

North Yorkshire County Council

Carentan House

Inspection report

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Ratings

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 ●

Summary of findings

Overall summary

About the service

Carentan House is a residential care home providing accommodation and personal care to a maximum of 24 adults, some of whom are living with dementia. The service includes facilities to provide care on a short stay, respite or rehabilitation basis in the Homewards Unit. People staying on the Homewards Unit have additional care needs relating to improving mobility and independence.

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

People told us they felt safe and well supported. The provider followed robust recruitment checks, and sufficient staff were employed to ensure people's needs were met. People's medicines were managed safely.

Staff followed good infection protection and control standards and people said the service was clean and smelt fresh.

Staff had received training and development around management of dementia and demonstrated a good understanding of dementia care. They worked with people's individual strengths to ensure their independence, wishes and choices were promoted.

Communication was effective. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People enjoyed good food. Their health needs were identified, and staff worked with other professionals, to ensure these needs were met.

Staff knew about people's individual care needs and care plans were person-centred and detailed.

People participated in a range of activities within the service and in the community, they also enjoyed the company of others in the service.

People were able to see their families as they wanted. There were no restrictions on when people could visit the service. People were involved in all aspects of their care and were always asked for their consent before staff gave support.

The service was well-led; systems were in place to assess and improve the quality of the service and complaints were responded to thoroughly. There was an open culture and learning was encouraged to drive improvement.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 25 February 2017).

Why we inspected

This was a planned inspection based on the previous rating. We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Carentan House

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 Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Carentan House 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 CQC. 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 used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and two visitors/relatives about their experience of the care provided. We spent time observing the environment and the dining experience within the service. We

spoke with six members of staff including the registered manager, deputy manager, senior care staff, care staff and ancillary staff. We also spoke with two visiting health care professionals.

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

- The provider had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate training in this topic area.
- People felt safe, confident and happy when being supported by staff. A person said, "Oh yes I definitely feel safe here. The staff are lovely and make sure everything is okay. I see the manager walking around everyday and you can always speak with them if you need to."

Assessing risk, safety monitoring and management; Using medicines safely; Preventing and controlling infection; Learning lessons when things go wrong

- Staff identified and assessed risks; care plans contained guidance to support staff on how to safely meet people's needs. This included information on how to avoid restrictive practices and safely support people if they became anxious or upset.
- Accidents and incidents were recorded and responded to appropriately to ensure outcomes could be achieved and lessons learned. The registered manager monitored these to reduce the risk of reoccurrence.
- The environment and equipment were safe and maintained. Staff had completed fire safety and health and safety training, and emergency plans were in place to ensure people were protected in the event of a fire.
- Medicines were safely received, stored, administered and returned to the pharmacy when they were no longer required. Staff received medicine management training and competency checks were carried out.
- The service was well-maintained, clean and tidy throughout. Staff had received training and followed the provider's infection prevention and control policy and procedure to ensure people were protected from the risk of infections spreading.

Staffing and recruitment

- Staff were recruited safely and appropriate checks were carried out to protect people from the employment of unsuitable staff.
- There were sufficient staff on duty to meet people's needs, to enable people to take part in social activities and to attend medical appointments. People told us they received care in a timely way. One person told us, "There's always someone popping in to see if you're okay" and a visitor said, "The staff are brilliant. [My relative] receives the best care. Staff are attentive and cannot do enough for everyone."

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Assessments of people's needs were completed and care and support was regularly reviewed.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life. One relative said, "Staff treat everyone as an individual, care is different for each one and tailored to their needs."

Staff support: induction, training, skills and experience

- A comprehensive staff induction and training programme was in place. Staff were up to date with training that the provider deemed as mandatory. Specialist training based on people's specific needs had been completed. For example, dementia care and pressure ulcer awareness.
- Staff practice was monitored and assessed to ensure best practice was followed.
- Staff had access to regular supervisions and appraisals. The registered manager monitored these and ensured staff received feedback on their performance.

Supporting people to eat and drink enough to maintain a balanced diet

- People had access to a varied and balanced diet. They told us, "The food is fabulous" and "The food is well cooked and there is always a choice offered."
- People received fluids on a regular basis and staff made them a hot drink when asked.
- People's weight and nutritional intake were monitored by staff; appropriate action was taken if there were any concerns.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff monitored people's health and wellbeing and sought medical support when needed. Two visiting professionals told us, "The staff are interested and engaged in what they are doing; we have no concerns with their practice. The manager is very good and they all work well as a team. The care people receive is excellent and we are called out when needed."
- People and relatives were happy and satisfied with the care and support given by staff. One relative told us, "[Name] is thriving here. Since coming into the service, they have put on weight and are back to their old self."
- Information is recorded and ready to be shared with other agencies if people need to access other services.

