

Methodist Homes

Dauids House

Inspection report

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Date of inspection visit:
09 November 2023

Date of publication:
22 December 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Dauids House is a nursing home providing personal care and nursing care to up to 30 people. At the time of our inspection there were 27 people using the service, the majority of whom were living with dementia.

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

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 were protected from the risk of abuse. Risk assessments had been carried out to identify the risks people faced. These included information about how to mitigate those risks. There were enough staff working at the service to meet people's needs and the provider had robust staff recruitment practices in place.

Medicines were stored, managed and administered safely. Infection control and prevention systems were in place. The premises were suitable, well maintained and 'fit-for-purpose'. Accidents and incidents were reviewed to see if any lessons could be learnt from them.

Staff understood how to support people in a way that promoted their privacy, independence and dignity. The service sought to meet people's needs in relation to equality and diversity.

The service assessed people's needs before they began living at the service, so they knew whether they could meet their needs. Staff were supported through training and supervision to gain knowledge and skills to help them in their role. People were supported to eat a balanced diet and were able to choose what they ate.

Systems were in place for dealing with complaints. People were supported to maintain relationships with family and friends, and to engage in meaningful activities. Staff consistently strived to ensure that people had the best possible care, and that they were supported in a compassionate, dignified and safe way.

The manager of the service actively sought the views of people and their relatives about the running of the service. The provider had systems in place to monitor and improve the quality and safety of the service provided. There was a positive culture throughout the service. Staff told us they enjoyed working at the service and felt valued.

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

The last rating for this service was Good 15 November 2017.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe, effective, and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Davids House on our website at www.cqc.org.uk.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Is the service effective?

Good ●

The service was effective

Is the service well-led?

Good ●

The service was well led.

Dauids House

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 2 inspectors and 1 expert by experience.

An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Dauids House is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used all this information to plan our inspection.

During the inspection

We spoke in person with the manager. We also spoke with 4 people using the service, 7 relatives and 5 staff to get their experience and views about the care provided. We reviewed a range of records. They included staff files containing recruitment, training and supervision information, and peoples' files containing care and medicine records, risk assessments, care plans and reviews. We checked a variety of records relating to the management of the service, including audits, quality assurance, policies and procedures. We continued to seek clarification from the provider to validate evidence found. We requested additional evidence to be sent to us after our inspection.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Safeguarding concerns were recorded appropriately, investigated by the registered manager and action taken to ensure people's safety. This was in line with the provider's safeguarding policy.
- Staff were trained on how to safeguard people from abuse and were able to tell us what they would do if they suspected abuse. A staff member said, "I have had the training and know to report it to the senior staff and manager immediately."
- People and relatives told us they felt people were safe. A person said, "Staff are good I am well looked after and feel safe here."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- The provider was in the process of moving all care plans to an electronic system. Risk assessments contained information about risks to people which were assessed and reviewed regularly. Risk assessments highlighted areas of concerns appropriate to each person. There were actions recorded which could help mitigate risk to people.
- Regular checks were made on equipment at the service which staff used with people, such as hoists and pressure mattresses. Checks were also made to the premises to ensure these were safe for use. This included maintenance checks on gas, fire systems and water. This meant the provider had systems in place to keep people safe.
- Risk assessments included areas such as mobility, fluid intake, pressure sores. A staff member told us, "We ensure we understand people's needs and risks and work as a team to support people in the best way we can."

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- Recruitment processes were robust. Staff files we looked at the provider had made checks on staff to ensure they were safe to work with people. This included criminal record checks, employment history and identification.
- People told us they felt supported by the staff team. A person said, "They come when I call them", another person said, "They are trained well I think."

Using medicines safely

- People were supported to receive their medicines safely.
- People were supported by staff who followed systems and processes to administer, record and store medicines safely.
- During the inspection we saw medicine administration records were completed appropriately and regularly audited. Records showed staff administering medicines had received medicines management training.
- Staff received a medicines competency assessment before they were permitted to administer medicines to people. Staff competency was checked annually or more often if needed to ensure medicines were administered safely.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- We were assured that the provider admitted people safely to the service.
- We were assured that the provider used Personal Protective Equipment (PPE) effectively and safely.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Incidents and accidents were recorded so lessons could be learnt, and improvements made when things went wrong.
- Records were reviewed by the registered manager and immediate actions were taken to keep people safe. Follow up actions were taken by the management team and provider where required.
- Staff told us, they received regular updates from the registered manager on any changes as part of lessons being learnt.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed and care and support was delivered in line with current standards to achieve effective outcomes.
- Care plans were developed from the provider's initial assessment, with the support from the person, which covered all aspects of the person's care and support needs.
- Some people were hard of hearing and the staff could use written information to aid communication, There were signs saying "would you like to go in the garden or would you like tea or coffee" in large print.
- People and their relatives told us they were involved in the process. A person said, "We have lots to do we have a music person who comes in and a hairdresser which is great for me, a relative said, "Staff always inform us of any changes in my [relatives] care needs."

