

Mr & Mrs S Blakey

# Arden House Residential Home

## Inspection report

Recreation Road  
Pickering  
North Yorkshire  
YO18 7ET

Tel: 01751473569

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Arden House Residential Home is a care home providing accommodation and personal care to 13 people aged 65 and over at the time of the inspection. The service can support up to 14 people.

The service is within one adapted building with accommodation and communal facilities over two floors. There is a stair lift to the first floor.

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

The registered manager provided leadership and oversight within the service. Some audits and records required updates, but the registered manager was confident that these would be completed within the next four weeks. We have made a recommendation in the report about this.

People felt safe and well looked after. All areas were clean, tidy and there was sufficient cleaning taking place to keep people safe from the risk of infection. Relatives said they were confident that staff provided good care in a safe way.

Care plans and risk assessments were in place for people's support needs. People and their families confirmed that they were able to contribute their views on care and support.

Systems were in place for the assessment, monitoring and mitigation of risk towards people who used the service. The registered manager analysed falls and incidents to ensure learning from events was undertaken. This meant risks to people's health and safety were reduced.

Communication within the service was good. Relatives were kept informed of their family member's health and welfare throughout the last nine months when they were unable to visit the service due to the pandemic.

People received their medicines on time and when they needed them. They had access to professional health care workers when needed, which helped to maintain their wellbeing.

Staff were patient, kind and respectful towards people. Care was person-centred and staff had time to chat with people during the day.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 2 November 2018).

### Why we inspected

The inspection was prompted in part due to concerns received about infection control and people's capacity to make their own choices and decisions. A decision was made for us to inspect and examine those risks.

We undertook a focused inspection to review the key questions of safe and well-led only. 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. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Arden House Residential Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Follow up

We will continue to monitor information we receive about the service until we 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?**

**Good** ●

The service was safe.

Details are in our safe findings below.

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

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Arden House Residential Home

## **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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

Arden House Residential Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority 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 one person who used the service about their experience of the care provided. We spoke with three relatives over the telephone. We spoke with the registered manager, one member of care staff and the housekeeper/cook.

We walked around the service and observed care and social interactions throughout the service using infection, prevention and control and socially distanced practices.

We reviewed a range of records. This included two people's care records and three people's medication records. We looked at three staff files in relation to recruitment and staff supervision. We looked at a variety of records relating to the management of the service.

#### After the inspection

We continued to seek clarification from the registered manager to validate evidence from the inspection.

# 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 remained the same. This meant people were safe and protected from avoidable harm.

### Preventing and controlling infection

- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

We have signposted the provider to resources to develop their approach.

### Systems and processes to safeguard people from the risk of abuse

- Staff were trained in safeguarding and had the skills and knowledge to identify and raise concerns internally and to relevant professionals.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.
- Families were confident that the service let them know if anything was wrong. One relative said, "If there is a problem then the manager or staff would call me. They know [Name] so well they can recognise if something is not right."

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

- People's care plans included risk assessments. These provided staff with a clear description of any risks and guidance on the support people needed. Some records needed reviewing and the registered manager said that these would be completed over the next four weeks.
- The registered manager monitored and analysed accidents, incidents and safeguarding concerns to aid learning and reduce the risk of them happening again.
- The environment and equipment were safe and maintained. Emergency plans were in place to ensure people were protected in the event of a fire.
- Staff training on health and safety had been completed. Staff had attended moving and handling, infection prevention and control and fire drill training.
- People and relatives were satisfied about safety in the service. One person who used the service said, "I feel safe here. The staff are lovely and I have no concerns or worries."

### Staffing and recruitment

- The registered manager was recruiting and inducting new members of staff. The registered manager was not using a tool to monitor the number of staff required based on people's needs, but said they would introduce this straight away as part of their quality monitoring process.
- Staff were recruited safely, and appropriate checks were carried out to protect people from the employment of unsuitable staff.
- There were enough staff on duty to meet people's needs. We observed that the service was calm, quiet and well organised. People's requests for attention were dealt with quickly and staff were working in an efficient way.

### Using medicines safely

- Medicines were safely managed and people received these as prescribed.

# 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 remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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

- Systems to monitor and assess the safety and quality of the service were in place. However, since June 2020 audits and the review of care records had been less frequent than usual. The registered manager had plans to bring these up to date.
- The majority of people could give consent to care, but where this was not possible then detailed and clear Mental Capacity Assessments (MCA) should be completed and kept in the care records. Where necessary people should be assessed around Deprivation of Liberty Safeguards (DoLS). The registered manager was aware of this and was in the process of completing an MCA and making a DoLS application for one person.

We recommend the provider reviews their management and oversight of safety and quality assurance processes and ensures it complies with best practice guidance.

- Daily visual checks were completed by the staff and management team to make sure people were safe and happy with the service they received. All feedback had been used to continuously improve the service.
- The management team communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.

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

- There was a positive, calm and friendly atmosphere within the service. Staff told us they felt supported by the registered manager and were confident in carrying out their roles and responsibilities.
- People were able to make their own decisions about their care and support. One person said, "The staff are marvellous, they give me support and advice when I ask for it."
- Families gave positive feedback about the management of the service. One relative said, "I think the registered manager is very well aware of the impact that Covid-19 is having on people who live there. They have done their best to keep people going as much as they can especially with visits. I think the registered manager has got the best interests of the people foremost in their mind which is as it should be."

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 understood their responsibility to be open and transparent and apologise to people if things went wrong.

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

- There was good communication with people and families. One relative told us, "I have spoken to the registered manager quite a lot. They give me genuine feedback about what is happening during the lockdown. I have kept in touch with [Name] through window visits and I call them every day. Name] has their own phone."
- During the corona virus pandemic the service had used phone calls, emails and IT (virtual meetings) to ensure people and relatives remained in contact with each other.

Working in partnership with others

- The registered manager had worked closely and collaboratively with the local authority and other professionals to make improvements and develop the service.