

Mr & Mrs S Blundell

Stanford House

Inspection report

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Tel: 01902880532

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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 inspection took place on 18 July 2016 and was unannounced. At our last inspection in April 2013 the service was meeting the regulations of the Health and Social Care Act 2008.

Stanford House provides accommodation for up to 10 people who require personal care. On the day of our inspection there were seven people living at the home and one person was in hospital. People who lived at the home were elderly and had needs associated with old age and dementia.

There was a registered manager in post and she was present during our inspection. 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 and associated Regulations about how the service is run.

People told us they felt safe at the home, and staff had received training to ensure they knew how to recognise and report concerns. We found risks to people were managed in a way to keep them safe. There was sufficient staff to support people and meet their needs. People received their medicines safely and as they had been prescribed.

The registered manager understood their responsibility to comply with the requirements of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). Staff knew about people's individual capacity to make decisions and supported people to make their own decisions.

People received care and support from staff that knew their individual needs, and recognised when these changed. Staff were supported through regular supervision, and told us that if they had any concerns for people's well-being they were able to get advice from senior staff or the registered manager.

People were encouraged to be independent and their privacy and dignity was respected. People were supported to maintain good health; we saw that staff alerted health care professionals if they had any concerns about their health. People knew how to make a complaint and were confident that their complaint would be fully investigated and action taken if necessary.

People described the registered manager as approachable and they said they felt the service was well managed. Arrangements were in place to assess and monitor the quality of the service, so that improvements could be made. The management of the home was open and transparent.

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.

People were cared for by staff that had the knowledge and skills to protect them from harm. There was enough staff to keep people safe and meet their care and safety needs. People received medicines in a safe way.

Is the service effective?

Good ●

The service was effective.

Staff had received the training they needed to support people effectively. People were asked for their consent before staff provided them with support. People told us they enjoyed the food provided. People received support to stay healthy and well.

Is the service caring?

Good ●

The service was caring.

People's privacy was respected, their dignity maintained and people were treated with respect. People's preferences about how care was delivered was listened to and followed.

Is the service responsive?

Good ●

The service was responsive.

People received care that met their individual needs. People were involved in developing their care plan which was updated when their needs changed. People knew how to raise any complaints or concerns and were confident they would be listened to.

Is the service well-led?

Good ●

The service was well led.

People were encouraged to share their opinion about the quality of the service to enable the manager to identify where improvements were needed. Staff understood their roles and responsibilities and were given guidance and support by the

registered manager. Systems were in place to monitor the quality of the service provided.

Stanford 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 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 18 July 2016 and was unannounced. The inspection was carried out by one inspector.

We reviewed the information we held about the service. Providers are required by law to notify us about events and incidents that occur; we refer to these as 'notifications'. We looked at the notifications the provider had sent to us. We also contacted the local authority who monitor and commission services, for information they held about the service. We used the information we had gathered to plan what areas we were going to focus on during our inspection.

We spoke with seven people, five staff, four relatives, a healthcare professional and the registered manager who is also the provider. We looked at the care records for three people and the way their medicines were managed. We reviewed two staff recruitment files, staff training records and the registered manager's quality monitoring audits.

Is the service safe?

Our findings

People and their relatives told us that care and support was delivered in a safe manner. People confirmed they felt safe and comfortable when they were supported by the staff team. One person told us, "I feel safe here, the staff don't mistreat us, I would report them to the manager if they did". A relative told us, "I think our family member is very safe here, the staff are all very kind to them and we have no concerns about that".

Staff we spoke with confirmed they had received training and they knew how to recognise and report potential abuse or any concerns they had about people. One member of staff told us, "People are safe here and I would report any concerns I had to the manager and I know she would take action". Another staff member said, "I would report any concerns I had and I know the manager would take the required action to keep people safe". All of the staff knew the external agencies they could contact to report any safeguarding concerns. The registered manager was aware of her legal responsibility to inform us and the local authority about any safeguarding concerns. She confirmed that there has not been any safeguarding concerns since our last inspection.

