

Inspection Report

16 November 2021



Cornfield Care Centre

Type of Service: Nursing Home
Address: 51 Seacoast Road, Limavady, BT49 9DW
Tel No: 028 7776 1300

www.rqia.org.uk

Assurance, Challenge and Improvement in Health and Social Care

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider: Cornfield Care Centre Responsible Individual: Mr Marcus Jervis Nutt	Registered Manager: Mrs Patricia Deighan Date registered: 10 January 2017
Person in charge at the time of inspection: Mrs Patricia Deighan	Number of registered places: 76
Categories of care: Nursing Home (NH) DE – Dementia I – Old age not falling within any other category PH – Physical disability other than sensory impairment PH(E) - Physical disability other than sensory impairment – over 65 years	Number of patients accommodated in the nursing home on the day of this inspection: 76
Brief description of the accommodation/how the service operates: <p>This home is a registered Nursing Home which provides nursing care for up to 76 patients. The home is divided into three units over one floor. One unit, provides care for patients living with dementia and the other two units, provides general nursing care.</p> <p>The home also shares the same site with another registered nursing home, under the same senior management.</p>	

2.0 Inspection summary

This unannounced inspection took place on 11 November 2021 between 9.40am and 3pm by a care inspector.

The inspection assessed progress with all areas for improvement identified in the home since the last care inspection and to determine if the home was delivering safe, effective and compassionate care and if the service was well led.

The home was warm, clean and well maintained. We observed that staff were professional and polite as they completed their duties and they told us they were supported in their roles with training and resources.

Patients were seen to be well cared for and said that living in the home was a good experience. There was clear evidence of attention to personal care and dressing and additional assistance and support was provided where this was required, in a compassionate manner. The feedback from patients confirmed that they were satisfied with the care and service provided in Cornfield Care Centre.

Based on the inspection findings and discussions held RQIA were assured that compassionate care was being delivered in Cornfield Care Centre and that the management team had taken relevant action to ensure the delivery of safe, effective and well led care.

The findings of this report will provide the management team with the necessary information to improve staff practice and the patients' experience.

3.0 How we inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how they were performing at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the service provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

Throughout the inspection RQIA will seek to speak with patients, their relatives or visitors and staff for their opinion on the quality of the care and their experience of living, visiting or working in this home.

Questionnaires and 'Tell Us' cards were provided to give patients and those who visit them the opportunity to contact us after the inspection with their views of the home. A poster was provided for staff detailing how they could complete an on-line questionnaire.

The daily life within the home was observed and how staff went about their work.

A range of documents were examined to determine that effective systems were in place to manage the home.

4.0 What people told us about the service

Patients told us that they felt well cared for, enjoyed the food and that staff were helpful and friendly. Patients described staff as being "kind" and "caring."

Feedback from returned patient/representative questionnaires was all positive and complimentary. One returned questionnaire received made the following comment; "It has been a terrible time to have a loved one in a nursing home during the pandemic. However the staff in Cornfield have done a fantastic job in keeping in keeping mum safe and we really appreciate it so much. Please pass on."

Visiting and care partner arrangements in the home were ongoing and two patients described how they looked forward to the visits from their loved ones.

Staff spoke positively about working in the home and advised there was good team work within the home. Staff said that the manager was very approachable and that they felt well supported in their role.

5.0 The inspection

5.1 What has this service done to meet any areas for improvement identified at or since last inspection?

Areas for improvement from the last inspection on 14 January 2021		
Action required to ensure compliance with the Care Standards for Nursing Homes (April 2015)		Validation of compliance
Area for improvement 1 Ref: Standard 35.6 Stated: First time	The registered person shall ensure that the governance arrangements are maintained in a systematic and up to date manner	Met
	Action taken as confirmed during the inspection: Evidence was clearly in place from discussions with the manager and operations manager and review of monitoring reports that this was in place.	
Area for improvement 2 Ref: Standard 48.8 Stated: First time	The registered person shall ensure that all staff participates in a fire evacuation drill at least once per year and records are maintained to reflect individual staff member's attendance.	Met
	Action taken as confirmed during the inspection: Review of fire safety records confirmed that fire safety drills were being maintained for all staff on a regular and up-to-date basis.	

5.2 Inspection findings

5.2.1 Staffing Arrangements

There were systems in place to ensure staff were trained and supported to do their job. For example, staff received regular training in a range of topics including safe moving and handling, fire safety and adult safeguarding. Staff confirmed that they were provided with relevant training to enable them to carry out their roles and responsibilities effectively.

Review of a sample of employee recruitment records evidenced that robust systems were in place to ensure that patients are protected.

Appropriate checks had been made to ensure that all staff maintained their registration with the Nursing & Midwifery Council (NMC) or the Northern Ireland Social Care Council (NISCC).

The staff duty rota accurately reflected all of the staff working in the home on a daily basis and clearly identified the person in charge when the manager was not on duty.

Competency and capability assessments were completed for staff left in charge of the home when the manager was not on duty.

Staff said teamwork was good and that the management team were approachable. Two members of staff made the following comments; "I am not just saying it but the care here is really very good." and "Jarvis (the responsible individual) is great, very kind." Staff were seen to maintain patients' dignity by offering personal care discreetly. Patients were offered choices throughout the day, for example, where and how they wished to spend their time and what activity they wished to engage in.

Patients described staff as kind and caring. Two comments from patients included the following statements; "I have all my comforts here and I feel very safe. The staff are very good." and "There is a lovely peaceful atmosphere here. The staff all work very hard."

5.2.2 Care Delivery and Record Keeping

Staff were knowledgeable of patients' needs, their daily routines, and their likes and dislikes. We observed staff to be prompt in recognising patients' needs and any early signs of request for assistance. Staff were skilled in communicating with patients; they were respectful, understanding and sensitive to their needs. Frailer patients were seen to be seen to by staff in an attentive, kind, caring manner.

