

Cumbria County Council

Marsh House

Inspection report

Victoria Road
Ulverston
Cumbria
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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

We carried out this inspection on 27 April 2017. The inspection was unannounced.

Marsh House provides accommodation and personal care for up to 28 older people. The home is in a residential area in Ulverston town centre. It is run by Cumbria County Council. The home is on two floors with most of the bedrooms upstairs and three sitting rooms with dining areas on the ground floor. Marsh House provides permanent accommodation for people and short-term respite care.

At the time of our inspection Marsh House was due to close as part of the restructure of residential care services in Furness. There were 14 people living in the home when we carried out our inspection.

There was a registered manager employed in the home. 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.

Our last comprehensive inspection of this home was carried out 29 January and 2 February 2016. At that inspection we found breaches of legal requirements. We found that people were not always safe because risks were not always managed effectively, there were times when there were not enough staff working in the home and the systems for assessing the safety and quality of the service had not been robust.

After the comprehensive inspection the registered provider wrote to us to say what they would do to meet legal requirements in relation to the breaches. At our inspection in April 2017 we looked at the actions the provider had taken and found that legal requirements had been met.

People were safe living in the home and there were enough staff to provide the support they needed. The staff spent time with people and treated them in a kind and caring way.

Hazards to people's safety had been identified and action taken to reduce and manage risks. The staff on duty were aware of how to support people to maintain their safety.

People enjoyed the meals provided and were supported to eat and drink enough to maintain their health.

Visitors were made welcome in the home and people were able to maintain relationships that were important to them.

People were provided with a choice of activities in the home and local community that they enjoyed.

The staff knew people well and were trained and competent to carry out their duties.

People were supported to maintain their independence and had been included in planning and agreeing to the support they received.

The principles of the Mental Capacity Act 2005 were followed and people's rights were protected. 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 received their medicines safely and as prescribed by their doctors. They were supported to access appropriate health care services to support them to maintain good health.

The registered provider had a procedure for receiving and managing complaints about the home. People knew how they could raise concerns about the service.

Safe systems were used when new staff were employed to check they were suitable to work in the home.

The home was well managed. People knew the registered manager and found her approachable and easy to talk to. The registered manager asked people for their views of the service and took action in response to their comments.

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.

People were protected from abuse and avoidable harm.

There were enough staff to provide the support people required.

Risks to people's safety had been identified and managed.

Is the service effective?

Good ●

The service was effective.

The staff in the home were trained and competent to provide the support people required.

People enjoyed the meals provided in the home and had a choice of meals and drinks.

People received support from appropriate health care services to maintain good health.

Is the service caring?

Good ●

The service was caring.

People were treated with kindness and in a caring way.

The staff knew people well and provided support promptly if they were anxious.

People were supported to maintain their independence and their privacy and dignity were respected.

Is the service responsive?

Good ●

The service was responsive.

People were included in planning and agreeing to the support they received. Care was planned and provided to meet people's needs.

There were no restrictions on when people could receive their visitors. People could see their families and friends when they wanted to and could maintain relationships that were important to them.

The registered provider had a procedure to receive and respond to complaints. People knew how they could raise any concerns about the service if they needed to.

Is the service well-led?

Good ●

The service was well-led.

People were asked for their views and action was taken in response to their suggestions.

People knew the registered manager and could speak with her if they needed.

The registered manager carried out checks on the service to ensure people received safe care that met their needs.

Marsh House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 27 April 2017 and was carried out by one adult social care inspector and an expert by experience. An expert by experience is a person who has personal experience of using or of caring for someone who uses this type of care service.

During our inspection we observed how the staff supported people and spoke with nine people who lived in the home and three of their visitors. We also spoke with a health care professional who was visiting the home, three members of the care team, two ancillary staff, the registered manager and the registered provider's operations manager.

We looked at the records relating to the care of five people. We also looked at staff recruitment and training records and records relating to how the registered manager and registered provider monitored the safety and quality of the service.

Before the inspection we reviewed the information we held about the service. We also contacted local health and social care agencies, who had knowledge of the home, to gather their views about the service.

Is the service safe?

