

Mr Paul Jordan & Mrs Joy Jordan

# Oakridge Rest Home

## Inspection report

26 Eastgate Street  
North Elmham  
Dereham  
Norfolk  
NR20 5HD

Tel: 01362668842

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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

This was an announced inspection that took place on 21 April 2016.

Oakridge Rest Home provides accommodation for up to three older people. There were two people living at the home at the time of our inspection.

There was a registered manager at the service. 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.

People living at Oakridge Rest Home felt safe and were happy living there. Both the people living there and the staff recommended it as a place to live.

People had the freedom to make their own choices about the care that was provided to them. They were asked for their opinions about how they wanted to be cared for and these were listened to and acted on. People felt they were treated as individuals and that they mattered. Their independence was encouraged and they were able to participate in activities or experiences that they found interesting. This included activities within the local community.

The staff were kind and compassionate and treated people with respect and dignity. They knew the people they cared for well.

Systems were in place to protect people from the risks of harm and to keep them safe. The premises were well maintained and the staff were well trained. They knew how to provide people with safe, high quality care and what to do in an emergency situation.

People had access to plenty of food and drink and had been referred to other healthcare professionals when necessary to support them with their healthcare needs. They also received their medicines when they needed them and there were enough staff to help them when they needed assistance.

The registered manager had promoted a culture where the person was seen as an individual. People and staff felt able to raise concerns without any fear of recrimination. The staff were happy in their job and felt valued by the registered manager. There were effective systems in place to make sure that the care being provided was safe and of good quality.

## 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.

There were systems in place to protect people from the risk of abuse and harm.

There were enough staff to provide people with support when it was required and to keep them safe.

People received their medicines when they needed them and the premises where people lived was well maintained.

### Is the service effective?

Good ●

The service was effective.

Staff had the required knowledge and skills to provide people with good quality safe care.

Staff asked for people's consent before providing them with care.

People received enough food and drink to meet their needs. They were also supported by the staff to maintain their health.

### Is the service caring?

Good ●

The service was caring.

Staff were kind and compassionate.

People were listened to and their opinion mattered. They were asked how they wanted to be cared for and were treated with dignity and respect.

People's independence was encouraged.

### Is the service responsive?

Good ●

The service was responsive.

People's needs and preferences had been assessed and these

were being met.

People were encouraged to maintain their interests and hobbies.

Any concerns and complaints raised were investigated.

### **Is the service well-led?**

**Good** ●

The service was well led.

The registered manager had promoted an open culture where people and staff felt comfortable to raise concerns.

People and staff felt listened to and valued.

The quality and safety of the care provided was monitored and people were regularly asked for their opinions on this.

# Oakridge Rest Home

## **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 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.

This inspection took place on 21 April 2016 and was announced. The provider was given 24 hours' notice before we visited the home. This was because we wanted to make sure that the people who lived there would be available to speak with us during the inspection. The inspection was carried out by one inspector.

Before the inspection, we reviewed the information we held about the service. Providers are required to notify the Care Quality Commission about events and incidents that occur including unexpected deaths, injuries to people receiving care and safeguarding matters. We reviewed the notifications the provider had sent us.

On the day we visited the service, we spoke with the two people who lived at Oakridge Rest Home, one staff member and the registered manager who was also the provider. The registered manager was present during the morning of the inspection.

We observed how care and support was provided to people and looked at the records relating to their care, the maintenance of the premises and the training of staff.

# Is the service safe?

## Our findings

The provider had systems in place to protect people from the risk of abuse. Both of the people we spoke with told us they felt safe living at Oakridge Rest Home. One person said, "Oh yes, I feel very safe here." The other person said, "I feel absolutely safe living here."

The staff member we spoke with understood the different types of abuse that people could experience and told us how they would report any concerns they had. This included reporting them to outside organisations such as the local authority if needed. There was a policy in place that gave staff clear guidance on how to report concerns if any arose. The registered manager was also clear about how to deal with any safeguarding concerns.

Risks relating to people's safety had been assessed and actions taken to mitigate the risk where one had been identified. The staff member we spoke with had a good understanding of how to minimise risks to people's safety to protect them from harm, such as walking with them to decrease the risk of them falling. Any incidents or accidents that occurred were recorded and the registered manager had taken action in an attempt to reduce the risk of them from re-occurring. For example, seeking advice from specialist healthcare professionals to help reduce the risk of people experiencing falls.

Both people living in the home told us that their freedom was supported and respected and that they were able to take informed risks if they wished to do so. These included eating foods that may be detrimental to their long term health or trying to walk unaided. Both people told us that this was important to them so they could live their lives how they wanted to.

