take if they saw any incidents of concern.
- The registered manager appropriately reported any safeguarding concerns to the local authority and CQC as required.

Assessing risk, safety monitoring and management

- Risks to people were managed safely. Risk assessments were clear, regularly updated and contained information for staff about potential risks and what steps to take to minimise these risks.
- The environment and equipment were well maintained and checked regularly. Safety checks and audits were in place and the service had appropriate safety certificates for utilities within the home.
- Personal emergency evacuation plans were in place to provide guidance to staff in the event of a fire and regular fire drills took place.

Preventing and controlling infection

- The environment was clean and well-maintained. The home had recently purchased a sanitising machine which was used on a regular basis to reduce odours and infections within the home.
- Staff received training in infection control and we saw them wearing appropriate protective equipment during our inspection.
- The management team carried out regular checks and audits to see that effective infection control measures were safely followed.

Learning lessons when things go wrong

- All accidents and incidents in the home were clearly recorded along with the action taken.
- These were analysed monthly by the general manager to look for trends. Briefings were held with staff to highlight learning and best practice where any patterns were found. For instance, there had recently been a briefing on unwitnessed falls following an increase of incidents in one of the previous months.

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 good.

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 support needs and choices were recorded before entering the home. These were reviewed on a regular basis. Staff were aware of people's needs and the relevant guidance that needed to be followed to keep people safe. One person told us, "The staff are very well trained. We get the same staff, so you get used to them and they tend to love their job". A relative told us, "I am satisfied with the care here and have absolutely no worries. My relative is happy living here".

Staff support: induction, training, skills and experience

- Staff received an induction when starting with the service and received ongoing training, supervision and appraisals to support them in their roles. Records confirmed that training and supervision was happening on a regular basis.
- Since the last inspection, the registered manager had introduced additional training and staff were positive about this training saying it was helpful and provided them with more support in their roles.

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

- The home had different areas where people could choose to spend their time as there were two main lounges, a quiet lounge as well as two conservatory areas.
- The home was undergoing some improvements. In response to people's requests, the outside area had been completed re-landscaped to create an accessible dementia friendly sensory garden. The finishing touches were being added and people were excited about the new garden and looking forward to getting outdoors more.
- Rooms were personalised and there was pictorial signage around the home to help people orientate themselves independently.

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

- There was one option at meal times, however people could request alternatives if necessary. People were positive about the food and we saw that different sized plates were used to accommodate different appetite sizes. One person told us, "The food is gorgeous most of the time and we get choice and lots of fresh fruit".
- Since the last inspection, the home had purchased a water machine, so people could help themselves to fresh water in the reception area. Other drinks were provided throughout the day. People had taken part in nutrition and hydration training to help their understanding of the importance of eating and drinking well.

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

- Staff worked with other agencies to provide support to people and provide consistent and effective care. We received feedback from two healthcare professionals during our inspection. They spoke positively about the home, the good communication within the home and how well they knew the people they cared for.
- Changes to people's health or wellbeing were recorded and appropriate referrals were made to healthcare professionals. Care records contained information about other healthcare visits in order that staff were aware of the outcomes of these visits.

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.

- The staff working in this service made sure that people had choice and control of their lives and supported them in the least restrictive way possible. Where necessary, mental capacity assessments were completed and best interest decisions involving the necessary representatives and professionals.
- Paperwork in relation to MCA and DoLS was clear and we could see this was appropriately completed and where DoLS conditions were in place, these were being followed.

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 good.

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 were treated with care, kindness and compassion by a consistent staff team. Feedback from people confirmed this. People told us, "The staff are kind and friendly" and "The staff are very friendly and know how we like things and how we are".
- Relatives told us that people received a good level of care and felt staff knew their loved ones. They told us, "They are very welcoming when I visit, and this is right for [relative's] needs" and "It's the same staff and they know [relative] very well and my [relative] knows the staff".
- People's needs were assessed and identified prior to moving into the home. Protected characteristics (such as age, gender, disability, cultural and religious support needs) were identified. We saw some people wanted to continue to practise their religion and this was supported as the home had links to local churches.