Adapting service, design, decoration to meet people's needs

- The service was nicely decorated and well maintained and met the needs of people who lived there, including those people living with dementia. For example, coloured toilet seats were fitted to ensure people could see the facilities clearly.
- Appropriate equipment was in place to assist staff when moving and handling or supporting people with their care. This included specialist beds, hoists and sensor mats; which helped staff provide safe and effective care.
- People had access to outdoor space. There were two garden and patio areas, one to the side of the building and one central courtyard. Both had seating provided where people could enjoy the flowers and the fresh air.

Ensuring consent to care and treatment in line with law 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 Act 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 when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were routinely involved in decisions about their care; staff sought people's consent and supported them to have choice and control over all aspects of their support.
- People's rights were protected; staff assessed people's mental capacity and made best interest decisions when needed.
- Appropriate applications had been made to deprive people of their liberty.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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 supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People appeared comfortable and their personal care needs were met.
- People were happy and relaxed in the company of staff. A person said, "Staff know my likes and dislikes; I like to get up early in the morning and can walk around during the day. They respect my choices."
- The provider had a policy and procedure for promoting equality and diversity within the service and staff had received training on this.
- Staff treated people as equals. They showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way.

Supporting people to express their views and be involved in making decisions about their care

- People confirmed staff were always very polite and included them when making decisions about how they wanted their care provided. People told us, "Staff involve me in decisions about my care" and "I've been other places, and this is the best. They're very good at caring."
- For people who wished to have additional support whilst making decisions about their care, information on how to access an advocacy service was available from the registered manager. An advocate is an independent person who supports someone so that their views are heard, and their rights are upheld.

Respecting and promoting people's privacy, dignity and independence

- People were treated with compassion, dignity and respect. They told us staff addressed them by their preferred name, gave them eye contact when conversing with them and were always polite and respectful when in their company.
- Staff spoke with people in a caring and compassionate way. People were well looked after. A person told us, "It is lovely here. The manager and staff are wonderful, they are always around when you need them. We get everything we need to have a good life."
- People said staff were supportive in helping them to remain as independent as possible.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care plans and risk assessments were detailed, person-centred and up-to-date.
- Staff were knowledgeable about the people who used the service and displayed a good understanding of their preferences and interests, as well as their health and support needs. This enabled them to provide personalised care.
- People and their representatives were involved in reviews of care. This made sure care plans were current and reflected people's preferences as their needs changed.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People were supported to tell staff about their wishes and views; their care plans included detailed information about how they communicated.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People had a range of activities they could take part in. One person said, "We went out on a boat trip this year, that was absolutely marvellous."
- People were busy reading, chatting to staff about their hobbies and interests and spending time in the communal areas. One member of staff said, "Activities take place every day and we have enough time to do this."
- Relatives felt included in their loved one's life. A relative told us, "Visitors are made really welcome. I am able to make a coffee when I get here, just as I always did in my relative's own home. Staff offer me meals and biscuits. It is a lovely home, very welcoming and a pleasure to visit."

Improving care quality in response to complaints or concerns

- The registered manager acted upon complaints in an open and transparent way. They used any complaints received as an opportunity to improve the service.
- People and relatives told us the registered manager was open to receiving feedback and acted on their concerns. A person said, "I would always go to the manager or staff if I had a problem. They are quick to respond and do listen to you."

End of life care and support

- Staff were aware of good practice and guidance in end of life care and knew to respect people's religious beliefs and preferences.
- End of life care plans were in each care file and included details of people's wishes and choices in relation to this aspect of care.

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; 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 service benefited from having a registered manager who was committed to providing good quality care to people.
- People said the culture of the service was open, transparent and the registered manager sought ideas and suggestions on how care and practice could be improved. They told us, "I think the service is well managed" and "The registered manager is very approachable."
- The registered manager and staff understood their roles and responsibilities.
- Staff felt listened to and said the registered manager was approachable. They understood the provider's vision for the service and worked as a team to deliver high standards.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The service was well run. It was welcoming and friendly; people were treated with respect.
- The registered manager demonstrated an open and positive approach to learning and development. Robust systems and processes were in place to ensure the service was assessed or monitored for quality and safety. Audit results were used to improve the service.

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

- People, relatives, staff and health care professionals were asked for their opinions of the service. Meetings, satisfaction surveys and one to one discussion were used to gather feedback. This was analysed and followed up by the registered manager.

Working in partnership with others

- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.