

Northgate Healthcare Limited Meadowfields Care Home

Inspection report

Pasturefields Great Haywood Stafford Staffordshire ST18 0RD Date of inspection visit: 01 September 2021

Date of publication: 29 September 2021

Tel: 01889270565

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

Meadowfields Care Home is a residential care home providing personal care to 62 people at the time of the inspection, some of whom were living with dementia. The service can support up to 65 people.

Meadowfields Care Home accommodates people over two floors, each of which has separate adapted facilities.

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

People felt safe. They were supported by trained staff who knew how to protect them from abuse and avoidable harm. Risks to people were assessed and mitigated, including risks associated with the environment. There were enough staff to support people safely and people got their medicines as prescribed. The environment was clean, and we were assured that staff followed safe infection control practices.

The registered manager was approachable and supportive. There was a positive atmosphere within the home where staff knew people well and supported them to achieve the best outcomes. The provider and registered manager had good oversight about the risks and quality of the services provided and had a commitment to continuous learning.

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 2 July 2019).

Why we inspected

The inspection was prompted in part by notification of a specific incident. Following which a person using the service sustained a serious injury. This incident is subject to a criminal investigation. As a result, this inspection did not examine the circumstances of the incident.

The information CQC received about the incident indicated concerns about the management of falls from height. This inspection examined those risks.

We found no evidence during this inspection that people were at risk of ongoing harm from this concern. Please see the safe and well-led sections of this full report.

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.

We received concerns in relation to the management of the service and the way in which people's needs were met. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection. We found no evidence during this inspection that people were at risk of harm from this concern. Please see safe and well-led sections of this full report.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Good 🔍
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good ●



Meadowfields Care Home

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.

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 The inspection was carried out by three inspectors.

Service and service type

Meadowfields is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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.

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 also sought feedback from Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke with 13 members of staff including the registered manager, deputy manager, senior care workers, care workers, activities staff and dining room assistants.

We reviewed a range of records. This included eight people's care records and multiple medication records. We looked at three 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.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data, policies, procedures and 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and relatives were confident their family members were safe. One relative said, "It's very good, very safe and secure."
- Staff had been trained to recognise and report signs of abuse and they told us how they would record and report concerns, in line with local safeguarding adults' procedures.
- Safeguarding referrals had been made to the local safeguarding authority, so that appropriate investigations could be carried out when required. The registered manager and staff understood their responsibilities to safeguard people from abuse and avoidable harm.

Assessing risk, safety monitoring and management

- People's risks were assessed and monitored. Plans were in place to mitigate risks to people and we saw that staff understood and followed these.
- Risks associated with the environment were assessed and mitigated. For example, window restrictors were in place that met necessary guidance and regulations. These were regularly checked during a health and safety audit, to ensure they were safe and fit for purpose.
- Equipment was regularly serviced and maintained to ensure it was safe for use and the registered manager had good oversight of risks associated with equipment and the environment, including fire safety.

Staffing and recruitment

- People told us, and we observed there were enough staff to safely meet people's needs and that people did not have to wait for support.
- Staff told us there were usually enough staff available to support people and they worked together as a team to cover most sickness and holidays.
- The registered manager completed regular reviews of people's dependency to ensure there were enough staff to meet people's needs. The registered manager made regular observations and spent time working on the floor to assure themselves that there were enough staff.
- Safe recruitment practices were followed to ensure staff were suitable to work with people who used the service.

Using medicines safely

- People told us, and we saw people got their medicines when they needed them. A relative said, "They [staff] are good, they make sure [my relative] takes [their medicines]."
- Medicines were stored safely and there were clear systems and procedures in place to ensure people got their medicines at the correct times.

• When people were prescribed 'as required' (PRN) medicines we saw there were clear protocols in place for staff to follow, linked to people's individualised care plans. This ensured people got their medicines as intended by the prescriber and that people were not over or under-medicated.

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 meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- 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 the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Staff understood the procedure for reporting incidents and demonstrated an understanding of how peoples care plans were reviewed following incidents such as falls.
- We saw that lessons had been learned when things had gone wrong and measures had been put into place to prevent reoccurrence.

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 the same. 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

• There was a positive and inclusive culture within the home, where staff and the registered manager knew people well and catered for their preferences. A relative said, "When [my relative] first came here they were withdrawn, [staff] really made an effort to get [my relative] out of their room and integrated within the home, [my relative] is so much better now."

• People and relatives all knew the registered manager by name and felt they were approachable and supportive. One relative said, "[Registered manager] is lovely, yeah she is great, I can always talk to her." Another relative said, "[Registered Manager] is brilliant, so approachable."

• We saw that the registered manager spent time in communal areas chatting with people and supporting staff where necessary. They knew people well and were passionate about providing good quality, person-centred care.

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 demonstrated that they fully understood their responsibilities in relation to duty of candour.

• The provider had a suitable policy and procedure in place to ensure duty of candour responsibilities were met.

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

• The registered manager completed thorough and regular quality checks. They completed a suite of audits which ensured any issues were identified swiftly and actions were taken to make improvements when required.

• The registered manager understood their responsibilities of registration with us. We saw the current rating was on display in the home and on the website and we received notifications of certain incidents, as required by law.

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

• People and relatives had opportunities to share their feedback and had access to care planning information. A relative said, "[Registered Manager] has shown me how to access [my relative]'s care plan

online. I was told about the complaints procedure and given some information when [my relative] moved in, but they are brilliant for answering the phone and giving us all the information. They are really down to earth."

• Staff spoke highly of the management team and described receiving support from all levels of management. They felt engaged and involved in the service. A staff member said, "If I've got a concern, I can air it, I can talk anyone about anything, and I feel well supported in my role."

Continuous learning and improving care

• There was a positive commitment to continuous learning. Staff told us how they were supported to complete additional training and qualifications to help enhance the care that people received.

• The registered manager and provider were committed to continuously improving care. They described their plans to further improve the physical environment within the home as well as sharing learning with other homes to further improve the experience of people living at Meadowfields Care Home.

Working in partnership with others

• The service developed partnerships with local businesses in order to improve outcomes for people. For example, a local business provided weekly fresh flowers so that people could enjoy flower arranging. This improved outcomes for people. A relative said, "[My relative] was down before they came here. Once they came it took a bit for them to settle. [Staff] encouraged [my relative] to keep doing the things they could do and to try new things. [My relative] is much more positive now."

• The service worked in partnership with health professionals to ensure people got the care and support they needed.