The staff member we spoke with understood how to deal with emergency situations. They gave us a good account of what they would do if the fire alarm rang and also if someone was unwell.

The premises were well maintained. People were able to gain access to different areas of the premises safely either independently or with staff. The fire exits of the building were clear and well sign posted to assist people to leave the building if they needed to in the event of an emergency. However, we found that there was some exposed pipework within people's en-suite toilets. In one person's room, one of the pipes was very hot to touch. We spoke to the registered manager about this. They immediately assessed this risk and placed lagging on any pipes that could cause harm should the person fall within this room.

Both of the people we spoke with told us that there were enough staff to provide them with care when they needed it. One person said, "I get help when I need it." The staff member we spoke with agreed with this. We observed that the staffing levels were sufficient on the day of our inspection to assist people quickly when they requested support. The registered manager advised that one member of staff was currently employed by them. The registered manager lived within the home and therefore, covered any unplanned absence of the staff member if needed.

People's medicines were managed safely. Both people told us they received their medicine when they

needed them. One person said they had chosen to administer their own medicines. Medicines were stored securely so that they could not be tampered with or removed. All of the medicine records that we checked indicated that the person who required assistance had received their medicines as requested by the person who had prescribed them.

## Is the service effective?

### Our findings

The staff member and registered manager had enough skills and knowledge to provide people with effective care. People we spoke with told us they thought the staff member and the registered manager were well trained and that they felt they did their job well. One person said, "They [staff member and registered manager] are wonderful, I cannot say enough about either of them, they know what they are doing."

The staff member we spoke with said that they had received enough training to meet the needs of the people they cared for. They were knowledgeable about how to care for people safely and effectively. We saw that they and the registered manager had received training in a number of subjects including safeguarding people from abuse, medicine management, health and safety, fire evacuation, food hygiene, infection control and the Mental Capacity Act 2005.

People's consent to their care and treatment was sought before this was given. People told us that the staff were polite and asked for their consent before performing a task. Our observations during the inspection confirmed this. One person said, "Oh yes, they are always very pleasant and ask me first if I want to do anything."

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. The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS).

The staff member we spoke with and the registered manager had an awareness of the MCA and DoLS. They told us that both people who lived within the home had capacity to make their own decisions regarding their care. We saw the staff member asking people throughout the inspection how they wanted to be cared for and for their consent before performing a task. They demonstrated to us they had a good understanding about consent and the importance of offering people choice about how they wanted to live their lives.

People received enough food and drink to meet their individual needs. People told us they enjoyed the food. One person said, "The food is extremely good." The other person said, "The food is very nice." When asked whether people had a choice of meals, both told us that they were not offered a choice. One person however, told us that this was not an issue as the staff member and registered manager knew what food they liked. However, the other person said they would like to be offered a choice for their meals. We fed this back to the staff member. They advised that if people did not like what meal was offered then an alternative such as sandwiches could be made. They agreed to discuss this with the registered manager so they could accommodate the person's wish for a choice of meal.

The food that was served to people was home-cooked with fresh local ingredients. Both people told us after



they had finished their meal that they had enjoyed it. During the meal and throughout the inspection, people were offered drinks of their choice including hot, cold and alcoholic drinks. The staff member was knowledgeable about people's individual food and drink likes and dislikes and monitored people's intake to make sure it was sufficient for their needs. They told us that any concerns they had regarding this were reported to the local GP. The records we viewed confirmed this.

People were supported by the staff member and registered manager to maintain good health when needed. One person told us how they arranged their own care. They said, "The GP is regularly in when I need him."

Records indicated that healthcare professionals were contacted in a timely manner to visit the home to ensure that people's healthcare needs were met. These included GPs and chiropodists. People were taken to the dentist or optician when needed and other specialist healthcare professionals such as falls specialists had been consulted for advice when necessary.

## Is the service caring?

### Our findings

The staff member we spoke with and the registered manager had developed caring relationships with the people they provided care for. Both people told us that the staff member and registered manager were kind, caring and compassionate. One person told us, "They are very very kind." The other person said, "They are extremely compassionate."

We saw that people were often smiling and looking happy in the presence of the staff member and/or the registered manager. Polite and respectful conversation took place with the staff member. People talked about how they had spent their evening and discussions took place about current affairs and the Queens 90th birthday which was celebrated during the lunchtime meal. The table had been laid with a Union Jack table cloth and both people enjoyed talking about the Royal Family and of past times.

The staff member and registered manager demonstrated that they knew the people they cared for well. This included their likes, dislikes and preferences such as what time they liked to get out of bed in the morning, their interests and their life history. The staff member told us that this helped them develop a good rapport with people and that knowing their history, enabled them to have conversations with people that were meaningful to them.