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

- People were supported to make choices about their care and given choice daily. People told us, "We're quite involved and have meetings, but any worries, you can talk to [manager]" and "Staff are very kind and we're all involved. There is someone there for you if you want something". Care reviews were held six monthly with people and their relatives.
- Staff were familiar with people's individual needs and could tell us small details about individuals' preferences within the home.
- People who did not have any family or friends to represent them could request an advocate and information was contained in the home about these services. No-one had an advocate at the time of the inspection.

Respecting and promoting people's privacy, dignity and independence

- Staff were clear on the need to respect people's privacy and dignity, we saw they spoke discretely about people's care, knocked on doors and called people by their preferred name. One relative told us of their loved one's condition and how staff were very attentive to ensure their dignity was always preserved.
- People were supported to retain as much independence as possible. For instance, someone needed support with medication but was still able to apply creams, the care plan was clear what support they needed to achieve this.
- People's information was kept confidentially in locked offices or on encrypted computerised systems.

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 good.

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

- The service had recently transferred care plans to an electronic system. We found care plans were clear, personalised and reflected the needs of the individual as well as their history and preferences. The care plans reflected people's physical, mental and emotional wellbeing. All the plans were up to date and reviewed regularly.
- We observed staff were attentive to people's preferences and due to working in the home a long time, knew the people they were caring for very well.

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's communication needs were identified, recorded and highlighted in care plans and staff were aware of these. For instance, pictorial cards were used to communicate with some people who struggled to verbalise their wishes.

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 had access to a variety of activities. This was a combination of group activities as well as individual support for people not wanting to join the groups. People told us they particularly enjoyed the games they played with staff and the exercise class.
- People were supported to maintain relationships and relatives were welcomed into the home. One relative told us, "I am perfectly happy with the care here. In fact, I've booked myself in for when I need care!"
- Since the last inspection, the home had purchased a tablet and virtual assistant. People were able to use the tablet to keep in touch with relatives who were not local, ensuring they maintained these relationships. The virtual assistant meant they could complete tasks such as turning on the radio or gaining crossword puzzles independently of the staff.

Improving care quality in response to complaints or concerns

- There was a complaints policy and people were familiar with this and knew how to complain.
- No complaints had been received into the home in the last 12 months. Everyone was familiar with the

management team and felt confident that they could raise any issue with them and this would be attended to promptly.

End of life care and support

- People's end of life wishes were recorded in their care plans.
- There was no-one at the end of their life at the time of our inspection. We saw several thank you cards received by the service from relatives thanking staff for the care and compassion they had provided to their loved ones at the end of their life.

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 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

- Quality assurance systems and processes were in place to ensure the care was safe, effective and responsive to people's needs.
- Relatives felt the service promoted good outcomes and was person-centred. One relative had written into the service saying, "The care is second to none. The staff are absolutely brilliant".

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 and management team had a good oversight of the care provided. The registered manager lived on site and was available whenever needed. Regular audits were completed, and regular reports were completed by the management team each month. We saw where any improvements were identified that these were actioned in a timely manner.

Continuous learning and improving care

- The management team were constantly looking at ways to improve the service. Since the last inspection, they had introduced technology into the home both for care plans, but also to benefit people living in the home to reduce social isolation and increase independence. The garden was being redeveloped and other equipment such as the sanitiser had been purchased to improve the environment.
- The management team researched good practice, and this was shared with staff at monthly staff briefings.

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

- There was a registered manager who was also the owner of the service, who had been in place over 25 years. They and their management team were available every day, so staff felt supported and that they could raise any issues and they were listened to and respected.
- The service was well run. We received positive feedback from people and their relatives about the manager and how the home was run. People told us, "I can speak to the [manager] about anything" and "[Manager] is very good, I can talk to them if there are any problems".
- Staff were equally positive about how the home was run. Many of the staff told us they had remained for a

long time with the service due to the management team and their excellent support. They told us, "There is no us and them, between us and the management and us and the residents. They are great to work for".

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

- Regular meetings were held for people who lived at the home and relatives and they had the opportunity to feedback their views. Newsletters were produced monthly to update people about news in the home and local community.
- Surveys were carried out annually for people and their relatives. We saw reports set out how they would address any issues, and these were discussed with people.
- The home had links to the local community. They had links to local churches and had one local volunteer who provided activities in the home.

Working in partnership with others

- The home worked in partnerships with all local health and social care staff to ensure people had access to good quality care. Comments received from healthcare professionals were positive about the relationship with the home and its staff.