

Runwood Homes Limited

Carolyn House

Inspection report

Waterson Road
Chadwell St Mary
Essex
RM16 4LD

Tel: 01375843756

Date of inspection visit:
23 August 2017
29 August 2017

Date of publication:
20 September 2017

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

Carolyn House provides personal care and nursing accommodation for up to 52 people. The home is managed on two levels with the ground floor offering nursing care and the first floor offering accommodation and support to people in older age who may be or may not be living with dementia. The service has access to both floors via a passenger lift.

The manager at the service had been in post for five months and was going through the registration process with the CQC. They had completed all the relevant documentation and were waiting for the CQC registration team to contact them with a date for their fit person interview. 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 the last inspection the service was rated as Good.

The service was safe. Staff showed a good knowledge of safeguarding procedures and were clear about the actions they would take to protect people. People were kept safe and risk assessments had been completed to show how people were supported with everyday risks. Recruitment checks had been carried out before staff started work to ensure that they were suitable to work in a care setting. There were sufficient numbers of staff on duty and this was regularly monitored and reviewed. People's medication was well managed and people received their medication as prescribed.

The service was effective. New staff completed an induction and staff were offered on going training to help ensure they had the skills and knowledge required for their role as a care worker. They also received regular support and told us they felt well supported by management.

People were supported to be able to eat and drink sufficient amounts to meet their needs. They told us that the food was good and said that they were able to choose alternatives if they were not happy with the choices offered on the menus. People were supported to maintain good healthcare and had access to a range of healthcare providers such as their GP, dentists, chiropodists and opticians. The service kept clear records about all healthcare visits.

The service was caring. People were treated with dignity and respect and staff provided care in a kind, caring and sensitive manner. Meetings had been held for the people living at the service, relatives and for the staff. People felt listened to and that their views and opinions had been sought and the service had made appropriate improvements.

The service was responsive. Detailed assessments had been carried out and care plans were developed around people's needs and preferences. The service had a clear complaints procedure in place which was clearly displayed. This provided information on the process and the timespan for response.

The service was well-led. Staff, relatives and those living at the service spoke positively about the new manager and they felt the service was well managed. There were systems in place to regularly assess the quality of the service and that people were kept safe.

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 remains Good

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good

Is the service responsive?

Good ●

The service remains Good

Is the service well-led?

Good ●

The service remains Good

Carolyn 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 checked 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 was an unannounced comprehensive inspection and took place on the 23 and 29 August 2017. The inspection was undertaken by two inspectors on the first day and one on the second.

Before the inspection we reviewed the information we held about the service. This included notifications, which are documents submitted to us to advise of events that have happened in the service and the provider is required to tell us about. The provider also completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan what we were going to focus on during our inspection.

During our inspection we spoke with the manager, deputy manager, regional operation manager, and seven members of the care team. During the inspection visit we spoke with ten people who lived at the service and six visitors for their views about the service. We also asked the manager to approach relatives who could be part of the inspection process and we received 11 letters from relatives and friends and where possible we have added their comments within the report.

Not everyone who used the service were able to communicate verbally with us. Due to this we observed people, spoke with staff, reviewed records and looked at other information which helped us to assess how their care needs were being met. We spent time observing care in the communal areas and also the dining room. We used the Short Observational Framework for Inspectors (SOFI). This is a specific way of observing care to help us understand the experiences of people who are unable to talk to us due to their complex health needs.

As part of the inspection we reviewed four people's care records. This included their care plans and risk assessments. We looked at the files of four staff members, which included their support records. We also

looked at a sample of the service's policies, their audits, the staff rotas, complaint and compliment records, medication records and training.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse and risks to people's safety as at the previous inspection, and the service's rating continues to be Good.

People living at the service and their visitors all reported that the home was a safe and caring place to be. One person added, "[Person's name] feels safe and secure in what they and the family regard as their home." Another added, "We know dad is safe here and even he says that he feels safe."

