

Berkeley Health Care Limited

Newlands Nursing Care Centre

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Newlands Nursing Care Centre is registered to provide accommodation and personal care to up to 25 older people, some who require nursing care. At the time of our inspection, 13 people lived or were receiving respite care in the nursing home.

The service is also registered to provide personal care and nursing to people living in their own accommodation, including apartments and cottages based on the grounds of Newlands Care Centre. Where people are not living in the nursing home, the report refers to them living in their own homes.

While we inspect both aspects of the service, we do not inspect people's own accommodation, therefore evidence in relation to the environment is based on people living in the care home aspect of Newlands. Three people were receiving personal care in their own homes.

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

People and their relatives told us they felt safe and that staff responded to their needs. Staff had received training in recognising safeguarding concerns and knew the actions to take to protect people from harm. Nursing staff engaged with external healthcare professionals to ensure people received timely care and support that was appropriate to their needs.

Each person living at Newlands, or receiving support from staff in their own homes, had detailed care plans in place. The management had actions to ensure these plans continued to be personalised and reflective of people's changing needs.

There was a new management team in place at Newlands. New monitoring and governance systems to monitor and improve the quality of care people received had been implemented and had been successful in driving improvements. People and their relatives spoke positively about the management and the caring culture of staff. Staff spoke positively about the support they received from the management team.

Safe recruitment practices were in place. The provider ensured appropriate checks were being carried out to ensure staff were of good character.

There were enough staff deployed to meet people's needs. Staff spoke positively about staffing at Newlands and spoke positively about people and their needs.

The provider had infection control procedures in place to protect people and prevent the spread of infection. Staff accessed personal protective equipment (PPE) and acted in accordance with government guidance.

We observed positive interactions between people and staff throughout our inspection. People living in the

home and in the community clearly enjoyed the time they spent with staff and others. People enjoyed the engagement and activities they had received from staff and others.

Incidents and accidents were reviewed to reduce the risk of a reoccurrence. Complaints were responded to appropriately and opportunity was made to identify and make improvements.

The manager and deputy manager ensured appropriate action was taken when people lacked capacity in accordance with the Mental Capacity Act. Staff supported people in the least restrictive way possible and in their best interests. At the time of our inspection, the deputy manager had applied to the standard authority as 2 people were being subject to Deprivation of Liberty Safeguards.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was Requires Improvement (published 12 November 2022) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced inspection of this service on 7 and 8 September 2022. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve people's care records and their good governance systems.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Newlands Nursing Care Centre on our website at 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.

Newlands Nursing Care Centre

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

One Inspector and 2 Experts by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Newlands Nursing Care Centre is a 'care home' which also provides personal care to people living in their own homes. People in care homes receive accommodation and nursing and/or personal care as a single package under 1 contractual agreement dependent on their registration with us. Newlands Nursing Care Centre is a care home with nursing care. While we inspect and regulate the premises of the care home, we do not regulate people's individual accommodation. Where we refer to the premises, we solely refer to the premises of the care home.

The 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.

There was a registered manager in post who was also the operations manager. A new manager had also been recruited in March 2023 and they were in the process of registering with CQC.

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 considered the feedback from the local authority and professionals who work with the service. We used the information the provider sent us in March 2022 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 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 spoke with 9 people who lived or were staying in Newlands Nursing Care Centre (the home). We also spoke with 3 people living in their own apartments who received a regulated activity from the service. We spoke with 7 people's relatives about their experience of the care and support provided by the service.

We spoke with 13 staff including the operations manager, the manager, the deputy manager, 1 nurse, 5 care staff, 1 chef, 1 maintenance worker, 1 housekeeper and the activity co-ordinator. We also spoke with the nominated individual for the provider. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 7 people's care records. A variety of records relating to the management of the service, including policies and procedures were also reviewed. We reviewed 4 staff recruitment and personnel files.

We continued to seek clarification from the management team to validate the evidence found. We sought feedback from a healthcare professional involved with the service.

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 for this key question has changed to good. This meant people were safe and protected from avoidable harm.

At our last inspection accurate, complete and contemporaneous records in respect of each person's care were not always maintained. There was not always a clear record of action taken when risk had been identified and assessed. This placed people at risk of harm. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

Assessing risk, safety monitoring and management

- People's risks were assessed and known by care and nursing staff. Each person had detailed care plans in relation to their needs and risks. There was clear record of how the support 1 person needed in relation to their mobility and dietary needs had changed, in line with changes to their prescribed medicines.
- Where people required textured diets or thickened fluids, clear guidance was in place for staff to follow. We observed staff supporting people in line with their assessed dietary needs. Staff were able to discuss the individual support people required.
- Staff understood people's individual needs and risks and discussed the support they required. Staff were confident in explaining how they supported people with their wellbeing and knew how to support and reassure them when they may be anxious. Where people could become anxious, there were clear support plans in place which provided staff with guidance on the support they required, including triggers which made people anxious.
- People were protected from the risk of their environment. There were clear risk assessment and development plans in place to manage risks in the environment. The service ensured appropriate checks were in place in relation to fire safety and legionella's disease.

Staffing and recruitment

At our last inspection we found safe recruitment practices had not always been followed. This was a continued breach of regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- Staff were recruited safely. All required checks were made before new staff began working at the service. Disclosure and Barring Service (DBS) checks were completed alongside seeking references from staff's

previous employers. These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

- Suitable staffing levels were in place to meet the needs of people using the service. Staffing levels were based on the occupancy and needs of people using the service. The service operated on its own permanent or bank staff and did not use agency staff.
- People and their relatives told us there were enough staff to meet people's needs. Comments included, "The girls here are brilliant with a great sense of humour. I enjoy their company enormously. They are totally dependable" and, "I haven't bothered anyone this morning. If I want help, they are there."
- Staff spoke positively about the staffing levels within Newlands. Staff said there were enough staff and they had the time they needed to provide people's care. Staff comments included, "The staffing levels are right, we get everything done" and, "We have busy days, things are manageable and the management always help out, which is so important."

