

The Mellows Limited

The Mellows

Inspection report

38 Station Road
Loughton
Essex
IG10 4NX
Tel: 020 8508 6017

Date of inspection visit: 29 July 2015
Date of publication: 23/09/2015

Ratings

Overall rating for this service

Requires improvement 

Is the service safe?

Requires improvement 

Is the service responsive?

Requires improvement 

Is the service well-led?

Requires improvement 

Overall summary

We carried out an unannounced comprehensive inspection on 03 March 2015 at which two breaches of the legal requirements were found. These related to the safety and decoration of the premises and the monitoring of the quality of the service.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet the legal requirements in relation to the two breaches. We undertook a focused inspection on the 29 July 2015 to check that they had followed their plan and to confirm that they now met legal requirements. We also followed up on information of concern we had received.

This report only covers our findings in relation to these breaches and concerns. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'The Mellows' on our website at www.cqc.org.uk.

The Mellows provides accommodation and personal care for up to 51 older people including those living with dementia. At the time of our inspection there were 46 people living in the service.

There was no registered manager at the service on the day of our focused inspection. An application to CQC had been made by the current manager to be the registered manager for the service. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers,

Summary of findings

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 our focused inspection on 29 July 2015, we found that the provider had followed their plan which they had told us would be completed by 30 June 2015 for assessing and monitoring the quality of the service, and 31 December 2015 for safety in the environment.

The provider had carried out a range of improvements to make the first floor facilities safer for people to live in.

There were sufficient staff on duty to support people and keep them safe.

Plans were in place to provide people with more opportunities to participate and be engaged in activities of their choice.

The manager had improved the quality of the service by the involvement of people who used the service and their relatives and to feedback the action taken. They had put in place systems to monitor improvements in relation to the whole service as well as the first floor accommodation.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

There were enough staff on duty to meet the needs of people who used the service with the correct skills and experience.

People lived in a service where the premises and equipment had been improved to keep them safe.

Requires improvement



Is the service responsive?

The service was responsive.

Staff understood people's needs and supported them to take part in activities that were meaningful.

People were able to make choices about where they spent time and this was respected.

Requires improvement



Is the service well-led?

The service was well led.

A system was in place to audit the quality of the service that people received a service that met their needs.

The service was managed by a management team who demonstrated a commitment to providing a good service.

There were systems in place to seek the views of people who used the service and use their feedback to make improvements.

Requires improvement



The Mellows

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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

We undertook a focused inspection of The Mellows on 29 July 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 03 March 2015 had been made.

We inspected the service against three of the five questions we ask about services: is the service safe, is it responsive and is it well-led. This was because the service was not meeting legal requirements in relation to safety and being well led.

The inspection was undertaken by two inspectors.

Before our inspection we reviewed the information we held about the service, this included the provider's action plan and information of concern about the service which we had received.

At the visit to the service we spoke with eight people who lived there, three relatives, the registered manager, the providers, the chef, and six care and housekeeping staff.

At the visit we went through the provider's action plan, quality assurance records and staff duty rotas.

Is the service safe?

Our findings

People told us that they felt safe. One person said, “The staff look after me, they are all okay.” Another said, “I feel well looked after, thank you.” A family member told us, “Yes my [relative] is safe here and I can go home and know they are looked after.”

At our comprehensive inspection of The Mellows on 03 March 2015, we found that the first floor facilities of the service meant that people did not live in a suitable and safe environment. This was a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 29 July 2015 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 15 as described above.

The provider told us that the redesign and refurbishment of the first floor was in progress. An architect and site engineer had visited the service and a plan had been designed and planning permission applied for. Financial discussions were underway to secure the necessary funding for this work which the provider had told us in their action plan would be completed by 31 December 2015.

The provider had carried out a range of improvements to make the first floor facilities safer for people to live in. The kitchenette, which was unsafe at the last inspection, was no longer used to prepare food or drinks and was locked to prevent anyone from accessing it. People’s bedrooms had been painted; some also had new flooring and new curtains. All bedrooms had ceiling lamp shades in place with working light bulbs.

The seating in the hallway had been removed as this was unsuitable as a lounge area. Instead, a bedroom had been made into a small lounge in the interim period until the refurbishment work is completed. This was used by two people who specifically did not want to use the larger lounge downstairs.

