

Protea Care Homes (Kent) Ltd

Ruby House

Inspection report

78 Bushey Hall Road
Watford
Bushey
WD23 2EQ

Date of inspection visit:
03 April 2019
09 April 2019

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26 April 2019

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: Ruby House provides support to people living in their own bedsits within one building. The service supports younger adults, with a learning disability and or mental health conditions.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

People's experience of using the service: People and their relatives were positive about the care and support they received.

People received care which met their individual assessed needs. Care records included detailed information including how they wished to be supported. People were involved in their care planning.

Staff were committed to providing person centred care, supporting people to maintain their independence. People were kept safe and staff respected their privacy and dignity.

People were supported to take positive risks and were protected from harm and abuse. Staff were knowledgeable about safeguarding and how to support people to be safe.

Staff recruitment procedures were robust and included a range of pre-employment checks.

Staff told us they were well supported, received adequate training, supervision and competency assessments to enable them carry out their job roles effectively.

People were supported to access a range of healthcare professionals. Staff worked in partnership with healthcare professionals to ensure that people received holistic support.

People's consent was obtained, choices were respected, and people were supported in line with the Mental Capacity Act.

People were treated with dignity and respect and their privacy was maintained.

People were positive about the management of the service. Feedback was requested and used to help drive continual improvement.

The management team had worked hard to make the improvements required since the last inspection.

Rating at last inspection: Requires improvement (report published 21 May 2018)

Why we inspected: This was a planned inspection based on the rating at the last inspection. During this inspection we found evidence that the service had improved from an overall rating of requires improvement since the previous inspection to support the rating of good at this inspection. More information is in the full report.

Follow up: 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.

Ruby 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspector carried out this inspection.

Service and service type: Ruby house is a supported living service registered to provide personal care to people in their own home. The service is situated in Bushey and provides 24-hour care and support to people who live in their own bedsits.

On the day of our inspection five people were using the service.

The service had a manager registered with the Care Quality Commission. [The registered manager was not available at the time of the inspection]. 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: We visited Ruby house on 03 April 2019 and spent time speaking with staff and the operations manager. On the 9 April we spoke to people who used the service. We also visited the providers head office to review a range of records including staff recruitment files and training, care records and quality monitoring documents.

Before the inspection we reviewed all the information we held in relation to the service. We also reviewed all information received from external sources such as the local authority and professionals with experience of the service.

During the inspection we:

- We spoke with two people who used the service, we received feedback from two professionals, two

relatives, two care staff, the deputy manager and the operations manager.

- We reviewed two care records including risk assessments.
- We reviewed two staff recruitment files including. We looked at documents in relation to supervisions, and training records.
- We looked at a range of quality assurance records, including recording of accidents, incidents and complaints.
- Policies and procedures relating to the quality and safety of the service.
- Audits, surveys and minutes of staff meetings.

Following the inspection, we received further information from the operations manager to demonstrate compliance with the regulations.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe at the service. One person told us, "I feel safe living here, because there are always people and staff around."
- Staff demonstrated that they knew the process they would follow if they had any concerns in relation to harm or abuse. One staff member told us, "I would not hesitate to report any concerns. There is information around the service which is a constant reminder of the process and the relevant contact numbers."
- Staff received training in safeguarding and it was discussed at team meetings. There was a policy of the month system in place, where staff were required to familiarise themselves with the policy and sign to confirm they had done this. We saw that safeguarding had recently been the policy of the month.

Assessing risk, safety monitoring and management

- People had individual personal risks assessed. Any risks identified had measures in place to mitigate and or reduce the risk. These were reviewed annually or when there were changes in people's health and wellbeing.
- Risks assessed included activities in the home and community, some with staff and some independently. We saw risk assessments for people going out, taking their medicines independently, and personal safety.

Staffing and recruitment

- The provider had robust recruitment procedures and checks to ensure that staff were suitable to work at this type of service.
- The operational manager had recently completed a review of all staff recruitment files to ensure all pre-employment checks had been completed and were consistent. This included a disclosure and barring check [DBS] and taking up references.
- Staff told us that they felt there were enough staff to meet people's needs. We saw from rotas that staff were deployed effectively. People's level of dependency were assessed to include people's activities and commitments and were adjusted accordingly.

Using medicines safely

- People were supported to take their medicines safely.
- Staff received training and regular competency assessments when administering people's medicines. Staff demonstrated they knew how to administer medicines safely.
- People who took as and when needed medicines [PRN] For example, pain relief, had clear protocols in place for the administration of these.
- Regular audits of medicines were completed. Any problems identified were addressed quickly.

