

Heathwaite Care Homes Limited

Twin Oaks

Inspection report

Victoria Road
Windermere
Cumbria
LA23 2DL
Tel: 01539448994

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Ratings

Overall rating for this service

Inadequate



Is the service safe?

Inadequate



Is the service effective?

Inadequate



Is the service caring?

Good



Is the service responsive?

Inadequate



Is the service well-led?

Inadequate



Overall summary

This inspection took place on 13 and 16 February 2015 and was unannounced. Twin Oaks is a large detached property situated not too far from the centre of Windermere. The building has been adapted for its present use as a small family run care home for up to seven people. There was plenty of communal space including a large lounge, dining room and outside garden areas. Accommodation was over two floors and the first floor is accessed by a stair lift. All bedrooms had ensuite bathroom facilities.

There was a registered manager in post. A registered manager is a person who has registered with the Care

Quality Commission (CQC) 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.

At our last inspection in January 2014 we found that the provider was compliant with six of the Regulations that we looked at. During this inspection we found a number of breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which

Summary of findings

correspond to the regulations of the Health and Social Care Act 2008 (Regulated Activities) 2014. You can see what action we told the provider to take at the back of the full version of this report.

The systems and practices in place for managing medicines in the home were not always safe. There was limited information about individual people's specific needs and records were not always accurate to be able to ensure that medicines were given correctly and consistently.

The recruitment procedures demonstrated that the provider did not operate a safe or effective recruitment procedure to protect the interests of people using the service.

Where safeguarding concerns had been noted by the staff these had not been acted upon to ensure that people who might be at risk were protected.

Where people had been assessed as being at a risk regarding their nutritional needs there were no clear records of how this risk would be managed. There was not always sufficient detail in some people's assessments and care plans to ensure that care and treatment was provided appropriately in order to meet individual needs.

Notifications required by the CQC by law had not been sent as required when things had occurred relating to people who used the service.

Systems for the assessing and monitoring of the safety and quality of the home were informal. The systems were not measurable or verifiable and did not allow the service to demonstrate its safety or qualities.

The home was decorated and furnished to a high standard. The surroundings were homely and the finer details in presentation provided an outstanding quality of environment for people to live in.

Staff working in the home had not received training in a variety of areas including induction training into the home and any ongoing training to develop their skills to deliver and promote current best practice.

People living at Twin Oaks said they were cared for extremely well and were more than happy with the care and support they received. People living there had good relationships with all the staff and felt very much part of the family atmosphere in the home.

The home had good links with the community and people living in the home were involved in a variety of activities.

Summary of findings

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 safe.

We were told by people living in the home they felt safe.

People who used the service were not protected against the risks associated with the unsafe management of medicines.

Concerns about the risk of abuse were not reported to the appropriate authorities.

The home was well maintained.

Inadequate



Is the service effective?

The service was not effective.

Staff recruited had not received any formal induction training.

Where nutritional support was required it was not formally monitored

People's preferences in food and drink were readily catered for.

Key requirements of the Mental Capacity Act were not fully understood by all staff.

Inadequate



Is the service caring?

The service is caring.

Care was provided with kindness and compassion.

The staff knew the care and support needs of people well and took an interest in people and their families to provide individual personal care.

People told us they were very well cared for.

Good



Is the service responsive?

The service was not responsive.

People needs were not always assessed prior to being admitted to the home.

Care plans were not always detailed enough to show how people's care and support was to be given.

People who used the service were supported to take part in a range of recreational activities in the home and the local community.

Inadequate



Is the service well-led?

The service was not well led.

There were no systems established to record quality monitoring and safety of the service provision.

Inadequate



Summary of findings

The provider and registered manager did not know the requirements of the regulations for notifying the CQC of matters relating to people who used the service.

People views of the service were not formally recorded.

Twin Oaks

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.

During the inspection we spoke with six people who used the service and a relative and a regular visitor to the home. We spoke with the registered manager, the provider who

was part of the care staff team and one care worker. We observed care and support and looked at the kitchen, communal areas, and with permission, some people's bedrooms. We looked at all of the records about people's care.

This unannounced inspection took place over two days 13 and 16 February 2015. The inspection team consisted of two adult social care inspectors. Before the inspection we looked at the information we held about the service and contacted local social work teams for their views of the home.

Is the service safe?

Our findings

People living in the home said they were very well cared for and they liked and trusted the staff. The staff consisted of the registered manager who was responsible for the day to day running of the home with the support of her partner the registered provider. The other staff members were two care workers and a relative of the provider. People told us that they felt safe living in this home. One person said, “I was so well looked after the first time I stayed that I’ve come back to be looked after again”. Another person told us, “It is a safe place to be. We really are looked after extremely well”.

