

The Chimneys Care Home

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Inspection report

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Date of inspection visit:
03 January 2024

Date of publication:
30 January 2024

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

The Chimneys Care Home is a residential care home providing accommodation and personal care to up to 14 people. The service provides support to older people. At the time of our inspection there were 10 people using the service.

People's experience of the service and what we found:

The registered manager ensured people's physical and emotional needs were being met. Some records were due for review and some audits had not been completed in a timely manner. However, the information was mostly still accurate and the registered manager maintained good oversight of the service through practical observations and discussion with staff and people. We have made a recommendation for a review and update of all care plans and audits.

People were supported by staff who understood their likes and dislikes and provided personalised care in ways that upheld their respect. The registered manager sought people's and relatives' feedback regularly through surveys and telephone calls.

People lived in a home that was well maintained and kept clean to reduce the risk of spread of infection.

People told us they felt safe. They were supported by a staff team who understood how to identify and report any concerns. Risks to people due to health conditions or the environment were well managed.

People were supported to take their medicine safely. Any concerns with their health were referred to the relevant professional without delay.

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

The last rating for this service was Good (published 24 December 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'All inspection reports and

timeline' link for The Chimneys Care Home 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.

The Chimneys 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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector, 1 medicines inspector and 1 Expert by Experience. 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

The Chimneys Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Chimneys Care Home is a care home without nursing 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 a registered manager in post.

Notice of inspection

The inspection was unannounced. We attended the site location on 3 January 2024. We spoke to relatives remotely on 8 January 2024. The inspection ended on 16 January 2024.

What we did before the inspection

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 sought feedback from professionals who know the service and Healthwatch England. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people and 4 of their relatives. We spoke with 5 members of staff including the registered manager, a senior director for the organisation and care staff. We spoke with 1 professional who knew the service. We reviewed 5 people's care records and 10 people's medicine records. We reviewed 2 staff recruitment records and various other quality assurance records.

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 Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

People were supported to receive their medicines safely. However, there were some areas of records that needed updating. The registered manager was aware of this and made the required updates during the inspection process. No one had come to harm as a result of this and people were happy with how they were supported with medicines. A relative told us, "I know the tablets are given every day and if they needed changing the GP would call."

Systems and processes to safeguard people from the risk of abuse and avoidable harm

People were safeguarded from abuse and avoidable harm. Staff had training in abuse awareness and good understanding of what to look for and how to report concerns. People told us they felt safe. One person said, "I feel care for, liked and safe." Another person said, "Staff are always lovely and look after me well and keep me safe. They are always there for me." A relative said, "My [family member] is now safe. The day they entered Chimney's Care facility I stopped worrying."

Assessing risk, safety monitoring and management

The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks. Staff had a good understanding of people's risks and how to safely support them. Any changes to people's care needs were identified quickly, shared with the staff team and referrals made to the relevant health professionals. A relative told us how their family member's health had improved since living at The Chimneys Care Home and told us, "It is thanks to all the good care,"

Staffing and recruitment

The provider ensured there were sufficient numbers of suitable staff and operated safe recruitment processes. The registered manager ensured staff employed were suitable skilled and covered gaps in staffing levels by employing the staff team in overtime and working themselves.

People told us they did not have to wait for staff to come when they called and staff treated them kindly. We observed positive interactions when staff were talking with people. Staff regularly visited people who chose to stay in their bedrooms to have chats and check on their wellbeing. A relative said, "Always enough staff and they read letters to [my family member] and books as their eyesight has deteriorated."

Preventing and controlling infection

People were protected from the risk of infection as staff were following safe infection prevention and control practices. The service was very clean and tidy but still captured a 'homely' feel. Staff understood and practiced good hand hygiene and used PPE where required. A relative told us, "Always, [my family member]

is happy and clean and so is the house, kitchen, loos and everything."

Visiting in Care Homes

People were able to receive visitors without restrictions in line with best practice guidance. The registered manager encouraged contact and visits with relatives. Relatives told us this made the service feel more "homely" because they could "just pop in".

Learning lessons when things go wrong

The provider learned lessons when things had gone wrong. Staff told us they were supported to talk about events when they happened as a team and individually to help to identify what else they could do in the future to avoid similar incidents or improve the care. Reflecting on lessons learnt was an integral part of incident reporting.

Is consent to care and treatment always sought in line with legislation 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

The provider was working in line with the Mental Capacity Act. People told us staff always asked for permission and explained what they needed to do before providing any support. People currently living at the service had the mental capacity to make their own decisions and had given consent for staff to provide their care. Staff had training in MCA and DoLS and had a good understanding of the principles of choice and consent.

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 Good. At this inspection the rating 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.

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

The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery. At the time of inspection, due to some staff being absent some documents had not been reviewed in a timely manner. We found part of care plans required updating. The registered manager was aware of this and completed the required changes during the inspection process. Staff had a good understanding of their roles and how to meet people's needs. Quality and concerns were reviewed daily during handover.

We have made a recommendation the registered manager review all care plans and audits to ensure they are current and accurate.

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

There was a positive and open culture at the service. The provider had systems to provide person-centred care that achieved good outcomes for people. People were happy with the care being provided and felt the service was "warm", "cosy" and staff treated them well.

Relatives echoed this view about the positive culture and level of inclusion for them and their family members. A relative told us, "I cannot think of anything that could be done better to improve [my family member's] care." Another relative said, "Everything that is done for [my family member] comes from a desire to provide the best possible care for them. The staff are wonderful and [the registered manager] is just amazing." Another relative told us how much they appreciated the extra support during a difficult time for their family. They said, "When we had an unexpected family death [staff] were there for [my family member] and supported them whilst we all grieved. This was peace of mind and beyond value."

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 provider understood their responsibilities under the duty of candour. The registered manager always followed up with the relevant people following incidents or complaints. They ensured all notifiable events were reported to the appropriate authorities such as CQC or the local authority safeguarding team.

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

characteristics

People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics. The registered manager sought people and relative's views through the use of questionnaires, meetings and telephone calls.

People and staff told us how their views were sought and they were happy with the level of involvement. Relatives told us staff contacted them if there were changes in the care needs of their family member. A relative said, "Communication is brilliant and we can call at any time to check on [our family member]." Another relative told us, "Communication is paramount for me and [the registered manager] and the staff are brilliant."

Staff were happy with the level of inclusion and told us how the registered manager speaks to them all the time formally and informally. They said their ideas were listened to and acted upon and felt happy to speak to the registered manager about anything.

Continuous learning and improving care

The provider had created a learning culture at the service which improved the care people received. The registered manager encouraged staff to learn and accept new challenges with a view of staff achieving new qualifications and advancement in their careers.

Staff told us they felt much more confident to apply for senior roles and consider challenging careers. This meant staff were more qualified and knowledgeable which reflected the quality of care. Staff were supported to reflect on how to improve the standards of care. Relatives told us how this had resulted in improvements in independence or health for their family members.

Working in partnership with others

The provider worked in partnership with others. The registered manager worked with various health and social care professionals to ensure people had the right support and equipment or medicine to meet their needs. They worked closely with the district nursing team, GP and social workers.