Preventing and controlling infection

- Staff told us they had implemented regular and improved cleaning schedules following the last inspection.
- People's flats were kept clean and people told us the staff supported them with cleaning tasks.

Learning lessons when things go wrong

- Accident, incidents and events were recorded when they occurred. They were reviewed and monitored to help prevent a reoccurrence.
- The operation manager was aware of the need to notify CQC of incidents for example medicine errors or recording omissions.

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

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

- People's needs were assessed prior to them coming to live at Ruby House and were kept under regular review. Assessments included detailed information about how people liked to be supported.
- People's assessments covered all aspects of their care including their preferences, activity plans and daily routines.
- People's care, and support plans were person centred and included a range of risk assessments.
- People confirmed they were involved in planning and review of their care.

Staff support: induction, training, skills and experience

- Staff told us they were well supported and received training in areas relevant to their roles. This included training in topics such as the Mental Capacity Act. Safe administration of medicines and safeguarding.
- Staff demonstrated a good understanding of these topics. Records confirmed that regular refresher training was provided when required.
- Staff received an induction to the service which covered a range of topics as well as familiarising themselves with policies and procedures. Staff shadowed more experienced staff to help them settle into their roles and get to know the people they supported.
- Staff received supervision, attended team meetings and had their competency observed to ensure that they had the knowledge to perform their job roles safely and effectively.

Ensuring consent to care and treatment in line with law and guidance

- The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible. We checked whether the service was working within the principles of the MCA and found that it was.
- People told us that staff obtained consent when supporting them. We saw that people had confirmed their agreement to their care plan by providing signed consent.
- Staff received training in the Mental Capacity Act and had a good understanding of how this impacted their roles.

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

- People were supported to plan, shop for and cook their own meals. They were provided with information to help them make informed choices about healthy options.

- People were able to choose when and where they wanted to eat. One person told us, "I enjoy getting a take away. We get one most weeks."
- People's dietary needs and requirements were monitored to ensure they remained healthy. People were weighed only if there were concerns about their weight.
- Staff told us that if they had any concerns they would refer people to professionals such as a dietitian.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to access a range of healthcare professionals when required for example the community mental health team, GP's healthy eating professionals, dentists and opticians as well as having annual check-ups.
- Detailed records of people's health appointments were used to update care plans where necessary.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked closely with other professionals involved in the overall care and support of the people who lived at Ruby House. This included regular contact with dentists, opticians and GP's.

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

- People were encouraged and supported to choose the decoration for their own bedsits. People showed us how they personalised their personal space. The communal areas had been decorated since the last inspection and people told us they had been fully involved in choosing the colours.

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

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

Ensuring people are well treated and supported; equality and diversity

- People were cared for by staff who were kind, caring and compassionate. Staff communicated with people in a respectful manner and took the time to listen to what people had to say.
- People and their relatives were positive about the support. One family member told us, "The staff are professional and caring towards the residents they show much more respect for the residents and their care needs and I feel that they listen to the ladies. They [Staff] are patient, and kind."
- People told us staff spent quality one to one time with them during meetings with their keyworkers.
- Staff were committed to providing quality care to people and knew people's individual likes and dislikes well.
- People's religious and cultural beliefs were discussed as part of the assessment process and any beliefs were taken into account and respected by staff supporting them. For example by supporting people to observe special religious festivals.
- People's care records were written in a respectful way and provided good quality information so that all care staff were up to speed with people's daily support.

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

- People told us they could not remember whether they had been involved in developing their support plans but thought they had discussed them with key staff.
- Care plans had been signed to confirm people's agreement to their support plans. Relatives and professionals where appropriate were involved in people's care reviews.
- People were helped to make informed choices about their care. One person told us, "We discuss how I like my support and when I want to go out and what I want to do. I am involved and like the staff who support me."
- One family member told us, "The atmosphere in the home seems much happier and welcoming, [Name] seems much more settled and likes the staff at Ruby House." They told us, "I asked [Name] recently who their favourite staff member is, and they said, 'I like them all', this is a massive improvement."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected by staff. One person told us, "The staff don't come in my room unless I tell them it's ok to come in. They always knock and respect my privacy. We all have our own keys and can lock our doors if we want."
- People were happy that staff promoted their independence and told us, "I am hoping to eventually move into my own flat where I will be even more independent. They do help with cleaning and cooking and anything else we need support with."