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- Staff undertook a range of training and had access to resources about their work.
- The staff were encouraged and supported to undertake relevant qualifications.
- There was good communication amongst the staff, with regular team meetings and sharing ideas and experiences. Staff regularly met with the registered manager to review their work and discuss any areas of concern.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink enough to maintain a balanced diet.
- People were supported to make choices around meal planning. Once a month the people living at the home chose a country to celebrate their food and culture. On the day of our inspection the chosen country was France. The activity board in the communal area was very visual and had the flag and information of the country. We observed staff supporting people to discuss the country and do a jigsaw of the flag. The menu was planned to include the French cuisine.
- People's support plans clearly detailed their eating and drinking needs and included their likes and dislikes.
- People had access to snacks and drinks during the day. A person said, "We can choose if we want a snack or have lunch dinner later, this is good for me."

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People were supported to live healthier lives, access healthcare services and support.
- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.
- The provider worked with other agencies to ensure people's health and care needs were met. People's care records confirmed referrals had been made to other healthcare professionals, such as GPs, dentists, chiropodist. A relative told us, "[Relative] is supported to any appointments they need to go to., They let us know how it went too."
- The doctor regularly visited and met with people. We observed a doctor coming to see someone on the day of our inspection. The staff arranged for other professionals to visit people when needed.

Adapting service, design, decoration to meet people's needs

- People's individual needs were met by the adaption, design and decoration of the premises.
- People who were experiencing dementia had a shelf outside their doors where there were items of interest to the person, for example photos of things they liked like music. People had pictures on their room doors saying what was important to them.
- People were supported to live in a safe, clean, well-furnished and a maintained environment, which met people's sensory and physical needs. People could bring furniture from their homes if they wished.
- There was an attractive and well-maintained garden.

Ensuring consent to care and treatment in line with law and guidance

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 MCA 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- Staff received training on how to protect people's rights and were aware with the processes and principles of the MCA.
- People and their relatives told us care workers offered choices and obtained their consent before providing care.
- We saw people had consent forms in place and staff acted in accordance with their wishes.

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 our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- The staff felt well supported and were happy working at the service. Some of their comments included, "I like the fact that we have great conversations with residents as part of our job. The care we give is much more than personal care and meals" and "I love chatting to residents, finding out what's important to them and helping them achieve their goals."
- People had good relationships with staff. They felt at home and safe at the service. They were able to live the lives they wanted and pursue their own interests. Some of the comments were, "It is great having the hairdresser come in monthly" and "The regular resident meetings were good and [people] felt listened too."

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 provider understood their responsibilities under the duty of candour.
- Duty of candour requires that providers are open and transparent with people who use services and other people acting lawfully on their behalf in relation to care and treatment.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The provider and staff kept up to date with regulatory requirements and good practice. They undertook regular training and had a range of information from different sources to help ensure standards were met.
- The provider had an effective quality and assurance system in place to monitor and improve the quality of care provided. The registered manager submitted timely notifications to CQC, and other relevant stakeholders, for significant events that had occurred at the service, such as accidents and incidents.
- The staff and management team were clear about their roles and responsibilities. There were suitable policies and procedures in place regarding good practice, guidance and legislation. The staff completed training and attended regular meetings to help ensure they understood these.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- People had been asked for their views about the service, their care, and their daily lives. The provider had carried out a recent survey which we saw on the day of our inspection, the outcomes were not yet provided.
- Staff undertook training in equality and diversity and understood how to respect and meet people's diverse needs.

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- There were effective systems for monitoring and improving the quality of the service. These included regular resident meetings for people living at the service for their views and carrying out a range of audits and checks.
- The provider also held quarterly meetings for relatives of people living in the home, this meant that there was a holistic approach to people needs and wishes.

Working in partnership with others

- The provider worked in partnership with others, The registered manager worked closely with the local authority, commissioning groups and other managers to make sure they understood and followed best practice.
- People attended regular appointments with healthcare professionals. We saw evidence the management team had liaised with other professionals to ensure people's needs were met. Where appropriate, guidance provided by key professionals, such as GPs were contained within people's care plans.