Staff interactions with patients were observed to be friendly, polite, warm and supportive. Staff were seen to seek patients' consent when delivering care and to knock on patient's bedroom doors to seek permission of entry.

Examination of records and discussion with the manager and staff confirmed that the risk of falling and falls were well managed.

Good nutrition and a positive dining experience are important to the health and social wellbeing of patients. The lunchtime dining experience was seen to be a pleasant opportunity for patients to socialise and the atmosphere was calm and relaxed. There was choice of meals being offered; the food was attractively presented and smelled appetising, and good portions were provided.

Patients told us they very much enjoyed the food provided in the home. One patient made the following comment about the meals; "The food is lovely, it is grand." Appropriate supervision and support was readily available from staff.

Staff told us how they were made aware of patients' nutritional needs to ensure that any recommendations made by Speech and Language Therapy (SALT) were adhered to. Care records were accurately maintained to help ensure that staff had an accurate understanding of patients' nutritional needs. There was evidence that patients' weights were checked at least monthly to monitor weight loss or gain.

Patients' needs were assessed at the time of their pre admission to the home. During this stage care plans were developed in consultation with the patient, their next of kin and their aligned named worker to direct staff on how to meet patients' needs. Added to this, any advice or directions by other healthcare professionals was included in the assessment and care plans.

Patients' care records were held safely and confidentially.

Patients' individual likes and preferences were reflected throughout the records. Daily records were kept of how each patient spent their day and the care and support provided by staff. The outcome of visits from any healthcare professional was recorded.

Patients commented positively on the care delivery in the home and praised the meal provision. Patients said they felt well looked after and that staff were helpful and friendly. One patient made the following comment; "This home is really good and well run. Staff are very nice and go out of their way to help."

Staff reported that the care provided to the patients was of a high standard and they were always involved in their care.

5.2.3 Management of the Environment and Infection Prevention and Control

The home was observed to be clean and tidy. Patients' bedrooms were personalised with items that were important to them such as family photographs and ornaments. Communal lounges and dining rooms were welcoming spaces for patients. Patients could choose where to sit or where to take their meals and staff were observed supporting patients to make these choices.

Fire exits and corridors were observed to be clear of clutter and obstruction. The home's most recent fire safety risk assessment was completed on 22 June 2021. This assessment had corresponding evidence recorded of the actions taken in relation to the three recommendations made from the assessment. Fire safety training and fire safety drills were maintained on a regular and up-to-date basis for all staff.

There was evidence that systems and processes were in place to ensure the management of risks associated with COVID-19 infection and other infectious diseases, for example, the home participated in the regional testing arrangements for patients and staff.

Review of records, observation of practice and discussion with staff confirmed that effective training on infection prevention and control (IPC) measures and the use of PPE had been provided.

Staff were observed to carry out hand hygiene at appropriate times and to use PPE in accordance with the regional guidance. Staff use of PPE and hand hygiene was regularly monitored by the manager and records were kept.

Visiting arrangements were managed in line with Department of Health guidance.

5.2.4 Quality of Life for Patients

The atmosphere in the home was homely and relaxed with patients seen to be comfortable, content and at ease in their environment and interactions with staff. Staff were seen to offer patients options regarding, for example, where to eat their meals, if they wanted to take part in activities and if they preferred to spend time in one of the lounges or in their own bedroom.

Staff were seen to be attentive to patients needs including their social well-being. A programme of activities was in place with the activity co-ordinator.

The genre of music and choice of television programmes played in the home was appropriate to patients' preferences and this helped create the nice atmosphere in the home.

Staff recognised the importance of maintaining good communication with families, especially whilst visiting was disrupted due to the COVID-19 pandemic. Visiting and care partner arrangements were in place with positive benefits to the physical and mental wellbeing of patients.

Two visiting relatives spoke with praise and gratitude for this standard of care provided for and the kindness and support received from staff.

5.2.5 Management and Governance Arrangements

Mrs Patricia Deighan is the manager of Cornfield Care Centre. Staff were aware of who the manager of the home was and demonstrated their understanding of their own roles and responsibilities in the home and of reporting any concerns about patients care or staffs' practices.

There was evidence that a robust system of auditing was in place to monitor the quality of care and other services provided to patients. There was evidence of auditing across various aspects of care and services provided by the home. These audits were maintained in a detailed and up-to-date basis.

Review of the home's record of complaints confirmed that these were well managed. The manager confirmed that the outcome of complaints is used as a learning opportunity to improve practices and/or the quality of services provided by the home.

It was established that the manager had a system in place to monitor accidents and incidents that happened in the home. Accidents and incidents were notified, if required, to patient's next of kin, their care manager and to RQIA.

The home was visited each month by registered provider's representative (the operations manager) to consult with patients, their relatives and staff and to examine all areas of the running of the home. The reports of these visits were completed in detail and where action plans for improvement were put in place, these were followed up to ensure that the actions were correctly addressed. These are available for review by patients, their representatives, the Trust and RQIA.

6.0 Conclusion

Patients looked well cared for and spoke positively about life in the home. Staff were seen to treat patients with kindness and respect and to offer them choices about their care needs and how they would like to spend their day.

The home was clean and tidy. The environment was pleasant and welcoming for patients, staff and visitors. Staff responded to the needs of the patients and provided support in a timely way.

Based on the inspection findings and discussions held we are satisfied that this service is providing safe and effective care in a caring and compassionate manner; and that the service is well led by the management team

7.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Patricia Deighan, manager, as part of the inspection process and can be found in the main body of the report.



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