Our findings

Everyone we spoke with told us that people were safe living at Marsh House. People who lived in the home told us, "I feel safe here" and said, "I feel safe, definitely". A relative we spoke with told us, "[My relative] is very safe here, I can't imagine it not being safe, never in a month of Sundays will it not be safe".

All of the staff we spoke with told us that people were safe living in the home. They showed that they understood their responsibilities to protect people from abuse and harm. One staff member said, "I'm sure people are safe, I've never seen anything that worried me". Another staff member told us, "I've had training in safeguarding [protecting people from abuse], I know what to look for and we have no concerns here, people are definitely safe".

At our last comprehensive inspection of the home in January 2016 we found that the safety of the service needed to be improved. We found that people had been placed at risk because there had not always been enough staff working in the home and risks had not always been identified and managed properly. We shared the concerns we had found with the registered manager of the home and she took immediate action to ensure people were safe in the home. The registered manager immediately increased the number of staff working in the home during the night and ensured hazards to people's safety were identified and managed.

At this inspection in April 2017 we saw that the actions taken to protect people had been maintained and the registered provider was meeting legal requirements.

People told us there were enough staff in the home to provide the care they required and to support them with activities of their choice. We saw that the staff had time to spend with people and that people who lived in the home enjoyed talking with the staff on duty. People told us that this was important to them. One person said, "The staff are friendly they always stop and have a chat". Another person told us the staff, "Always have time for us". A relative we spoke with told us, "There are always enough staff".

All of the staff we spoke with confirmed that there were sufficient staff deployed in the home to support people. One staff member told us, "There are enough staff here" and another said, "We have time to spend with people". We also saw this during our inspection.

Marsh House had been part of Cumbria County Council's consultation into the future provision of residential care in Furness. The home was due to be closed as part of the restructure of residential care services in the area. There were 14 people living in the home at the time of our inspection and we saw that the staffing levels were suitable to meet people's needs.

People were protected against foreseeable harm because risks to their safety had been identified and actions taken to reduce or manage risks. We saw that the staff knew how to support people in a discreet way to manage risks to their safety. The staff knew how to keep people safe without intruding on their right to make choices about their lives. Some people chose to attend activities on their own in the local community. We saw that their care records included information about how to maintain their safety while following

activities away from the home.

People told us that they received the support they required with taking their medicines. One person told us, "The staff look after my medicines and they know what I need and when". People who wished to were supported to manage their own medicines. There were systems in place for the staff to check people were able to do so safely.

Staff who handled medicines had received training to do so. We saw that records were kept of the medicines staff had given to people and there were systems to check that people had received their medicines as they needed them and as their doctors had prescribed. People who required assistance in taking their medicines received this in a safe way.

The registered provider used robust systems when new staff were employed to check that they were suitable to work in the home. New staff had to provide evidence of their conduct in previous employment and were checked against records held by the Disclosure and Barring Service, to ensure they were not barred from working in a care service. People who lived in the home could be confident appropriate checks were carried out before new staff worked in the home.

Is the service effective?

Our findings

People we spoke with made many positive comments about the staff who worked at Marsh House and about the care they provided. One person told us, "The staff are really good" and another person told us, "These girls [care staff] are marvellous, they really know their stuff".

All of the staff we spoke with told us they completed training to give them the skills and knowledge to support people who lived in the home. They told us they had completed training in supporting people at the end of life, supporting people living with dementia and the safe use of equipment. The records we looked at confirmed that the care staff had received appropriate training.

The registered provider had good systems for recording the training staff had completed and for identifying when training needed to be repeated. This helped to ensure the staff maintained up to date knowledge and skills. Throughout our inspection we saw that people were supported by staff who were competent and who knew how to support individuals.

All of the staff we spoke with told us they felt well supported by the registered manager and the supervisors employed in the home. They told us there was always a senior person available if they required advice or assistance.

People told us that they liked the meals provided in the home and said they were provided with a choice of meals and drinks that they enjoyed. One person told us, "I like the food here" and another person said, "The meals here are lovely".