We looked at the management of medicines in the home. People could choose to self-administer their medications but it was of concern that written assessments and care plans for medications were not always completed or regularly reviewed. Not all the assessments were completed with sufficient details to help ensure people received the right support to manage their medicines safely. We found that some medications prescribed to be taken as and when required were not always recorded. Recording of when these were taken would help to make sure that too many are not taken and that they were suitable for use with any prescribed medicines already being taken.

We looked at how medicines were recorded and found that it was not always possible to track the handling of medicines in the home because records of medicines received into the home and of unwanted medicines sent for safe disposal had not been made. Records showing the administration of medications were generally up-to-date but records were not always accurate in showing the application of prescribed creams. We found that there was not always clear information within peoples' care plans about the use of these creams. It is important that records of external preparations are completed, as for all medications administered.

This was a breach of regulation 13 management of medications of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 12(f) & (g) safe care and treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Because the provider failed to protect people who used the service against the risks associated with the unsafe use and management of medicines.

We were told by the provider and registered manager that they had noticed and recorded unexplained bruising to a person that had been in their care. This potential abuse had not been reported to the relevant authorities at the time that it was noted. Where allegations of abuse had been made about people who used the service the provider or registered manager had not notified the CQC.

We did not see that there were any written policies or procedures providing information about the local authority’s safeguarding protocols and procedures for staff to follow.

This was a breach of Regulation 11 safeguarding service users from abuse of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 13 safeguarding service users from abuse and improper treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Suitable arrangements were not in place to ensure that service users were safeguarded against the risk of abuse as reasonable steps to identify the possibility of abuse were not taken and appropriate responses to any allegation of abuse were not made. This breach has been dealt with by issuing a Warning Notice.

We did not see that the registered provider or registered manager had completed the appropriate checks when recruiting staff. Two people had been employed in November 2014. There were no records to show staff had checks completed with the Criminal Records Bureau (CRB) or with the Disclosure and Barring Service (DBS) by the registered provider. We did not see that the provider or registered manager had gathered any information themselves required in respect of the people being employed.

This was a breach of Regulation 21 requirements relating to workers of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (the Regulated Activities Regulations 2010) which corresponds to regulation 19 fit and proper persons employed of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. There were no records of the home’s recruitment processes that included all of the appropriate checks to ensure that the persons being employed were of good character or were physically and mentally fit for the work they were employed to do. This breach has been dealt with by issuing a Warning Notice.

Is the service safe?

There were sufficient staff available to provide care and support to meet people's needs. The home provided a service for people with a certain level of independence and did not have any regular waking night staff but there were other arrangements in place. The registered provider slept in the dining room and could call the registered manager

in, from their own house next door, if anyone required personal care. The registered provider stated if anyone was ill or required more assistance then the registered manager would make herself more available to meet their needs.

The home was maintained to high standards and provided a homely and pleasant place to live. The provider takes personal responsibility for the maintenance programme and upkeep of the gardens.

Is the service effective?

Our findings

People told us that their preferences in food and drinks were very well catered for. One person told us “The food is exceptionally good and all homemade”. Another person told us when they had preferred something else to eat this was “Never too much trouble” and their preferences were provided. The dining experiences we observed were very person centred, for example breakfasts served were to each person’s individual choice. People could choose where they would like to eat and some people had meals in their rooms.

An assessment for one person we looked at described them as being thin on admission. We did not see that any formal records of their actual weight had been noted. Nor did we see that any nutritional risk assessment had been included in their care plan. Where no accurate record of weight had been recorded it would be difficult to tell if their nutritional needs had been met. The registered manager who prepared most of the meals told us how the nutritional needs for people who looked thin were managed by fortifying their meals and by ensuring they had frequent snacks. We were also told where there had been continuing concerns these had been referred to the GP or dietician.

This was a breach of regulation 20 records of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 17(2)(c) good governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Because accurate information in relation to care and treatment provided was not always recorded.

The registered provider who has a national level 3 care qualification achieved in July 2013 and the registered manager told us they had not completed any refresher training for over two years. The two care staff employed had not completed any formal induction training since being employed in the home. Where staff had received any training from the registered provider or registered manager this had not been recorded. We did not see any records to

show that any member of staff had training for managing behaviours that might challenge the service. We did not see that staff had completed any safeguarding training for over two years.

This was a breach of regulation 23 supporting workers of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 18(2) staffing of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Because the provider did not have suitable training arrangements in place to support staff to enable them to deliver care and support safely.

We asked the registered manager about their understanding of the Mental Capacity Act (MCA 2005) and Deprivation of Liberty Safeguards (DoLS). The MCA 2005 sets out actions to be taken to support people to make their own decisions wherever possible. The registered manager told us she understood the requirements. However where one person had been diagnosed with a memory problem we did not see any assessments completed in line with the requirements of the Mental Capacity Act 2005. We were told on the second inspection visit that this person’s interests were protected by someone who had been appointed legally to be able to make decisions on their behalf about their care and welfare. The registered provider had gained verbal confirmation about this.