Staff we spoke with knew what action to take if they had any concerns and how to protect people from abuse and avoidable harm. Care staff had received regular training and were aware of their responsibilities and how to take appropriate action if they had any concerns. The service had systems in place to help protect people from potential harm and this included a whistle blowing procedure for staff.

People's care plans included assessments of risks and how these could be reduced to help keep people safe. People were supported to take risks and where possible encouraged to make choices and decisions during their daily lives. Risk assessments were in place for falls, pressure care, mobility and weight. Systems were in place to record and monitor incidents and accidents and these had been regularly monitored and reviewed by the manager and registered provider. Pressure care was very good and regular checks had been made on pressure relieving equipment. The service only had one person with a pressure sore and this was improving. Falls analysis was also in place and this helped to monitor people's falls and ensure these were monitored so that appropriate professional assistance could be gained if needed.

Regular checks had been completed to help ensure the service had been well maintained and that people lived in a clean and safe environment. Appropriate monitoring and maintenance of the premises and equipment had been on-going and the building had been well maintained. Relevant certificates were in place for electric, gas and legionella. Relatives can people confirmed the place was well maintained with one person adding, "[Person' name] room is always spotlessly clean, as are all communal rooms and areas within the home."

The manager had arrangements in place to monitor people's level of dependency and to identify the number of staff needed to provide people's care. This included a number of systems to gain an accurate assessment of their dependency needs. The manager added that the assessing of staffing levels was an ongoing process and during our inspection we noted that there were sufficient care staff available to meet people's individual needs. Also due to people's needs changing the service had recently increased the staffing at night by one person. People were seen to be well supported and we saw good examples from care staff where people were provided and assisted with care promptly when they needed it. Staffing rotas were viewed and these were updated to ensure the information recorded was easy to read and included all the information required.

The service followed correct recruitment practice and ensured relevant checks had been completed on all new staff. We viewed the files of the last four recruited staff and these contained the required

documentation. The service also had a probationary period in place and a disciplinary procedure, which could be used when there were concerns around staff practice, which would help to keep people safe.

People had received their medicines safely and as prescribed. Medication had been administered, stored safely and recorded in line with the service's medication policy. Regular audits had been completed and staff had attended regular training and received annual competency checks. They kept records of medicines that had been destroyed or returned to the pharmacy, which helped to ensure that all medicines could be safely accounted for. Both fridge temperatures and room temperatures had been regularly monitored and found to be in line with recommendations. The medication room was found to be clean and tidy and in line with infection control requirements. Clear details could be found for those staff who could administer medication and also those who had received first aid training.

Is the service effective?

Our findings

At this inspection we found staff had the same level of skills, experience and support to enable them to effectively meet people's needs as we found the previous inspection. People continued to have freedom of choice and were supported, where appropriate, with their health and dietary needs. The service's rating continues to be Good.

Newly recruited staff had completed an induction and this included information about the running of the service and guidance and advice on how to meet people's needs. When appropriate new staff would complete the Care Certificate, which is recognised qualification and induction into care.

Staff had received support through one to one sessions, meetings and appraisals. Systems were in place to help ensure staff received supervision in line with the company's policy. Staff confirmed they received regular support and added that felt supported by the management and the care team managers, and could ask for support and advice at any time. Staff we spoke with confirmed they had received regular training and felt they had the knowledge and skills to carry out their roles and responsibilities as a care worker. They had also been provided with specialist training relevant to the people they provided care and assistance to. One staff member added, "They have very good training. They let us know in time and will not use us on a shift if it is out of date."

The service also had access to the company's dementia team who supported the service and would visit and offer support and make suggestions to improve people's lives. This included advice and support to ensure the lunch time meal experience was positive and any improvements that could be made. Training had also taken place to give both nursing and care staff the opportunity to use equipment that affected their vision, dexterity and mobility; so they were personally aware of the how it may feel to have dementia and the difficulties and anxieties this could cause. Staff spoken with stated they found this experience very 'helpful.'