People told us that staff knew about any risks associated with their care and support and that these were managed appropriately. One person said, "I use a frame to walk and the staff always make sure I have this close by". Another person told us, "I am very independent, but the staff check on me to make sure I am safe". Discussions with staff demonstrated that they knew about people's individual risks and actions they needed to take to keep them safe. We saw that people who were at risk of developing pressure sores due to their fragile skin had cushions in place to prevent this. One staff member told us, "We are a small home so we know the people who live here very well and what support we need to provide to make sure they stay safe". We spoke with a visiting healthcare professional who said, "The staff are proactive in asking for support if they think someone's skin is vulnerable. They follow our recommendations and monitor people's skin and use equipment to prevent people's skin from becoming sore". We saw that people who required support to stand received this from the staff who offered reassurance throughout. In the care records we reviewed we saw that risks had been assessed to support people's care and wellbeing. When risks had been identified, the care plans showed how this risk could be reduced.

We saw that staff and people knew how to respond to emergencies, such as a fire. One person said, "I would go out through the front door". Staff we spoke with was aware of the emergency evacuation plans and the support people needed. Although people had this knowledge we saw that individual plans detailing the level of support a person would need to be evacuated from the home in an emergency was not available in all of the care records we looked at. The registered manager advised that people's needs had been taken into account as part of the fire risk assessment. She confirmed that a plan specific to each person's individual needs would be developed and discussed with them and the staff to ensure people were evacuated safely.

People we spoke with felt there were enough staff available to meet their needs. One person said, "The staff are around to help me when I need them to". Another person said, "I think there is enough staff here to

support us, I have not had to wait for support". The relatives we spoke all felt there was sufficient staff on duty. One relative said, "There is always staff around and they make sure my family members needs are met". Another relative told us, "Yes I think there is enough staff".

We observed that there were sufficient numbers of staff to be able to provide the support people needed in a timely way. When people needed support this was provided without delay. For example when people needed support to use the toilet, the staff supported them to do so without delay. We saw that staff were responsible for cleaning and cooking duties but this was managed to ensure it did not impact on people and they still received the support they needed. The staff we spoke with felt the staffing levels were safe and enabled them to provide care people needed as well as to spend 'quality time' with them. One staff member said, "We all work together and the manager helps out, so people get the care and support they need". We saw the registered manager assisted staff to support people. She told us, "I often work with the staff so I know the needs of the people who live here and this helps me to assess if we have sufficient staff on duty".

Staff we spoke with had all worked at the home for a long period of time. The most recently recruited staff member had been working at the home for five years. All the staff we spoke with told us they had provided references and a check by the Disclosure and Barring service (DBS) amongst other information before they had started working at the home. A DBS check identifies if a person has any criminal convictions or has been banned from working with people. The records we looked at confirmed that information was obtained before staff had started working in the home. We saw that previously staff had not provided a full employment history on their application form. We spoke with the registered manager about the recruitment procedure and she confirmed that if she was to recruit any new staff she would ensure that all of the required checks would be undertaken including obtaining a full employment history and ensuring any gaps was accounted for.

People told us their medicines were managed in a safe way. One person said, "The staff give me my tablets when I need them and if I am in pain they will give me my pain relief tablets". Another person told us, "I have my tablets at the right time each day". Relatives we spoke with were confident that staff administered people's medicines safely and when they needed them. We saw that records had been signed to confirm people had received their medicines. We checked the balances for three people's medicines and these were accurate with the record of what medicines had been administered. We found some people were prescribed 'as required' medicines. Staff we spoke with had the knowledge about what to look for so they knew when this medicine was needed. We saw that prescribed creams had not been dated when they were first used. The registered manager told us she would speak to all the staff about this and check to make sure this was done in the future. Staff we spoke with and records we looked at confirmed that staff had received medication training. The registered manager advised that although she has observed staff administer medicines she has not completed a written observation of their competency to demonstrate they practiced in a safe manner. The registered manager advised that she would address this and complete these records.

Is the service effective?

Our findings

People told us that they were happy with the care they received. One person said, "The staff are lovely and meet my needs very well". Another person told us, "I am very satisfied with the care I receive". A relative we spoke with told us, "The staff are very good and dedicated to making sure people are looked after and their needs are met. They seem very knowledgeable and well trained". Our observations showed us that the support and assistance provided to people was effective in meeting their needs.

