

Red House Welfare And Housing Society

The Red House Welfare & Housing Society

Inspection report

Meadow Lane
Sudbury
Suffolk
CO10 2TD

Tel: 01787372948

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

The Red House is a residential care home, providing personal care and accommodation for people aged 65 and older. At the time of our inspection 30 people were living in the service.

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

Quality and safety checks by the manager and senior staff did not always help ensure people were safe and protected from harm.

Staff were trained in safeguarding and knew what to do if they had concerns about people's wellbeing. There were enough trained staff to meet people's needs and people's medicines were administered safely.

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's specific communication needs were known, respected and met.

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

Rating at last inspection

The last rating for this service was good (published 6 February 2019).

Why we inspected

The inspection was prompted in part by notification of a specific incident. Following which a person using the service sustained a serious injury. We are currently making further enquiries about this incident. The information CQC received about the incident indicated concerns about the management of risks associated with the use of wheelchairs. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only. This inspection examined those risks.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them.

The ratings from the previous comprehensive inspection for those Key Questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Good to Requires Improvement. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Red House Welfare and Housing Society on our website at www.cqc.org.uk.

Enforcement

We have identified breaches in relation to regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The registered person failed to ensure risks relating to the safety, health and welfare of people using the service were assessed and managed. Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

The Red House Welfare & Housing Society

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

This inspection was carried out by one inspector and an assistant inspector.

Service and service type

The Red House Welfare Society is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 registered with the Care Quality Commission. 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 before 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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this

report. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and one relative about their experience of the care provided. We spoke with five members of staff plus the registered manager. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included two people's care records and medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at some health and safety records.

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 as Good. At this inspection this key question has now deteriorated to Requires Improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people were not always assessed, monitored and managed to keep people safe.
- This inspection was prompted by a notification we received from the provider of a specific incident which took place. We looked at the systems in place to help reduce the likelihood of a reoccurrence of the same or a similar incident taking place.
- There was a lack of effective systems in place to identify concerns and learn lessons when things went wrong.
- People who had risks associated with their care did not always have the appropriate action taken. We recommended an urgent referral was made to the wheelchair services during our inspection visit, which the registered manager did during our visit.
- Whilst risk assessments were completed, not all risks had been fully actioned to detail how the risk would be managed and reduced.

The registered person failed to ensure risks relating to the safety, health and welfare of people using the service were assessed and managed. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt the service was safe and they continued to be happy with the care provided.
- The registered manager was aware of their responsibility to report any safeguarding concerns to the appropriate authorities.

Staffing and recruitment

- People living at the home told us they felt safe with the care provided to them and that staff had time for them.
- Staff were visible around the home, they spent time with people and had time to engage with people.
- Staff continued to be recruited safely. The providers recruitment process included obtaining a Disclosure and Barring Service Check (DBS) to determine whether staff were safe to work with people.

Using medicines safely

- People continued to receive their medicines as prescribed. One person commented, "The staff do my [medicine]. I get it at the right time every day."

- Staff received training in the safe management of medicines and their competencies had been checked.

Preventing and controlling infection

- The home was clean and odour free. The provider had systems to ensure regular cleaning took place.
- Staff had received training in infection control and had access to protective personal equipment such as disposable gloves and aprons, to reduce the risks of cross infection.

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 now deteriorated to Requires Improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Governance systems were not always effective in protecting people from the risk and possibility of harm. An accident had occurred at the home which resulted in a person sustaining a significant injury. During our inspection visit we established a second person was at risk however, action had not immediately been taken to reduce and minimise this risk. When raised with the registered manager by the inspection team, immediate action was taken to address.
- Following the initial accident lessons had not always been learned. The registered manager had taken action such as improving the recording of identified risks. However, concerns about another person's safety had not been identified and action had not been taken to ensure all people's safety and wellbeing.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a calm and caring atmosphere at the home. Staff and people were visibly relaxed in each other's company. One person's relative told us, "I feel the staff are really good. The manager is really good, she explains things to you and makes you feel welcome."
- Staff were positive about working at the home and spoke positively about the culture and the care people received. One member of staff said, "I would recommend this home because the care is really good and a high standard."

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

- The registered manager was aware of their regulatory responsibility and of their duty to notify the Care Quality Commission (CQC) of significant events and had notified CQC when events occurred.
- The previous inspection rating was clearly displayed in the reception area.

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

- Systems were in place to gather feedback from staff and people using the service with clear actions taken in response.
- Opportunities continued to be available for people to comment on their experience of the care delivered through regular surveys the most recent of which was undertaken in July 2019. A food and menu quality

feedback survey was also undertaken in October 2019.

Working in partnership with others

- The service worked in partnership with other agencies such as health and social care professionals.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment The registered person failed to ensure risks relating to the safety, health and welfare of people using the service were always assessed and managed.