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA) 2005. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether staff were working within the principles of MCA and DoLS. We found the manager had a good understanding of MCA and DoLS and had made appropriate referrals. Staff we spoke with demonstrated an awareness of the MCA and DoLS and confirmed they had received training. This showed that staff had up to date information about protecting people's rights and freedoms. People's capacity to make day to day decisions had been assessed to help ensure they received appropriate support, but the paperwork used to record this could be clearer. Feedback from one health care professional included, "We have worked closely together, particularly in relation to Mental Capacity Assessments and I have always been impressed by their commitment to the residents, which has been the foundation for good care standards in the time I have known them."

People were supported to have sufficient to eat and drink and maintain a balanced diet. Staff had a very good understanding of each individual person's nutritional needs and how these were to be met. People's

nutritional requirements had been assessed and their individual needs were well documented and included their likes, dislikes, dietary or cultural needs. There were nutrition and weight charts in place to enable care staff to regularly monitor people and this included clear visual records of weight gain and loss. Where risks had been identified or where people required assistance from a nutritionist or healthcare professional this had been gained. There was good evidence of where staff had worked with the speech and language therapist (SALT) to ensure people received the right textured food to help assist with their swallowing and also adding thickener to drinks; furthermore this had been regularly reviewed and changed when needed.

We completed an observation of a lunchtime meal and found the food looked very appetising, was hot and feedback included, "Lovely food," "I really like the food, I can have a choice of drinks" and, "I can have what I like if I don't want what is one the menu." Those people who needed assistance were provided with this appropriately and with dignity and respect.

People had been supported to maintain good health and had access to healthcare services and received on going support. Referrals had been made to other healthcare professionals when needed and this showed that staff supported people to maintain their health whilst living at the service. Relatives were positive about the care and support people received with one saying, "[Person's name] had been a resident at Carolyne House for over four years. In this time I have never had any cause for concern or complaint regarding their welfare. Whenever they have had any issues regarding their health these have been identified always in a friendly manner and appropriate action taken." Another added, "I would like to say how helpful the staff are. They are always happy to answer my questions. [Person's name] had always been treated with care and her needs are always taken care of and they are safe."

The service provided nursing care and those who received assistance were positive and stated they received the support and care they needed. Examples were provided where people's health had improved due to receiving regular diabetic monitoring or helping people to be more mobile and they were now independent using a walking frame.

Is the service caring?

Our findings

At this inspection we found people were as happy living at the service as they had been during our previous inspection. The service's rating continues to be Good.

One relative told us, "After looking at a lot of nursing homes, this was by far the best one. The staff are very caring and friendly." People were seen to be relaxed with staff and given the time and support they needed. Care was provided with kindness and compassion and people had regular contact from staff during our inspection to ensure they did not need anything and were comfortable. People were observed with care staff and they showed through their body language that they were happy and comfortable with the care being provided. Staff were seen responding to people's needs quickly and they were kind and caring in their approach. One relative stated, "I could not be happier with the level of care and kindness that all the staff provide [person's name]. they are happy and well looked after and it gives the family peace of mind that they are in the best chosen home for their needs. They are in very comfortable accommodation surrounded by their belongings they bought with them to making it home for home for them." Another added, "I would have no reservations about recommending Carolyn House to anyone who is thinking of needing some extra care for any of their relatives."

A relative told us, "Everyone at Carolyn House, residents and visitors are treated with dignity."

We also saw that people's privacy and dignity was respected and care staff were polite and courteous and observed knocking on doors before entering. Furthermore, staff knew the people they were looking after very well and we heard them addressing people in an appropriate manner; clearly choosing the most appropriate form of address by either using their first name or with a more formal 'Mr or Mrs.' We received positive feedback from people regarding their care and treatment and this included, "I would have no reservations about recommending Carolyn House to anyone who is thinking of needing some extra care for any of their relatives" and, "I cannot praise the staff and care provided highly enough. Since being here and despite a number of health problems, my dad has made consistent improvements. He is always cared for and treated with respect and dignity."