People told us that they were able to request alternative meals to those on the menu and these would be provided. We saw that the meals provided during our inspection were well presented and people were encouraged to eat enough to maintain their health.

During our inspection we saw that people were given a choice of meals and were provided with hot and cold drinks and snacks throughout the day. People confirmed that the staff always provided drinks as they wanted. One person told us, "I get a cup of tea whenever I want" and another person said, "I always get a cup of tea when needed".

Some people required specialist support to ensure they could eat and drink safely and to maintain a healthy diet. People who required support had been referred to the speech and language therapist and dietician. This helped to ensure the staff had appropriate specialist advice to support people with eating and drinking.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA

People told us, and we saw, that the staff in the home asked people for their agreement before providing their care. People made choices about their lives and the staff respected the decisions people made.

The staff knew how to give people information to make their own decisions. We saw that the staff were patient and gave people guidance so they were able to make their own choices. This supported people to maintain control of their lives.

People told us that the staff in the home supported them to see their doctors as they needed. One person said, "The girls [care staff] always ask for my doctor to visit if I'm not well". Another person told us, "I see my doctor when I need".

Marsh House did not provide nursing care. People were supported by a range of local health services including the local district nursing team and specialist services such as mental health services and the speech and language therapist. A health care professional who was visiting the home told us they had always observed that the staff cared for people well. They told us the staff contacted them appropriately when people required support and acted on any advice they gave. People received support from appropriate health care services to maintain their physical and mental health.

Is the service caring?

Our findings

Everyone we spoke with was very positive about the caring attitude of the staff employed in the home and about the standard of care provided. One person told us, "All the staff look after me champion" and another person said, "I get well looked after here". People said they liked the staff and told us, "The staff are good they have a laugh with you".

People told us that the staff spent time with them and treated them in a caring way. One person said, "The staff are marvellous. They just love us and play games with us to keep us active".

We saw that the staff on duty knew the people they were supporting well and could identify if a person was feeling anxious. The staff gave people prompt assistance that supported their wellbeing. One person told us, "The staff know if I'm not feeling 'right', they sit and have a natter, it's amazing how that makes you feel better".

All of the staff we spoke with told us people were well cared for in the home. One staff member told us, "I'm happy that people are well looked after here, I'd be happy for my own relative to live here". Another staff member told us, "You've got to care".

The staff told us that they had time to spend with people who lived in the home. We saw a staff member sitting with an individual asking them about their family. One person was being cared for in bed and we saw the staff regularly went to see the individual to check they were comfortable and if they needed any support or assistance. People told us that this was "usual" for the home and said, "I have been really happy since I came here" and "They [care staff] look after me well".

People who lived in the home told us that the staff asked for their views about the care provided. They told us they had no concerns about how they were looked after and one person said they had, "no bother whatsoever". Throughout our inspection we saw that, as the staff carried out their duties, they asked people if they were happy and if there was anything they needed.

We saw that all the staff asked people what support they wanted and respected the choices people made.

People told us that the staff in the home supported them to maintain their independence. We saw that the staff gave people the time to carry out tasks themselves and gave guidance to people, as they required. One person told us, "I do a lot for myself" and another person said, "I put myself to bed". Some people used items of equipment to help them to move around the home independently. The staff knew the items that people required and ensured these were available when they needed them.

The staff in the home helped people to maintain their dignity and privacy. One person told us, "The staff protect your privacy". We observed that the staff knocked on doors to private areas before entering and assisted people to move to their own room or a bathroom if they required support with their personal care. People were supported to dress appropriately and looked well-groomed and well cared for. Some people

were preparing to go on a trip away from the home. We saw that the staff discreetly advised people on dressing appropriately to take account of the weather conditions.

Most people told us that, if they required support to express their views or wishes, they would ask a friend or a relative to assist them. Some people required support from an independent person to ensure their views about the proposed closure of the home and their choices about their preferred future accommodation were shared. The registered provider had ensured people were supported to access appropriate advocacy services to ensure their views and wishes were known. Advocates are people who are independent of the service who can support people to make important decisions and to help them to express their wishes.

Is the service responsive?