Staff told us they received the training they needed to care for people effectively, and we saw some records which confirmed this. One staff member said, "I have regular training and refresher training which enables me to keep up to date and to care for people safely". Another staff member told us, "We receive regular training. I have recently completed all of my refresher training apart from moving and handling". The registered manager told us that moving and handling refresher training had been booked for two staff in August and they were waiting for dates for two more staff that needed this training. We saw that all of the staff had completed national vocational qualifications at level two or three which ensured they had the knowledge and skills for their role. We found that there had not been any new staff employed in the home but the registered manager confirmed that they would receive an induction to their role. We discussed with the registered manager if this induction would include the Care Certificate and she confirmed that this would be provided. The Care Certificate is a set of standards designed to equip staff with the knowledge they need to provide people's care. The staff we spoke with confirmed they had received an induction when they first commenced employment at the home.

Staff confirmed they received regular supervision and an annual appraisal and records were in place to demonstrate this. One staff member said, "I do feel supported by the manager and my colleagues we all work well together and support each other". Another staff member told us, "I am well supported we have good teamwork here and the manager is always available for support and advice if we need it". We saw that staff communicated well with each other and worked well as a team.

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. Staff we spoke with had an understanding the requirements of The Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). People we spoke with told us that staff always asked for their consent before they provided any support. One person said, "The staff ask me if it is okay for them to support me and I always say of course". Another person said, "The staff ask me before they provide support and they explain what they are going to do. I am happy with everything the staff do". Throughout the inspection we observed and heard staff asking people's consent before providing support.

People told us they enjoyed the food provided. One person told us, "The food is lovely here I really enjoy it". Another person said, "I like the food it is home made the staff are good cooks, we can have what we want". We found that the food was cooked by a staff member on duty. The staff we spoke with all had a good

knowledge about people's dietary requirements and preferences. One staff member said, "I've worked here a long time so I know what people like and we ask them and give them choices". A relative we spoke with said, "My family member always tells us they enjoy the food provided". We saw that people enjoyed their meals in a relaxed environment and people were provided with regular drinks throughout the day.

We saw that where people that had been assessed as at risk of not eating or drinking enough they were monitored and referrals were completed to healthcare professionals when necessary. We saw that people were provided with supplements to increase their calorie intake where this was needed. We saw staff encouraged people when this was required to eat their meal in a gentle and respectful way.

People told us they were supported to maintain their health care needs. One person told us, "I have all of my routine checks done like my eyes, and feet, the staff are very good at arranging this for us". Another person said, "The staff are very good and will get the doctor out if needed or make sure I have my annual checks done". A relative we spoke with said, "The staff are bang on with everything, and they have sorted everything out to make sure our family member has all of the routine checks done". Another relative told us, "The staff are very receptive and they know when my family member is not feeling well. They soon get in touch with the professionals and get things sorted, I trust them as they know what they are doing. They always keep me up to date with everything even the little things which I think is very good". The staff told us about how they had good working relationship with the local GP practice and that the doctor visited every two weeks to see people and to monitor their healthcare needs. We saw that records were in place to demonstrate that people's healthcare needs were monitored and information was recorded to ensure all the staff had up to date information about any changes or on-going issues.

Is the service caring?

Our findings

People we spoke with told us the staff were caring and they got on well with them. We saw staff took time to chat to people about things that were important to them, and that people were relaxed and comfortable around staff. We saw staff treated people with respect and in a kind and compassionate way. One person told us, "The staff are lovely, caring and kind, we are like one big family I am very happy here, it is like home from home". Another person said, "I am very satisfied with the care the staff provide they are very good, I couldn't wish for better". Relatives we spoke with were also very complimentary of the care. One relative told us, "The quality of the care is very good, we like the fact it is a small home and the staff are like family it is lovely here". Another relative said, "The staff are very caring and respectful towards my family member, it is a nice home and they are cared for very well here".

People told us that they were enabled to make choices as part of their daily lives, for example how they wanted to spend their day and where they would like to sit; either in the lounge areas or to remain in their room. One person said, "I choose what I do each day and the staff respect my choice". People told us staff supported them to maintain as much independence as possible. One person told us, "The staff provide the support I want but they encourage me to remain independent so I attend to my own personal care and choose what I want to wear". Another person said, "I can do most things myself but the staff will help me to wash the areas I cannot reach, and they are very gentle".

