

Jesyem Medicare Limited

Hendford Nursing Home

Inspection summary

CQC carried out an inspection of this care service on 25 October 2016 and 27 October 2016. This is a summary of what we found.

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 ●

The inspection took place on 25 and 27 October 2016. The first day of our inspection was unannounced and we told the provider we would be returning on 27 October to complete our inspection. The service was last inspected on 7 January 2014 and at the time was found to be meeting all the regulations we looked at.

Hendford Nursing Home provides accommodation for up to 34 older people who require nursing or personal care, and those living with the experience of dementia. At the time of our inspection, 24 people were living at the service. This was because the whole of the first floor was being refurbished and new admissions were being restricted until the completion of the work. A new extension had been completed at the time of our inspection and we saw that this provided a comfortable living space for people.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The provider had systems in place for the management of people's medicines and staff had received training in the administration of medicines. However, in some cases, the amount of boxed

medicines did not correspond with the medicines administration record (MAR) charts.

The risks to people's safety were identified and managed appropriately and people were cared for safely.

There were regular health and safety audits which indicated that all areas of the home were checked for safety and any areas requiring maintenance were identified.

There were enough staff on duty to keep people safe and meet their needs in a timely manner, and the provider had contingency plans in place in the event of staff absence.

There were appropriate procedures in place for the safeguarding of vulnerable people and these were being followed.

People's nutritional and healthcare needs had been assessed and were met.

People who used the service were cared for by staff who were suitably trained, supervised and appraised. The registered manager sought guidance and support from other healthcare professionals and attended workshops and conferences in order to cascade important information to staff, thus ensuring that the staff team were well informed and trained to deliver effective support to people.

The provider acted in accordance with the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. People's capacity was assessed and they, or their representatives, had consented to their care and support. Processes were being followed to ensure people were deprived of their liberty lawfully.

Staff were caring, treated people with dignity and respect and took into account their human rights and diverse needs. People and relatives told us that people were safe and happy at the service.

Assessments were carried out before support began to ensure the service could provide appropriate care. Care plans were developed from the assessments and reviewed regularly. These were clear and comprehensive and written in a way to address each person's individual needs, including what was important to them and how they wanted their care to be provided.

There was a complaints procedure in place and people and their relatives knew how to make a complaint. They felt confident that their concerns would be addressed. Relatives were sent questionnaires to gain their feedback on the quality of the care provided.

A range of activities was provided which included regular outings. These were varied and took into account people's likes and dislikes, their backgrounds and any particular interest they had.

People, relatives and professionals we spoke with thought the home was well-led. The staff told us they felt supported by the registered manager and there was a family atmosphere and a culture of openness and transparency within the service.

The provider had effective systems in place to monitor the quality of the service to ensure that areas for improvement were identified and addressed.

We made a recommendation in relation to the safe management of medicines.

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