People were encouraged to be part of their care and the care staff were observed providing support and encouragement when needed. Each person living at the service was seen to be clean, tidy, dressed appropriately for the weather and looked comfortable. People told us that they were well treated by the staff and one told us, "It is important to me to look nice and have matching clothes and jewellery, the staff here help me to do this."

Where possible people were supported to express their views about their care and support. All the people at the service had relatives involved in their care and regular contact and visits were made. The manager and care staff added that they did their best to ensure relatives were involved in any reviews and decisions on care, but if someone did not have access to family or friends that could support them, the service would arrange for an advocacy service to offer independent advice, support and guidance to individuals. One health care professional told us, "It is nice to see carers that genuinely care about their residents and take

pride in the work they do and feedback from residents, families and professionals has been constantly positive since I commenced my role."

Compliments the service had received about the quality of care and the improvements relatives had seen on their parents included, "My sister and I visited your home and felt the atmosphere to be friendly and genuinely caring. We both decided your nursing home was the right place for our mum. Since being with you she has received excellent care. The staff are so caring and friendly towards her; and also us when we frequently visit. Her condition has improved and that is due to the care she received from you and your staff." Another compliment received stated, "Since being at Carolyn House [person's name] has come on leaps and bounds. They came from hospital with pressure sores, which have cleared up since being at the home. I have nothing but praise for Carolyn House."

Is the service responsive?

Our findings

At this inspection we found people were happy living at the service as they had been during our previous inspection. The rating of the service continues to be Good.

We found care staff assisted people with their care and were observed being responsive to people's needs. People received the support and assistance they needed and staff were aware of how each person wanted their care to be provided. Each person was treated as an individual and received care relevant to their needs. Feedback from one relative included "I have always found the staff helpful, friendly and very professional, If [person's name] has any problems my sister, me or both of us have had a phone call or chat with one of the staff members letting us know what's wrong and how it is being dealt with."

People's needs had been fully assessed before they moved to the home and the assessment forms were easy to read and quickly helped to identify each person's needs and assisted the service to identify whether they could provide the care required. Systems were in place to encourage people to be involved in the care planning process where possible. The care plans we reviewed were very in-depth and contained a variety of information about each individual person, including their physical, psychological, social and emotional needs. These had been regularly reviewed and updated. . Any care needs due to the person's diversity had also been recorded and when speaking with staff they were aware of people's dietary, cultural or mobility needs. One health care professional told us, "I have always found the carers to be very professional and knowledgeable about their residents which is always evident in their assessments."

Other ways the service tried to be responsive to people's needs included a key worker system, which was an effective way to build closer relationships between the staff and people they cared for. Daily handover meetings also occurred between each shift to ensure staff were up to date with any changes in people's care needs and any issues within the service

The service supported people to follow their interests and hobbies and gain access to the local community through day trips and events. Activities included garden teas, board games, gardening club, music and trips out. On the day of our visit eight people went next door to a nearby care home to participate in a a coffee morning. On returning they could be heard talking about the morning and how much they had enjoyed the event. The service also had access to a mini bus so trips out could be organised.

The activities co-ordinator spoken with advised that they had completed a lot of work in the garden during the year and families had helped to set plants, paint decking and new garden furniture had been brought. People and their families were seen enjoying the garden and making use of the facilities. The service also had a café where people could go with visitors and this provided a private area if needed. Many of the corridors and communal areas had been decorated with themes such as old film stars and stimulating pictures and images which assisted those people living with dementia. The atmosphere within the service was found to be friendly and laughter and chatting could be heard throughout the day. People we spoke with told us they could join in with the organised activities if they wished, but some preferred to watch the television or stay in their room, which showed that people's individual choices and preferences were

respected.