We saw that staff engaged positively with people whilst providing them with support throughout the day. For example, when people required some assistance to go to the toilet the staff provided this support. One person said, "It is nice to have a chat with the staff they are always around for me to support me when I need them to". We saw that people had their private possessions close to them such as their handbags and the books they enjoyed reading. One person said, "The staff always make sure I have my bag as I like that with me at all times". People were asked if they had everything they needed and staff checked on their wellbeing throughout the day.

We observed people's privacy and dignity was respected by staff when receiving care and support. For example when asking people if they needed to use the toilet, staff got close to the person and asked them quietly and discreetly, to ensure other people could not overhear. People told us staff always knocked their door before entering their bedroom. One person said, "The staff do ensure my dignity is maintained, when they support me to have a shower they always make sure the door is closed and I am covered up". Another person told us, "I am a private person and I like being on my own and the staff respect this. They do check on me to make sure I am okay and have everything I need, they are very good".

People told us they did not wish to attend or participate in any religious services. This was confirmed by the registered manager who told us that if people wanted to pursue their spiritual needs this would be accommodated and supported.

Relatives we spoke with told us they could visit at any time and were always made to feel welcome by the staff team. One relative said, "The registered manager told me this is your family members home, so you

come and visit whenever you want to, we have no restrictions here". Another relative told us, "We come when we want and we are always asked if we would like a drink. The registered manager and the staff are always welcoming to us when we visit and we have a good chat about things. It is very relaxed here".

The registered manager confirmed that people currently living at the home were not using the services provided by an advocate, and that she had information about the advocacy services provided by the Local Authority. She told us that she would refer people to an advocate if this was needed. An advocate is an independent person who can provide a voice to people who otherwise may find it difficult to speak up.

Is the service responsive?

Our findings

People told us they were happy with the support they received and that this met their individual needs. One person said, "The staff meet my needs in the way I want them to. I am happy with everything they do and about the care I receive". Another person said, "I am more than satisfied with the support I receive from the staff". A relative we spoke with told us, "We have peace of mind now as we know our family is looked after well and all their needs are met".

Staff knew what individual people's support needs were, and told us how they worked with people to make sure they were getting the care they needed. People told us about their care plan and how staff chatted to them about this to make sure it reflected their needs. One person said, "I have a care plan which tells you about me and the support I need. This is reviewed with me quite regularly". A staff member we spoke with told us, "We review people's care plans pretty much every month, and I will sit with people and go through it with them to make sure they are happy with it". We saw evidence of people's involvement in their care plans, and people who were able to had signed their care plans and the reviews.

Relatives we spoke with also confirmed they were involved in the care their relative received. One relative told us, "We were involved in the assessment that was completed when our family member first moved here, and we are always having chats with the staff and the manager about our family member's needs and well-being". Another relative said, "The staff and manager keep me informed about how my family member is doing. I am happy with the care they receive and I think it meets their needs".

We saw that although the care plans were brief in content they did include some information about people's previous lives, their likes, dislikes and preferences. Discussions with the staff demonstrated that they had a good knowledge about people's needs and preferences. One staff member told us, "We are a small home, and the staff have all worked here for a long time so we know each person really well and they know us. The staff work well as a team and we all work together to make sure people's needs are met in accordance with their preferences".

People told us there were not many activities provided. One person said, "There's not much we do here but I am fine with that because I wouldn't want to do any activities as I keep myself amused by reading and things like that. We do have the music on which I enjoy listening to the old songs". Another person told us, "There is not much activities here but I don't mind as I love to watch the television and read. We have the hairdresser who comes every other week and I like having my hair done". We did observe the staff asking people if they would like to participate in activities, but people declined this. The registered manager went through a memory box with some people which they seemed to enjoy. We also saw staff talking to people, and many people had relatives who visited them. The registered manager advised that there used to be an activities programme but people did not wish to participate in these. She said that there was a variety of in house activities that people were offered such as bingo, dominoes, and various other games. People are also supported to go into the local town to go shopping. Relatives we spoke with said, "I know the staff have tried to get my family member involved in activities but they are not interested as they just want to watch TV and read. They enjoy having a chat but that is it. We are satisfied with this as it is their choice".

