

# Random inspection report

## Care homes for older people

Name:	Middleton Hall Ltd
Address:	Middleton Hall Retirement Village Middleton St George Darlington Durham DL2 1HA

The quality rating for this care home is:	three star excellent service
The rating was made on:	

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

<b>Lead inspector:</b>	<b>Date:</b>							
Nicola Shaw	0	7	0	6	2	0	1	0

## Information about the care home

Name of care home:	Middleton Hall Ltd
Address:	Middleton Hall Retirement Village Middleton St George Darlington Durham DL2 1HA
Telephone number:	01325332207
Fax number:	01325332522
Email address:	debby@middleton-hall.com
Provider web address:	

Name of registered provider(s):	Middleton Hall Limited
Name of registered manager (if applicable)	
Mrs Debby Lamont	
Type of registration:	care home
Number of places registered:	77

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	77
physical disability	77	0

Conditions of registration:								
The maximum number of service users who can be accommodated is: 77								
The registered person may provide the following category of service only: Care home with nursing - Code N To service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Old age, not falling within any other category - Code OP, maximum number of places: 77 Physical disability - Code PC, maximum number of places: 77								
Date of last inspection								

### Brief description of the care home

Middleton Hall is a converted Georgian Manor house on the outskirts of Middleton St. George. The home is situated in extensive grounds and gardens that are accessible to the people living there.

The home provides residential and nursing care and offers a range of accommodation options. Service users have the choice of residential care apartments, studios and more traditional bedrooms, depending on their level of need.

Up to date information about fees should be sought from the home's manager.

## What we found:

Before this random inspection visit:

We looked at:

Information we have received since the last annual service review on 9th June 2009.

How the service has dealt with any complaints and concerns since the last visit.

Any changes to how the service is run.

The provider's view of how well they care for people.

The results of surveys. We received 2 from service users, 8 from staff and 1 from a visiting health care professional.

The visit:

An unannounced visit was made on 7th June 2010.

During this visit we:

Looked at information about the people who use the service and how well their needs are met.

Looked at other records which must be kept.

Checked that staff had knowledge, skills and training to meet the needs of the people they care for.

Checked what improvements had been made since the last visit.

We told the manager what we found at the end of the visit.

Health and Personal Care:

The home uses a range of risk assessments, including those that look at if a service user is at risk of malnutrition, falling or developing a pressure sore. It is from this information that the care plan is written. The service users care needs are discussed with them when staff write the care plans. Those we looked at provided clear information about the service users preferred routines, likes and dislikes as well as their health and personal care needs.

It is excellent to note that the home has a tissue viability nurse and dedicated nutritional nurse who are available to give advice and support. They also carry out monthly monitoring of any action plans that have been put in place. The number of falls are also closely monitored and detailed records are kept of these together with any action put in place to reduce them. There was written evidence to show how the number of falls had

reduced following action taken by the home.

The registered manager, who is the head of quality and care, has recently completed an audit of the care plans. As a result of this audit she has identified areas that need to be improved. In order to address this she has provided staff with additional training in a recent study day.

There is a keyworker system in place. The keyworker is allocated specific time, which is highlighted on the rota, to ensure that they can fulfill their role. This includes tasks like making sure the service users wardrobes and drawers are kept tidy.

The management team carry out regular audits of the medication to make sure that this has been administered to service users appropriately. Records are kept of this. Observations are also regularly carried out to make sure that staff administering medication are doing so in a safe, appropriate manner.

We spent time observing how staff supported service users. We found that staff were very respectful in their approach, treating the service users with dignity and respect. When they supported service users to walk, they did so at a pace that was comfortable for that person. Nobody was rushed. Staff got down to the service users level when talking to them and referred to them by their chosen name. The home also promotes the governments "dignity challenge".

#### Daily Life and Social Activities:

The range of activities available to the service users is excellent. Each service user has an individualised social care plan. This has been based upon information obtained from the service users and their relatives in the form of a social profile. Every 2 weeks it is the role of the keyworker to offer a service user an opportunity to have 1:1 time in an activity of their choice. This could involve a trip out in the the local community, or time just having a chat. The keyworker is given additional time to do this and records of the activity are maintained. There is also a social planner where a range of activities such as reminiscence, carpet bowls, film afternoons, and games such as play your cards right are offered. There is a spa and a gym. And the service employs personal gym instructors and beauty therapists. There is a beautiful well maintained garden which service users can independently use. This benefits from a pond, outdoor bowls green and recently a bird hide.