The service encouraged people to be part of regular meetings and also gained their views about the service via questionnaires. A suggestion box had been placed outside the office door which could be used by visitors and people who lived at the service. Minutes of meetings that had taken place with people at the home and their relatives were seen and these included discussions around activities, food, outings and the general running of the service.

The service had effective systems in place for people to use if they had a concern or were not happy with the service provided to them. People had been provided with information on how to make a complaint and this was also available within the service. The service had set forms to record details of any complaints they received and this included how these were investigated and also the outcome. It was noted that these had been well completed and included copies of letters sent to the complainant and staff, and provided a good audit on how the complaint had been investigated and resolved. A complaint log was also in place so management could identify any trends or reoccurring issues and complaints had been monitored as part of the service's monthly audit. Management were seen to be approachable and they listened to people's experiences, concerns or complaints. Care staff stated that they felt able to raise any concerns they had. Relatives spoken with said they would be able to speak with management, but added that they were happy with the service and that they had no concerns. Comments included, "The manager is very hardworking, she is very nice and approachable and we can ask her anything" and, "Communication is key and we are always kept informed of everything and feel that if we have any concerns or question we can approach any member of staff."

Is the service well-led?

Our findings

At this inspection we found the service was as well-led as we had found during the previous inspection. The service's rating continues to be Good.

The manager at the service had been in post for five months and was presently going through the registration process with the CQC. They have completed all the relevant documentation and were waiting for the Registration team to contact them with a date for their fit person interview. The registered manager was supported by a deputy manager who had worked at the service for some time and knew the systems, processes and people's care very well.

People and staff told us that the manager was very approachable. One staff member added, "Having a nurse/manager is really helpful as we can ask her to see people if we have concerns and gain their advice. This helps people to gain the support and help they need sooner, it works very well." Another staff member told us how they felt the service had improved and developed since the new manager had been in post. One relative told us, "They are very good here. They do care. Any problems the manager will deal with it. I have had very few niggles but they always listen and address them." Care staff added that the manager was 'always present' in the home and could be seen speaking with people and the staff. There was clear evidence that the manager had been supported by the regional operations director who had made regular visits to the service and the deputy manager was very knowledgeable of the service and the people within it which assisted the running of the service.

People received good quality care and the service had a number of systems in place to help monitor the standard of care received. These included regular monthly compliance visits by the regional operations director, an annual independent quality assurance inspection and regular weekly audits within the service. The manager had an action plan where areas of concern or improvement had been recorded. This included a clear plan and timescales on what had been addressed and the areas that still needed to be rectified. Regular checks and audits had been completed and these included health and safety, medication and fire systems, care plans, meal times and monitoring call bell systems, falls and pressure care. A new care and environment audit had been introduced and this monitored how people were presented and dressed and also the general environment around them.

Staff told us they felt supported and enjoyed working at the service. Regular supervision and staff meetings had been organised and staff morale was very good. Staff were aware of their responsibilities and there was clear accountability within the staffing structure. This meant that people living at the service benefitted from a cohesive staff team, who worked together to deliver good care. Staff stated that the service had 'a good team' and 'everyone worked well together.' The service had clear aims and objectives and also a 'service user's charter', which included dignity, independence and choice. The ethos of the service was made clear to people through the service's aims and objectives and staff had a good understanding of the standards and values that people should expect.

People who lived at the service and their representatives were provided with regular opportunities to

provide their views about the care and quality of the service. The manager was seen speaking with people and relatives during the inspection. It was noted that the deputy manager knew people very well and had a very good understanding of their care needs and each person as an individual. Both the manager and nurse in charge worked well together and were knowledgeable of people's nursing needs and care requirements. Management had systems in place to help ensure staff were kept up to date with information about the service and the people who lived there and this included staff handover meetings. People and relatives were confident that the care required would be provided and one relative added, "The home is run very well. My dad had been looked after very well and he is always happy to see the staff members."