Both people we spoke with told us they were listened to and were able to express their own views about how they wanted to be cared for. They added that they were able to make decisions about their care. One person said, "Oh yes, I have choice about my care and make my own decisions. I live my life how I want to and that is respected."

Both people told us they had choice about where they wanted to spend their time during the day. This was either within their own rooms or the communal areas of the home. They could go outside if they wanted to into the well-kept gardens. One person told us they were often out with their friends within the community. They said the home felt more like a hotel where they could come and go as they pleased.

People we spoke with said that they were always treated with dignity and respect. One person told us, "Oh yes. They treat me very well and as a person. They know what I like and don't like." We observed the staff member and registered manager treating people with respect throughout the inspection.

People told us that their independence was encouraged by the staff. One person said, "I have a kettle in my room so I can make my own cup of hot drink. They [the staff member and registered manager] trust me you see." They also told us how the registered manager had helped them attend a local class of physiotherapy exercises within the local community. They said this had helped them maintain some of their mobility and independence.

## Is the service responsive?

### Our findings

People received personalised care that was responsive to their individual needs. When asked, both people told us their preferences regarding how they wanted to be cared for were met. One person told us, "I like an early morning bath. As soon as I get up at 7am it is ready for me. The call bell is in place and I just have to get in." They added that when they told the registered manager they were having difficulty manoeuvring within the bathroom, that extra equipment was fitted to help them maintain their independence. The other person said, "I get up and go to bed when I want to."

Both people's care needs and preferences has been assessed. These were recorded within their care records and had been regularly reviewed to make sure the information contained within them was accurate. There was information in place that provided the staff member with clear guidance on both people's individual daily routines and how they wanted to be cared for. When spoken to, the staff member demonstrated that they understood this.

People told us they were able to follow their hobbies and interests. One person said they enjoyed knitting. They proudly showed us a blanket on their bed that they had knitted. The other person told us about a project they were working on which they were very much enjoying. They added that when they moved into the home, they did not have enough room to store their papers. The provider therefore, had added a small conservatory near their room in which they could work on their projects. The person told us that this was very important to them. They also said that they enjoyed reading books which they were able to get from the mobile library that visited the local village each month.

Both people said the registered manager often offered to take them into the local town if they wanted to do some shopping. One person told us how they visited the local supermarket to have a meal. The other person told us about a recent trip to the coast which they had enjoyed. They both said that their friends and relatives were encouraged to visit. One person explained how they often went out into the community with their friends and that they had recently returned from a holiday with them which they had enjoyed. The other person talked about how they had lots of regular visits from their extended family.

Both people told us they did not have any complaints but that they felt confident to raise any issues with the staff member or the registered manager if they were unhappy about anything. One person said, "I don't have any complaints at all. You would be hard pressed to find any fault with this place."

No formal written complaints had been made since our last inspection. However, the registered manager told us that if any complaints were made, that they would be investigated and dealt with appropriately. They added that any concerns raised verbally were dealt with immediately and this was confirmed by the people we spoke with.

## Is the service well-led?

### Our findings

The registered manager had promoted a positive culture that was person-centred, open and empowering. They also demonstrated good leadership.

Both of the people we spoke with on the day of the inspection were happy living at Oakridge Rest Home and said they would recommend it as a place to live. They told us that it was a happy place to live and we observed this to be the case throughout the inspection.

The people and staff member we spoke with said they felt listened to and that their opinion mattered. They said they could raise any concerns they had without hesitation and were confident that any action necessary would be taken in a timely manner. The people we spoke with added that the staff member and registered manager were approachable.

The registered manager and the staff member were passionate about providing people with care that met their individual needs and preferences and that encouraged people to live the lives they chose. From the feedback we received from both people living in the home and our observations, we found this to be the case.

The staff member told us that they felt supported in their role and that their morale was good. They were clear about their individual role and responsibilities and said they received good guidance from the registered manager. They added that the communication from the registered manager was good and that they felt trusted and empowered to perform their role as a carer. They also stated that they would recommend it as a care home for older people and would be happy for their family members to be cared for there.

The registered manager monitored the quality of care provided to make sure it was of high quality. They often provided care for the two people who lived at Oakridge Rest Home themselves and therefore conducted regular daily checks on people's medicines, the accuracy of their care records and the safety and cleanliness of the environment. Feedback was informally requested daily from the two people who lived in the home and annually through the completion of a survey. The last survey was conducted in 2015. We looked at the results of these surveys. The majority of comments made were very positive. One person had asked for an improvement in the activities on offer and this had been provided.

Any incidents or accidents that had occurred had been analysed and action taken to reduce them from happening again in the future. This demonstrated that the registered manager had learnt from previous incidents.