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt the home was safe. Comments included: "I do [feel safe] and you needn't worry about it" and, "Yes, I think my mother is safe. I took a long time to find a place that is suitable. I think the reason she is safe is that I observe the amount of attention she receives, and she is very happy."
- The manager and management team regularly worked alongside care staff which made it easier for any concerns to be identified or reported to them. The management team responded to and acted on safeguarding concerns appropriately.
- Staff knew how to raise concerns in relation to people's safety. Comments included "Any concerns, I know I can discuss them and they're sorted" and "The managers are approachable. I know concerns are responded to well."

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)

- The manager and deputy manager ensured that where people may lack capacity, appropriate assessments were made. Where people were being deprived of their liberty, but were unable to consent to this, necessary applications had been made.

Learning lessons when things go wrong

- The management team reflected on incidents and accidents to make improvements to people's care. Following a safeguarding concern, the service took appropriate action and provided clear guidance for staff to follow.
- Staff were supported to reflect on incidents, accidents and near misses. Staff took appropriate action when they found 1 person was struggling to swallow safely. They sought advice from external health care professionals, to protect the person from the risk of aspiration while eating and drinking.

Using medicines safely

- People's medicines were stored safely, and they received their medicines as prescribed.
- Some people were prescribed medicines that were to be administered 'as required' when they could be anxious or distressed or were in pain. Protocols contained clear guidance for staff to follow, including when to administer these medicines and how to review the effectiveness of their prescribed medicines.
- People and their relatives told us staff supported them with their medicines as required. Comments included: "Yes, the nurses keep all the medication very safely. They are very much on top of all of this, and Mum gets all of her medicine at the correct times" and, "The staff make sure that she gets them at the right times. They are right on top of all of this."

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was responding effectively to risks and signs of infection.

Visiting in care homes

The provider was following current government guidance in relation to visiting at the time of the inspection.

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 people's needs were met through good organisation and delivery.

At our last inspection the provider had not operated effective systems to identify concerns and drive improvements. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Additionally, the provider had not updated or maintained a current statement of purpose for Newlands Nursing Care Centre. This was a breach of regulation 12 (Statement of Purpose) of the Care Quality Commission (Registration) Regulations 2009.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17 and regulation 12.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider had updated their statement of purpose which reflected the current services they provided people within Newlands. The provider and management team openly discussed the changes and improvements they had made as well as their plan to maintain these changes and drive further improvements.
- The management team and representatives of the provider had implemented a range of quality assurance audits to ensure a good standard of service was maintained. We saw audit activity which included medicines, infection control, incidents and accidents and health and safety. Any shortfalls or concerns were documented in an action plan which was monitored and updated by the management team.
- The home's action plan was reviewed by the management and representatives of the provider. When actions had been completed these had been signed off to ensure the action taken was appropriate. Improvements had been evidenced in relation to people's care plans, access to care reviews and staff personnel records.
- Scheduled audits evidenced where improvements had been made and where further action was required. For example, actions around 'as required' prescribed medicine protocols had been discussed and actions discussed with nursing staff.
- The management team had implemented clinical risk meetings. These meetings helped staff to respond to people's needs and ensure their support was reflective of their changing needs. These meetings documented where people's needs had changed and where actions were required, including the implementation of specific risk assessments.
- The provider had informed the CQC of significant events in a timely way, such as when people had passed away, where there had been suspected abuse and any significant injury. This meant we could check appropriate action had been taken.

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

- People and their relatives views were being sought. The management team carried out meetings with people using the service and their relatives. Staff also carried out care review meetings every 6 months with people and their relatives to discuss their needs and seek their views on their care. Where necessary actions were implemented to ensure changes were made as required.
- People and relatives spoke positively of their involvement within Newlands. Relatives' comments included: "I have talked to them a lot and they always keep an open door. I was very anxious when Mum went there, and they were incredibly helpful, kind, encouraging and flexible" and. "Yes, we are told if Mum has had any accident or is unwell, and we have always been happy with the action taken."
- Staff felt supported to express their views and felt the provider and management team listened. They spoke positively about improvements in the home and the support they received from the management team. Staff comments included: "The (clinical) governance meetings are every week. They are helpful, they keep us on top of things. I feel it's more supportive now" and, "We have the structure to do things properly now. There is more support and more awareness."
- Staff liaised with specialist health and social care professionals for guidance and took on-board any advice given. Where professionals had been involved in people's care there was a clear record of the guidance and support they had provided.

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

- People and their relatives spoke positively about the service, the management team and the communication they received. Comments included: "Really good. We get informed about anything that is going on via a newsletter. The nurses will always contact us if there is anything to do with Mum's health however minor" and, "I think they are a hugely dedicated and professional team."
- The manager and representatives of the provider were open and transparent throughout our inspection and were clearly committed to providing good quality care.
- The management and staff were focused on promoting a positive culture which was focused on people's needs and wellbeing. This included a focus on activities and engagement within Newlands. One person spoke positively about coronation celebrations at Newlands. They told us, "They put on an amazing show yesterday. The chefs put on an outstanding job."

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 and provider understood requirements in relation to duty of candour and had an open and honest approach. The service had policies in place to ensure the staff team understood their responsibilities under the duty of candour.
- Concerns and complaints were actively listened to and acted upon efficiently. People and their relatives told us they were confident their concerns would be acted upon.