

HC-One Limited

Daneside Mews

Inspection report

Chester Way
Northwich
Cheshire
CW9 5JA

Tel: 01606351935
Website: www.hc-one.co.uk/homes/daneside-mews

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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

Daneside Mews is a residential care home providing personal care to up to 34 people. The service provides support to older people. At the time of our inspection there were 33 people using the service in a purpose-built building.

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

We have included a recommendation in respect of a review of relatives' preferred involvement in their relations' care.

People received safe care. Improvements had been made in systems for the reporting of allegations of abuse. Medication systems were safely managed. The review of risks faced by people from their health conditions and the environment had been reviewed and were up to date. Equipment used by people was serviced regularly and safe to use.

Relatives told us that their relation was safe. People appeared relaxed and comfortable with the staff team. They told us that they were happy with the way staff supported them. This was reflected in our observations. This was echoed by relatives. Staff knew people's individual preferences and respected these.

Staff levels met the needs of people and staff worked to ensure Where people needed 1 to 1 support; this was provided appropriately. The building was clean and hygienic, and this was confirmed through what relatives told us as well as our observations.

Robust auditing was now in place with a variety of audits being carried out to monitor the quality of care provided at Daneside Mews. Relatives told us that they knew who the manager was and saw them as approachable and providing a well led service. Most relatives commented that the management team were very open and transparent and involved them in updates about their loved one's care.

All people, families and staff were asked to comment on the care provided. The service continued to work effectively with other agencies such as district nurses to promote the wellbeing of people.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 2 April 2021). At this inspection we found improvements had been made and the rating had improved to good.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

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 based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Daneside Mews on our website at www.cqc.org.uk.

Enforcement and Recommendations

No breaches of regulation were identified at this inspection. We have made a recommendation in respect of the service reviewing the communication preferences between the service and relatives on their relations' progress.

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.

Daneside Mews

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 carried out this inspection.

Service and service type

Daneside Mews is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement dependent on their registration with us. Daneside Mews is a care home offering personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. A new manager was in post and had submitted an application to register. We are currently assessing this application.'

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 and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who used the service about their experience of the care provided as well as 3 relatives. We spoke with 7 members of staff including the area director, manager, administrator, senior care staff and care workers. We spoke to 2 visiting health professionals. We reviewed a range of records. This included 6 people's care records, risk assessments and medication records. We looked at 4 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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.

After the inspection

We looked at various documents and continued to seek clarification from the provider to validate evidence.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse.

- People were better protected by the policies and procedures used by the provider.
- People were not always able to tell us about how safe they felt living at Daneside Mews. Our observations noted that people looked relaxed with the staff team and responded to them well.
- Relatives commented that they considered their relatives were safe living there. They commented, "Yes I do believe [name] is safe" and "Yes, [name] is far safer than their previous experiences before coming to live there".
- Staff were clear about the types of abuse and the actions they needed to take in order to report any concerns and had received training in safeguarding.
- The service worked with safeguarding teams when needed and provided a monthly report to the Local Authority about those incidents that did not meet the triggers for more in-depth investigation.

Using medicines safely

- Medication was safely managed.
- Recent audits had identified an issue with medication stocks. Appropriate measures had been put into place to ensure that people always received prescribed medicines.
- All medication was stored safely. Protocols for the administration of "when required" medication were in place to ensure that medicines such as painkillers were given consistently and safely.
- Medication records were signed appropriately once administered.
- All staff received training in medication administration and had their competency checked on a regular basis.

Assessing risk, safety monitoring and management

- Risks faced by people in their daily lives were safely managed.
- All risk assessments were up to date and were reviewed regularly
- People at risk of malnutrition or dehydration, for example, had their weights and fluid intake monitored closely.
- People had individual plans to ensure that they could be safely evacuated in the event of an emergency. These were all updated and reviewed.
- The service routinely tested fire detection and prevention systems. All equipment used by people was safe and tested regularly.

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 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).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Where people lacked capacity, deprivation of liberty orders had been applied for and granted. All orders were current and had not expired.
- The capacity of people had been assessed to determine their ability to make decisions for themselves.
- Staff had received training in the Mental Capacity Act.

Staffing and recruitment

- Staff recruitment was robust with appropriate checks being made before new staff started work.
- We observed people being responded to in a timely manner.
- Relatives told us, "Staff are very good with [name]", "the same staff have been there since [name] came to live there" and "Activities staff always talk to me and show me what [name] has been doing".
- Staff rotas confirmed that staffing levels were maintained to meet people's needs. Where people required one to one support from staff this was maintained.
- Staff told us that there were enough staff to meet the needs of people and felt that there was good teamwork within the service.

Preventing and controlling infection

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

Visiting in care homes

- People living at Daneside Mews were able to receive visitors.

Learning lessons when things go wrong.

- All accidents and incidents were recorded.

- An analysis of patterns of accidents and incidents took place in order to prevent future re-occurrence.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People and their families were involved in their care, but this was not the consistent experience of all relatives. One commented that they did not always feel involved in the care provided and had limited communication from the service.

We recommend that the provider reviews the level of information sharing that families want to receive in respect of their relations.

- Other families felt involved in their relatives' care and confirmed that they were always informed of the progress that their loved ones were making.
- They confirmed that they had received surveys on the quality of the care provided and were able to make their views known.
- Observations of care included people being consulted and provided with meaningful choices to ensure they were involved in the care provided.
- Staff considered the manager to be approachable and supportive. Relatives told us, "The management is very good as well as the people that work there".

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

- The provider demonstrated that a robust audit system was now in place.
- A variety of audits were undertaken on a regular basis to assess all aspects of the support provided to people living at Daneside Mews.
- Audits included an assessment of care plans, medication, the environment, mealtime experiences, activities, and risk assessments.
- A representative of the provider visited regularly to assess the quality of the care provided. Any actions identified were addressed and actioned.
- The manager always notified us of key events.

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

- Daneside Mews provided person-centred care. This was evidenced through care planning documents and observed care practice.
- Staff were aware of people's individual preferences. Some people who preferred not to take part in planned activities had this wish respected and attention was paid to ensure that they were safe and well.
- Relatives told us that interests that their relatives had had in the past were respected.

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 was aware of the need to be open and transparent about when any aspects of the care provided needed to be improved.
- The manager openly discussed a recent issue with medicines and was able to outline steps taken to address these.
- The rating from the previous inspection was displayed within the service and on the provider's website.
- Relatives told us, "We have confidence in the service" and "It [Daneside Mews] is very well managed".

Working in partnership with others

- The service continued with to work with local authorities and other health agencies.
- District Nurses told us that the service was proactive and always implemented the health advice that they provided.