Our findings

People told us they liked living at Marsh House and said, "This is a nice place to live". They told us that they enjoyed a range of activities in the home and local community. One person told us, "I like my trips out" and another person said, "There's always something you can join in". One person said they preferred spending time on their own following activities they enjoyed such as reading. They told us this was their choice and the staff respected their decision.

People who lived in the home told us their families and friends could visit them "at any time". One person told us, "My visitors can come whenever they want". This was confirmed by the visitors we spoke with. One visitor told us, "We can pop in anytime we like". People were supported to maintain relationships that were important to them.

People told us that they were included in deciding what support they received and how they wanted this to be provided. Each person in the home had a care plan that gave guidance for staff on how to support them. We saw that people had signed their own care plans to show they had agreed to their support.

The care plans gave detailed information for staff to follow. We saw that they were reviewed regularly and changed if the support a person required changed. During the inspection we saw that the staff on duty knew people well and knew the choices people had made about their care. People received the support they required because the staff had accurate and up to date information about how to support individuals.

People told us that the service was responsive to their needs and wishes. One person said, "I can have breakfast in bed if I need". Another person told us, "The staff are brilliant, they turn their hand to anything it, doesn't matter what you want".

A visiting health care professional we spoke with told us that the staff responded appropriately if a person was unwell and required support with their health. They said the staff contacted them promptly and followed any guidance they gave.

The registered provider had a procedure for receiving and responding to any complaints about the service. A copy of the complaints procedure was displayed in the home and was available on Cumbria County Council's website. This meant information about how to raise a concern was available for people who lived in the home and their families. People who lived in the home and the visitors we spoke with said they had never needed to make a formal complaint. People told us that they would speak to a member of staff or to the registered manager if they had any concerns about the support provided. One person told us, "If I had to I would complain to [the registered manager], but I never had any reason to". Another person said, "I have no complaints".

Is the service well-led?

Our findings

Everyone we spoke with told us that this was a good home. People told us they valued the service and said, "This is a lovely place to live. I love my room and have a lovely view, I'm so sorry its closing". Another person told us, "It's a happy home here" and said the home had "a nice feel to it".

People told us they knew the registered manager and found her to be approachable. One person told us, "[The registered manager] has an open door policy and we can see her when we like". Another person said, "[The registered manager] is very nice and is easy to speak to". We also saw that people were confident approaching the registered manager and enjoyed laughing and joking with her.

All of the staff we spoke with told they felt well supported by the registered manager. They told us they could speak to the registered manager if they had any concerns about the service provided. One staff member told us, "I have no concerns but could speak to [the registered manager] if I did. Another staff member said, "I think we're a happy team".

People who lived in the home were asked for their views about the service. One person said, "[The registered manager] always asks if there is anything I want". Another person told us, "I help to decide where we go on our trips". Throughout our inspection we also saw that the registered manager and staff in the home asked people for their views including if they had enjoyed the activities and the meals provided.

The registered manager used formal and informal methods to gather people's views about the service provided. Regular meetings were held with people who lived in the home where they could make suggestions about how the service could be improved. We saw notes from the meetings that showed how action had been taken in response to people's comments. Some people had made suggestions for places they would like to visit and we saw that these had been arranged. We also saw that people had been reminded at the meetings that they could raise concerns or make suggestions, such as items they would like added to the menus.

People had opportunities to discuss the service with a representative of the registered provider who was not responsible for the day-to-day operation of the home. The registered provider's operations manager carried out regular visits to the home where they spoke to staff and people who lived there to gather their views. These visits helped the registered provider to maintain good oversight of the quality of the service.

The registered manager carried out regular checks on the quality and safety of the service. We saw completed checks that the registered manager carried out each month. These included checking the safety of the premises to ensure they remained suitable for people to use. Good systems were in place to check that care plans had been updated as required, to check medicines were handled safely and to ensure the premises were safe and comfortable for people to use. The systems used to assess the quality of the service had ensured people received safe care that met their needs.

Providers of health and social care services have to notify the Care Quality Commission of important events

that happen in their services. The registered manager had informed us of significant events as required, this meant that we could check that appropriate action had been taken.