

Elpha Lodge Residential Care Home Limited

Stonehaven Residential

Care Home

Inspection report

The Willows
Red Row
Morpeth
Northumberland
NE61 5AX

Tel: 01670760692

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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

Stonehaven Residential Care Home provides care, support and accommodation for up to three people with a learning disability. At the time of the inspection there were three people living at the home.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People and relatives spoke positively about the staff and the care provided. One person told us, "I'm happy here. The staff are nice to me." A relative said, "You couldn't wish for better."

There were systems in place to protect people from the risk of abuse. People appeared relaxed and comfortable with staff. There were enough staff deployed to meet people's needs. Safe recruitment procedures were followed.

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.

People had choice and access to sufficient food and drink. Staff supported people to buy and prepare meals. People were supported to have access to a range of healthcare professionals to help ensure they remained healthy.

People were treated with kindness. Relatives said that staff were like family and commented on how homely Stonehaven Residential Care Home was.

People's care was developed around their wishes, preferences and goals. Social events were organised with the provider's other services which people from Stonehaven Residential Care Home enjoyed attending. These joint events increased people's social networks and helped promote friendships.

People and relatives were positive about the home. One relative said, "It's very clean, comfortable and satisfying in every aspect. The rooms are lovely and they get healthy food." A range of audits and checks were carried out to monitor the quality and safety of the service.

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

Rating at last inspection and update

The last rating for this service was good (published 12 July 2017).

Why we inspected

This was a planned inspection based on our inspection programme.

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 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.

Stonehaven Residential Care Home

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

The inspection was carried out by one inspector.

Service and service type

Stonehaven Residential Care Home 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 who was registered with CQC. A registered manager 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

We gave a short period of notice of the inspection since the home was small and people were often out with staff in the local community.

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 also contacted Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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 all three people, the registered manager, a senior care worker and a care worker. We reviewed a range of records. This included one person's care plan and medication records for all three people. We looked at one staff file in relation to recruitment. We reviewed a variety of records relating to the management of the service.

After the inspection

We contacted two relatives by phone and emailed a fire safety inspector from Northumberland Fire and Rescue Service for their feedback.

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 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

- There were systems in place to help protect people from the risk of abuse. People appeared comfortable and relaxed with staff.
- Staff were knowledgeable about what action they would take if abuse were suspected. No safeguarding concerns were raised by staff during our inspection.

Assessing risk, safety monitoring and management

- Risks were assessed and monitored.
- Checks were carried out to make sure the premises were safe. The registered manager was liaising with a fire safety officer from Northumberland Fire and Rescue Service following a change in one person's mobility. This was to ensure the person could be evacuated safely in an emergency.

Staffing and recruitment

- There were enough staff deployed to meet people's needs.
- Safe recruitment procedures were followed. People were involved in staff interviews so they could give their opinion on the suitability of prospective staff.

Using medicines safely

- Medicines were managed safely. We identified minor recording shortfalls which the registered manager told us would be addressed.

Preventing and controlling infection

- People were protected from the risk of infection. The home was clean and well maintained. People were involved in helping keep their rooms clean.

Learning lessons when things go wrong

- Accidents and incidents were recorded and monitored to identify if there were any themes or trends, so action could be taken to reduce the risk of any reoccurrence.

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.

Staff support: induction, training, skills and experience

- People were cared for by staff who were trained and supported. One relative said, "They are fantastic, they do everything by the book."
- Staff told us and records confirmed that they had completed training to help ensure they could meet people's needs.
- Most of the staff had worked at the home for a number of years. This experience contributed to the skill with which they carried out their duties.
- Staff told us they felt supported. There was a supervision and appraisal system in place.

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

- People had a choice and access to sufficient food and drink. Staff supported people to buy and help prepare their meals. We heard how one person made the best Yorkshire puddings. This person told us, "[Name of registered manager] can't make Yorkshire puddings but mine are big uns [ones]."

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

- People were supported to have access to a range of healthcare professionals to ensure they remained healthy.
- People received a learning disability annual health check with their local GP surgery and had a hospital passport. The information recorded in a hospital passport helps staff in hospitals and GP surgeries to make reasonable adjustments to support safe and effective care for people with learning disabilities.

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. When people receive care and treatment in their own homes, an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

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.

- Consent to care was sought in line with legal requirements.
- The registered manager had submitted DoLS applications to the local authority appropriately.
- Documentation relating to the MCA did not always record which health and social care professionals had been involved in best interests decisions. The registered manager told us that this would be addressed.

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

- People's needs were assessed and care plans were formulated to document what actions staff needed to take to meet people's needs.

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

- People lived in a homely environment which met their needs. A new ramp had been ordered for the back entrance so people could access the garden easily and safely.
- The bath was not being used. Staff told us and people confirmed that they preferred a shower.

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 were treated with kindness.
- People and relatives spoke positively about the caring nature of staff. One person said, "The staff are my friends." A relative said, "[Name of person] has the best care."
- People appeared relaxed in the company of staff. One person reached out to hold a staff member's hand and gave another staff member a hug.
- Staff were knowledgeable about people and their likes and dislikes. One staff member said, "We are such a small care home with three residents, we know everything about them."

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

- Staff supported people to be involved in and agree decisions about their care. A staff member told us, "The residents are involved with everything. At the end of the day it is their home and they should always have an input."
- A key worker system was in place. Monthly meetings took place to obtain people's views about their care and support. One person told us, "[Name of staff member] is my one to one key worker. He knows a lot about me."

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity.
- Housekeeping skills were encouraged to promote people's independence.

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 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

- People's care was developed around their wishes and preferences.

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.

- Staff followed the AIS. Information was available in accessible formats. Easy read documents had been produced using pictures for people who could not understand the written word.

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's social needs were met. One person told us, "I don't get bored, I used to get bored before I came here."
- Social events were organised with the provider's other services which people from Stonehaven Residential Care Home enjoyed attending. These joint events increased people's social networks and helped promote friendships.

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place. This needed updating. The registered manager told us that this would be addressed immediately. No complaints had been received.

End of life care and support

- No one was receiving end of life care at the time of the inspection. The registered manager told us that previous end of life care discussions had taken place with people. Staff had recognised however, that it had not been the right time for people to discuss their wishes because they had not fully understood the point of the conversation and had become emotional. They explained that this decision would be reviewed in the future.

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

- People and relatives told us that Stonehaven Residential Care Home was a happy home where people achieved good outcomes. One person said, "I like living here 'cos it's nice here. This is my home now."
- Staff said they enjoyed working there and said they felt valued. One staff member said, "I absolutely love it here. it's one of those jobs where you never think, ughhh, I have to go to work today."

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

- The registered manager understood their duty of candour responsibilities. They had submitted notifications of specific events in line with legal requirements.
- A range of audits and checks were carried out to monitor the quality and safety of the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People and staff were actively involved in all aspects of the service.
- Meetings and surveys were carried out to obtain feedback from people, relatives and staff. Action was taken if any issues were raised.

Working in partnership with others

- The home had close links with a local charitable care organisation and with the provider's other care homes. Staff liaised with health and social care professionals to make sure people received joined up care which met their needs.