

Endurance Care Ltd

# Rectory House

## Inspection report

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09 June 2017

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### Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 26 and 27 June 2016. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rectory House on our website at [www.cqc.org.uk](http://www.cqc.org.uk)"

Rectory House is a home that provides personal care and accommodation for up to 15 people with learning and physical disabilities. The home is currently used by male service users only.

There was a registered manager in post. 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.

At our previous inspection on 26 and 27 April 2016, the provider was in breach of Regulation 17 of the Health and Social Care Act 2008 (regulated activities) Regulations 2014. We found that records were not complete, accurate or contemporaneous. At this inspection improvements had been made and the provider was no longer in breach of this regulation.

There were effective auditing systems in place to ensure that people's records were kept up to date by staff. Audits were carried out in all aspects of the service to identify how the service could improve and action was taken as a result.

The registered manager was approachable and took an active role in the day to day running of the service. Staff were able to discuss concerns with the registered manager at any time and felt they would be addressed appropriately.

The registered manager had a good understanding of their responsibilities and was notifying the Care Quality Commission of any notifiable event.

People and staff were enabled to express their views on the running of the service. This included regular meetings, surveys and being involved with the interview process of new staff.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service well-led?

Good ●

Action had been taken to improve the auditing and record taking at the service. The registered manager carried out audits to identify any shortfalls within the service.

People's care records were up to date and complete.

Staff told us they felt supported by the registered manager.

People and staff were encouraged to give feedback through surveys and meetings.

# Rectory House

## **Detailed findings**

### Background to this inspection

We carried out an unannounced focussed inspection of Rectory House on 9 June 2017. One inspector carried out the inspection. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 26 and 27 June 2017 had been made. We inspected the service against one of the five questions we ask about services: is the service Well-led?

Before our inspection, we reviewed our previous report and the information we held about the service.

At this visit, we looked at the auditing and quality assurance records at the service, three people's care plans and environmental safety documentation. We spoke to two people living at the service, two members of staff, and the registered manager.

# Is the service well-led?

## Our findings

People and staff spoke positively about the registered manager. One member of staff told us, "The manager is very approachable and supportive." Another told us, "The manager is good and listens to everyone and acts accordingly."

At our previous inspection on 26 and 27 April 2016, the provider was in breach of Regulation 17 of the Health and Social Care Act 2008 (regulated activities) Regulations 2014. We found that records were not complete, accurate or contemporaneous. At this inspection improvements had been made and the provider was no longer in breach of this regulation.

The registered manager had effective auditing systems in place to ensure that people's records were being updated and there were no gaps. Each person's care records had a checklist that identified when reviews must take place and this was being completed by staff. We looked at three people's care records and daily records and found there were no gaps in the recording of data. Where required staff had completed records appropriate to a person's needs. One person's records had up to date checks on positioning, pressure care and mattress check. Another person's records had up to date food and fluid monitoring. We looked at the staff cleaning and night check records and these had been completed. The provider had completed regular audits on service support, health and safety, infection control and food and meal time audits.

People's confidential information was safely stored in a locked room at the service that was only accessible to staff. During our inspection people's confidential information was never left unattended.

The registered manager was seen to be open and transparent. There was an open door policy in operation. This allowed people living at the service and staff to approach the manager at any time with any concern they may have. Staff and people living at the service were observed approaching the manager during inspection. The registered manager knew each person who lived in the service and was sensitive to their needs. They were able to tell us about each person's needs, their preferences and how their care was delivered. This ensured a personalised service for people. Staff told us the registered manager was supportive and listened to them. One member of staff told us, "I felt confident to ask the manager if I could become X's key worker as I have been working on new activities with him. The manager was positive and we will see what happens." The registered manager had ensured that all notifications to the commission were made appropriately in line with the regulations. All the providers' policies were up to date and these were communicated to the staff team.

The registered manager told us, "The culture of the service is empowering and people focused. People choose how they want to live their lives. If someone does not want to do something that is okay and we will accommodate it." People living at the service were involved with the recruitment of new staff. The registered manager consulted people living at the service to provide three questions to ask potential new staff on interview and the outcome was fed back to them.

The provider ensured that people, relatives and staff voices were heard through surveys and meetings.

There was a resident meeting every month and a staff meeting every six to eight weeks. There was also a yearly survey carried out by an independent company and it recorded a 100% satisfaction survey and this result was published in the local press.

There were good links with the local community. People living at the service were free to go and use local services such as shops and public houses. People were free to go and pursue any activity that was accessible to them such as days out to the beach, football, horse riding, swimming and trampolining. Appropriate transport was provided to people so they could attend their chosen activities.