There is a coffee shop, bar area, library and a restaurant. Instead of relative meetings, which the manager said have proved to be unsuccessful, relatives and friends are invited for Sunday lunch, after which the management team make sure they are available for any issues relatives may wish to raise.

The home has its own transport for trips further afield.

At lunch time the tables were immaculately presented with table clothes, napkins and condiments. Before lunch there is a sherry club. There was a choice of main meal and pudding. Staff were very respectful in their approach to service users during this activity, offering support sensitively and discretely where needed. Staff also sat with service users to eat their lunch, which is excellent practice in dementia care as it may help some people with short term memory loss to retain their eating skills by the visual prompts

offered in this way. The catering staff told us that they regularly receive feedback about the meals provided and change the menu accordingly.

#### Complaints and Protection:

Service users and relatives told us that they would have no hesitation in making a complaint if they wanted to. We have not received any complaints about this care home. The manager told us that she treats all "niggles" as a complaint and acts quickly on all feedback in a positive way.

The management team provide all staff with annual safeguarding training, so that they understand the different types of abuse. There has been one safeguarding alert made, demonstrating that the staff know what to report and to where.

#### Environment:

The home was immaculately clean, well maintained with no unpleasant odours. The facilities provided are excellent. As we have already mentioned there is a spa, gym, beautiful well maintained grounds, a bowling green, hairdressing facility, restaurant (separate to the service users dining facilities) and a library. All bedrooms have en-suite facilities, many with fully accessible showers and some with baths.

The home has a plan to deliver best practice in infection control. And all staff have completed training about this.

#### Staffing:

The home is divided into different departments, each with its own manager and staff:

Middleton Court, which provides nursing care and is always staffed with a manager, registered general nurse and 4 care staff,

Middleton Gardens, which provides personal care, and is staffed with a manager and 3-4 care staff,

Middleton Grove, which provides minimal support, and always has a manager and 2 care staff on duty.

The staffing levels are appropriate to the needs of the current service users. They are kept under review by the manager in response to the changing needs of the service users.

In addition to on-going health and safety training and NVQ qualifications in care, additional training provided has included palliative care, diabetes and Parkinson's awareness. The nurse manager is responsible for co-ordinating staff training. And there is a training and development plan which is linked to the home's 5 year development plan.

There has been a low turn over in staff which is good for continuity of care.

#### Management:

The registered manager has many years experience of managing care homes. Service users and relatives confirmed that they would feel able to approach her if they had any concerns.

In addition to regular supervisions the management team also conduct "practical" supervisions where they observe practice.

The quality assurance systems in place are excellent. The views of service users are sought through satisfaction surveys, annual reviews and service user meetings. It is excellent to note that the manager has recently completed a training course so that she can carry out Dementia Care Mapping ( This is an observation method used in dementia care to find out if people with dementia, who may not be able to express their views through speech, are receiving a good service). The manager has used this observation method and talked to staff about what she found. As a result of this staff now sit with service users at meal times, a positive development.

There is a good process in place for monitoring the occurrence of accidents and incidents in order to prevent them from happening again.

Comments from service users included: "the carers on the whole are very helpful", "food-good choice for all meals, variety, plenty of activities to take part in, staff are excellent, no complaints, clean tidy, airy environment, satisfied with most arrangements".

When asked about what the service does well the health care professional commented:

"looking at the care needs of the individual and seeking further professional input as required". And staff said:

"food is excellent, residents well looked after, training is excellent",  
"it has high standards of care, its a lovely care home to work in" and  
"provides good quality care and living standards, keeps training up-dated".

### **What the care home does well:**

This service does well in all outcome areas.

The home offers extensive communal facilities with a range of accommodation to suit the different needs of the service users.

The range and variety of activities available to service users is excellent.

Record keeping is also good with excellent internal audits to make sure these standards are maintained.

A particular strength of the service is the management team who are committed to continuous quality improvement.

### **What they could do better:**

We did not make any requirements or recommendations as a result of this inspection. This is an excellent service with a management team who continually strive to think of

innovative and creative ways of continuing to improve the service.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

### Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations

## Reader Information

Document Purpose:	Inspection Report
Author:	Care Quality Commission
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

## Helpline:

**Telephone:** 03000 616161

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

© Care Quality Commission 2010

This publication may be reproduced in whole or in part in any format or medium for non-commercial purposes, provided that it is reproduced accurately and not used in a derogatory manner or in a misleading context. The source should be acknowledged, by showing the publication title and © Care Quality Commission 2010.