The corridor area upstairs had been painted in a colour which made the area brighter. The wall which had needed

attention at the end of the same corridor had been plastered and painted, albeit not to a high standard. The lighting had been replaced with fluorescent lighting so that people could find their way around more easily. The fire doors between two corridors had been replaced with new ones so that people were kept safe.

The courtyard area on the lower floor had been painted and tidied up so that people had a nicer view from their French doors and windows. One person said, “It is so much better being painted, more colourful.”

We noted that people who were in their bedrooms had their call bells within reach so that they could call if they needed assistance. Calls bells were answered quickly by the staff and we saw that people did not have to wait. One person told us, “They [staff] come when I call them.” We tested two of these with the manager and found they were working properly. They had also purchased two pendants to be used in case of an emergency situation if the call bells were found to be in need of repair.

We found that the premises and equipment had been improved to a minimal standard to keep people safe but that the refurbishment was still to be completed and therefore further improvement was required.

We had received concerns regarding the staffing levels and staffing skills at The Mellows. We talked with the manager and staff about staffing levels. We saw duty rotas and time sheets which confirmed that sufficient staff were on duty to support people and keep them safe. There was a good staff presence around when we arrived at the service, on the ground and first floor and the same amount of staff were on duty as was indicated by the staffing rota.

Agency staff were used when staff from the existing team were not available, such as in the event of unplanned sickness. This was evident when we looked at the timesheets. Staff told us that they worked well together as a staff team and could meet the needs of people who used the service. One staff member said, “We could always do with another pair of hands especially to take people out but we manage alright.”

Is the service responsive?

Our findings

People told us that the staff were always around when they needed them. One person said, “I can go to bed when I want to and get up when I want.” Another person said, “Lovely staff, can’t grumble as they are always here.”

At our comprehensive inspection of The Mellows on 03 March 2015, we found that there was a lack of activities on offer for people especially on the first floor.

We followed this up at our focused inspection on 29 July 2015. The manager told us that the position of activities coordinator had been advertised in order to provide better opportunities for people to participate and be engaged in activities of their choice. The new small lounge enabled people to engage together in conversation and to watch TV in a nicer environment than that which they had previously experienced. However, we did not see any other activities available for people who wanted to stay on the first floor.

People were given a choice of going down to the lounge and dining room on the ground floor to participate in activities and meals. If people wished to stay on the first floor, they could, and we saw staff spending one to one time talking with people. One person said, “I like to stay upstairs in my room and watch TV”. An arts and crafts class was underway in the lounge downstairs which involved a number of people who we saw enjoying the activity.

Staff were not rushed when assisting people and interacted with them in a compassionate and kind way. Staff talked to people in a way and language they understood giving them the time to respond and answer if they could. We saw one staff member responded to people by using distraction techniques and saw that this made them feel calmer and reassured. One person said, “Everyone is very kind, they come when I call.”

Is the service well-led?

Our findings

At our comprehensive inspection of The Mellows on 03 March 2015 we found that the provider was not assessing and monitoring the quality of the service. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 29 July 2015 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 17 as described above.

There was no registered manager at the service on the day of our focused inspection as the provider had cancelled her registration as manager in June 2015. An application to CQC for registration had been made by the current manager and they were awaiting the outcome of this application. The management team at The Mellows included the manager and the providers who played an active role in the development and management of the service.

The manager told us that they had developed a system to audit the quality of the service. We saw that the maintenance/improvement plan for the period December 2014 to December 2015 was used to monitor improvements to the service. This plan covered all aspects of health and safety in the service, care and risk planning and ongoing audits of falls which were reviewed by the manager. Any required improvements or issues identified,

were prioritised for action and communicated to staff. This was done via the maintenance log, the daily handover log between shifts and the monthly manager meetings. Staff told us that the management involved them in some of the plans and one staff member said, "But things were taking time."

A system had been put in place to check the call bell system on a daily basis as part of the ongoing monitoring. This ensured that it was working effectively and that people could call for assistance when needed. Two additional pendants had been purchased which were available should the need arise. The call bells we tested were working effectively on the day of our inspection.

We saw that the manager had sent out feedback questionnaires to the relatives of the people who lived on the first floor to seek their opinions on the environment, staffing levels and what improvements they would like to see. The feedback had been reviewed and signed off by the manager with an action plan of timescales and details of communication with the relatives in response to any concerns they had raised. One relative said, about the first floor arrangements, that they were better than before, but not satisfactory. They said, "People deserved better."

The manager had made some improvements the quality of the service through the monitoring of quality and the involvement of people who used the service and their relatives.