- People were supported to access advocates when required. One person told us "I am going to see an advocate soon as I need to get some independent advice. I know that I can discuss anything with my keyworker but if I need additional support I would speak to an advocate."
- People's confidential information was kept secure and staff were aware that sensitive and personal information should be accessed only by people who have a right to view it. We observed staff also talking quietly with people when other people were present to maintain confidentiality.

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received care tailored to their individual preferences and needs.
- People's care was flexible and met their changing needs. For example, if there was a decline in people's mental health and they required additional support this was accommodated by staff.
- People were supported to take part in a range of activities both at the service, in the community and by attendance at various day care services.
- People told us they enjoyed the activities. One person told us, "I enjoy going out with my friends, sometimes we go out for something to eat."
- People told us the activities had improved since the last inspection and they were now happy with each person having an individual activity plan. This was discussed and planned in weekly keyworker sessions.
- People's care plans contained detailed information providing staff with sufficient information to enable them to support people the way they liked.

Improving care quality in response to complaints or concerns

- The service had a complaints and compliments policy in place and this was available in a pictorial version to help people if they needed to raise a concern.
- People and their family members told us complaints were responded to promptly and to the complainant's satisfaction.
- The operations manager told us they actively encouraged people to raise concerns and viewed complaints as an opportunity to make improvements.

End of life care and support

- No one at the service was being supported with end of life support at the time of our inspection. However, the operations manager told us if this became a need, staff would receive appropriate training to enable them to support people effectively. Staff would work in partnership with other professionals to support people.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The management team and care staff had a good understanding of their regulatory responsibilities. During our inspection, we observed an open transparent and inclusive atmosphere at the service and people looked relaxed engaging with staff who knew them well.
- The operations manager had undertaken a lot of developmental work since the last inspection which had included making the required improvements. This included the development and implementation of systems and processes to ensure a consistent approach across the service.
- People told us they felt that things had improved since the last inspection. One relative told us, "I have not always been happy in the past but now I can honestly say that Ruby House in my opinion has definitely made massive strides in the right direction."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The management and staff team knew their job roles well and felt that recent improvements had given people more confidence in their roles. One staff member told us, "I feel valued and my opinion is sought. I think this has helped develop me in my role and as a person."
- Audits were completed regularly which enabled the operations manager to address any areas they identified where there were shortfalls. Audits included a review of recruitment records, care plans, medicines records including medicine administration records MAR charts. We saw that these audits identified issues such as a need for a risk assessment to be updated and these were actioned in a timely way.
- The operations manager reported all notifiable incidents and sought regular advice from CQC when required.
- Senior staff were available in the event of an emergency, for example if staff went off sick at short notice senior staff were available to support the service. There were contingency plans to keep the service operational if the registered manager was unavailable.

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

- People and their relatives were very positive about the management of the service.
- Staff were also positive about the management of the service and told us they felt that 'sustainable improvements to the service had improved relationships and outcomes for all involved'. Staff told us, "We work much more as a team now and there is definitely a better atmosphere."
- Regular feedback was obtained from people and their relatives through completion of questionnaires.

Staff also spent one to one time speaking to people to check if they were happy with the quality of care they received. One person told us, "We all attend the meetings with staff and are asked our views about all aspects of the service. I do feel involved."

Continuous learning and improving care

- The operations manager showed us the action improvement plans which included improvements to various parts of the service. These improvements had been identified through completion of regular audits and feedback from people and staff.
- People and staff told us that the operations manager was approachable and listened to what people had to say. Staff also told us they felt very well supported.
- The operations manager told us how they learnt and shared learning through attendance at a local care providers forum and workshops. For example, Information sharing for staff is improved since the implementation of the 'Bog Blog' This includes info on MCA, The KLOEs, and Cervical cancer.

Working in partnership with others

- The operations manager told us how they worked in partnership with many professionals involved in supporting the people who lived at Ruby House. This helped achieve improved outcomes for people. For example, with the community mental health team [CMHT] when there was a decline in a person's mental health staff worked closely with social workers which supported a joined-up approach which helped to support people in a holistic way.
- We received positive feedback from a professional involved with the service who told us that they felt the service embraced a partnership working ethos.
- The operations manager told us that they were well supported by the provider, and this had been positive in making many of the improvements which had been achieved since the last inspection.