People we spoke with did not have any complaints about the service. One person said, "I have no complaints and if I did I would speak to the staff or manager. I speak my mind so there are no issues there. I am quite content here and have no concerns at all". Another person said, "I have no complaints, I am very happy here and there is nothing to complain about". Relatives we spoke with knew there was a complaints procedure in place. One relative said, "If I had any concerns I would raise them with the staff and the manager and I know things would get sorted. But I can honestly say I have no concerns at all". Another relative told us, "We have no cause to complain, our family member has everything they need and we are really happy. If we did have any issues I would speak with the manager and I am confident she would address them". The registered manager confirmed that there had not been any complaints made since our last inspection. We saw there was a procedure in place and a complaints book to record any issues the home received.

Is the service well-led?

Our findings

People and their relatives spoke positively about the staff and the home and we saw there was a relaxed and homely atmosphere. One person said, "I love it here. It is so homely and relaxed; I doubt I could be anywhere better". One relative told us, "This is a lovely home and it has a lovely homely atmosphere very calm and relaxed". People told us they had developed positive relationships with the registered manager and staff. All of the people spoke warmly about the registered manager, and we saw people smile when they saw her. We saw the registered manager chatting in a relaxed way with people, staff, and relatives. One person said, "The manager is lovely, and friendly. We have some good banter and a good laugh which is how it should be". Another person told us, "She is very kind and manages the home well. I like her". A relative said, "The manager is great, very approachable and relaxed and she runs this home for the people". It was clear from the discussions we had that the well-being and welfare of people was of paramount importance to the registered manager. Discussions with her demonstrated that she knew people well and knew about their specific needs.

Staff we spoke with told us they enjoyed working at the home, and how they felt the staff team worked really well together, so people received the right care. All the staff we spoke with told us they felt supported by the registered manager, and that she was approachable and 'always available' to talk through any concerns or to ask for advice. Staff confirmed they had regular team meetings and opportunities to talk about people's needs or the service. One staff member said, "We don't wait for team meeting to discuss things, we have many informal chats as we are all open here and the manager is here most of the time so we discuss what we need to when we need to". We saw that the registered manager was open and transparent about the way she managed the service and staff were also encouraged to be open and honest. The registered manager told us that her aim and vision for the service was for people to feel that this was their home, and for them to feel relaxed and for it to be homely. She wanted staff to treat people as they would treat their parents.

People told us they had opportunities to talk about the service and we saw records to confirm this. Discussions were held about the food and activities provided and various other issues relating to the service. People were asked for their feedback about any improvements or changes they wanted to be made. We saw that people had said they were happy with everything to remain as it was and they did not wish for anything to change.

In addition to these meetings we saw that people's views were sought and surveys had been sent out as part of the quality assurance systems to gain feedback from people, and their relatives. We saw that positive feedback had been received following the recent survey. For example one relative wrote "The staff are five star and they make the home what it is". We saw that staff were also given a survey to enable them to provide feedback. We saw that positive comments were made by staff also.

Staff we spoke with told us they would be happy to raise any concerns and they were aware of the whistle blowing procedure. Whistle blowing is the process for raising concerns about poor practices. One staff member said, "I would raise any concerns I had about anyone immediately. I know the manager would not stand for it and action would be taken". This demonstrated that staff knew how to raise concerns and were

confident they would be dealt with.

We saw the registered manager had systems in place to monitor accidents, and incidents, which would be analysed to identify any patterns or trends. The registered manager confirmed that there had not been any incidents in the last 12 months. She told us how they monitored the safety of the service for people. For example she told us how she had recommended a person change their footwear to reduce the risk of them falling. We did see that one person's safety was compromised due to the way they used a wedge to keep their door open although a door closure device was in place. We also saw that a signing in book was not being used for the staff or visitors when they entered the home. This is important for their safety in emergencies such as a fire so that all of the people in the home could be accounted for. The registered manager addressed these issues straight away and reminded all of the staff to use the signing in book that was available.

We saw the registered manager had audits in place to monitor the effectiveness and quality of the service provided. Some of these audits were completed informally and records were not always in place to demonstrate what checks had been undertaken. For example checking the finances held for people. The registered manager had a system in place but the records did not reflect when the finances were audited. The registered manager agreed to formalise the process and to complete more detailed records to reflect the audits that were undertaken. We received information following our inspection to confirm that financial audits were now completed. The registered manager was aware of her legal responsibilities to notify us of events that they were required to by law.