

Adalah Residential Rest Home Ltd

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Adalah Residential Rest Home Limited is a care home providing personal care without nursing for 28 people some of whom maybe living with dementia. The service can support up to 30 people.

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

Systems and processes were in place to manage risks. People were supported with their medicines in a safe way. Staff had received appropriate recruitment checks on their suitability to work at the service and there were enough staff on duty to meet people's needs. Staff had received safeguarding training and knew what action they should take if they suspected or witnessed abuse.

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

There was a good atmosphere in the service and people and relatives were satisfied with the quality of care and support they received. Staff told us they felt supported by the management and the registered manager was approachable.

Systems were in place to monitor and improve the quality of the service. Audits of the premises helped ensure the premises and people were kept safe.

Why we inspected

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We carried out an unannounced comprehensive inspection of this service on 7 October 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Adalah Residential Rest Home Limited on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 well-led?

Good ●

The service was well led.

Details are in the well led findings below.

Adalah Residential Rest Home Limited

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Adalah Residential Rest Home Limited 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 the Care Quality Commission. 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 inspection

We reviewed information we had received about the service since the last inspection. We carried out a

monitoring activity where we reviewed and analysed information including that shared from the provider. We looked at feedback from the local authority and professionals who work with the service. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and four relatives about their experience of the care provided. We spoke with six members of staff including the registered manager. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records. We spoke with two professionals who regularly visit the service.

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 requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the management of medicines needed to improve. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Medications were administered, stored and disposed of safely. The team leader showing us the medicines had a very good knowledge of the medicines system.
- Medicines we checked including controlled drugs reconciled and were recorded appropriately.
- Topical medicines were recorded on the electronic care planning system. Senior staff were able to monitor this daily.
- Staff had received medicines training and their competencies were assessed.

Systems and processes to safeguard people from the risk of abuse

- People told us they were safe at the service. One person said, "I do feel safe and staff are very nice."
- Staff knew how to keep people safe and protect them from safeguarding concerns. Staff were trained and able to identify how people may be at risk of harm or abuse and what they could do to protect them. A staff member told us, "I would report anything to the senior, and if I was not happy, I would take it to the local council or CQC."
- The registered manager was aware of their responsibilities to liaise with the local authority and other relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- Risks to people's care had been assessed. Some risk assessments had not yet been transferred to the electronic care planning system. Following the inspection, the registered manager sent an action plan which recorded all risk assessments had been reviewed and transferred.
- The management and staff team completed checks to ensure the environment and the equipment they used was safe.

Staffing and recruitment

- Throughout our visit staff responded to people quickly. One person said, "They help me with everything I need, and they do come when I press my button."
- There were sufficient staff to meet people's needs. Throughout the inspection we saw there was enough

staff available to support people. One staff member said, "We do get time to spend with people as staffing is quite good."

- Staff were recruited safely. Recruitment records contained all the necessary checks including ID checks, full employment history and Disclosure and Barring Service (DBS) background checks which prevents unsuitable staff from working with people.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using personal protective equipment (PPE) effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Accidents and incidents were recorded along with actions taken at the time and afterwards to reduce the likelihood of them happening again.

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 requires improvement. At this inspection this key question has improved to good. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and their relatives spoke positively about the care and support they received. One person told us, "It is very nice, when I first came here, I found it very good. The staff are particularly good." Another person said, "They help me with everything I need and generally it is all good." A relative told us, "We are very impressed, it is clean and bright, and residents seem happy and well cared for." Another relative said, "They phone me about everything, and I still feel very involved. They make me feel so welcome when I visit."
- The provider gathered the views of people, relatives and staff through surveys. In addition, they held meetings with people and relatives to discuss the running of the service and to get their feedback.
- A recent staff survey recorded 100% of staff who completed the survey thought the service was committed to quality
- Throughout the inspection we noted there was a very relaxed atmosphere. People were listening to music and either singing along or tapping their feet. A staff member interacted with people in turn and involved them in either conversation or looking at reminiscence books.
- Staff felt supported by the management team and were positive about working in the service. One staff member said, "I feel it is like a second family and never dread coming to work. It is lovely to work here and a good group of staff." Another staff member said, "If I have a problem [registered manager] is approachable and I can talk to them."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 senior team were visible throughout the inspection.
- Quality assurance systems were in place to assess, monitor and improve the quality and safety of the service. The management team carried out regular audits which highlighted any concerns and areas for improvement to ensure the quality and safety of the service was maintained.
- The registered manager was aware of their responsibilities to provide CQC with important information and had done so in a timely way.

Continuous learning and improving care; Working in partnership with others

- The registered manager had spent time making links with health and social care professionals to ensure people living at the service got the best outcomes available. For example, linking with the local GP, district

nurses and relevant professionals to support people with any health needs. A relative told us, "Staff really understand [person's] dementia and the dementia nurse also visits and explains things to us."

- The local authority had completed an infection control assessment and an action plan was in place for any recommendations made.
- The registered manager was involved in various forums with other registered managers to share and keep up to date with best practice.