The registered provider told us that the service they delivered was in the best interests of people living there and that it was a unique style of care home for older people, in that it was of a very small scale. The registered provider also told us that the complex needs of people living with dementia would prove difficult for the service to manage.

People’s rooms were nicely decorated and personalised to the individual living in the home. A stair lift was available to access the second floor of the home for people who had difficulties in climbing stairs. Where people required special adaptations to assist with visual or hearing difficulties these had been provided and had greatly benefitted people with those disabilities.

Is the service caring?

Our findings

We saw that people were supported with kindness and compassion. People we spoke with were very happy about the care and support they received. One person told us, "It's great I can't fault them (the staff) in any way." Another person said, "They (the staff) take care of everything I need."

One person told us they had recently been ill and said, "The manager is very caring and has looked after me very well." A regular visitor to the home told us, "It's a lovely place and I think people are very well looked after."

Staff were very knowledgeable about people's abilities and preferences. People could speak with the registered manager and registered provider at any time they wanted to as both of them were present in the home almost all of the day and at night. People we spoke with valued their relationships with the registered manager and registered provider and expressed how they were well cared for and felt that they mattered. One person told us that when they went outside for a walk they were always accompanied by the registered provider for their safety and felt that this was "Very gentlemanly of him".

We heard staff saying words of encouragement to people to promote their mobility and independence. We spoke with a relative who told us, "I have no concerns about the care my relative receives. It's a great place, people are very well looked after."

During our observations we saw positive interactions between staff the people who used the service. There was friendly banter and staff spoke to people in a friendly manner and responded promptly to any requests for assistance.

We were told by the provider that people using the service were generally able to make daily decisions about their own care and people we spoke with told us how they chose to spend their time. People we spoke with told us they were able to choose what time to get up and how to spend their day.

We saw that people's privacy and dignity were respected. People could choose to spend time alone or with visitors in their rooms. We observed staff knock on doors and ask permissions before entering people's rooms.

Is the service responsive?

Our findings

People we spoke with told us they were happy with the service provided and how staff provided their support. One person told us, "If something's bothering me then I just say and they (staff) sort things out." Another person said, "There's never anything to complain about because it's so good here." People told us they could speak to the registered manager or provider and ask them anything. One person told us, "Nothing is too much trouble. They (registered manager and provider) are very good people and work hard."

People could choose how to spend their day and could take part in activities in the home and the community. People were supported to participate in their hobbies and interests which included having the local clergy visit for religious services, trips to the garden centre, shopping and visiting friends for meals out. People we spoke with told us they enjoyed their activities and one person told us, "It's good to be with friends and do things you like."

The registered manager was responsible for preparing and updating the care plans. We did not see how people had been involved in developing their care plans or that all people had signed to say that they agreed with their plan. Two people we spoke with told us they had never seen their care plans. This meant that people were not enabled to make or participate in making decisions relating to their care.

We saw on one person's admission assessment that their preferences to watch TV to late at night had been recorded as something they preferred to do. However this person's care plan stated that their TV was to be switched off at 10pm. This did not show that this person had their preferences considered or respected.

We saw comments written in one of the care plans describing a service user's behaviour which did not reflect that respectful consideration had been made in responses to their needs.

This was a breach of regulation 17 respecting and involving service users of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 9 person centred care of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Because the registered person did not make sure that service users were involved in making decision's relating to their care and treatment or treated service users with consideration and respect for their choices.

People had an assessment of their needs completed on admission to the home. We did not see that people had been assessed prior to their admission. This would enable the registered person to make an informed decision about whether people's needs could be met. We did not see that care plans had been regularly reviewed. For one person their care plan had been reviewed two years after their admission.

People needs had been identified however we did not see any detailed plans about how those needs would be met. For example, for a person who required support with washing and dressing their care plan stated 'help' with no guidance on how much or what help was required. A person who was described as thin in their care plan required support with their mobility. We did not see any management plan was in place to make clear how their pressure care needs and history of falls would be managed. Where people had a change in their health condition we did not see that their care plan had been reviewed to include how to manage the condition.

This was a breach of regulation 9 care and welfare of service users of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 12 safe care and treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Because the registered person did not take proper steps to ensure the service user was protected against the risks of receiving care or treatment that was inappropriate or unsafe.

We saw that people's daily routines were clearly documented in relation to the times of the day that things happened. For example waking and preferred bedtimes. We saw health care needs had been documented and details were kept of hospital and doctors' appointments.

People could receive visitors at any time and we saw they were welcomed. One person told us they could visit at any time and were always made to feel welcome. We were told by the registered provider that a local person who was completing a national award came into the home voluntarily on a regular basis to support with activities.

Is the service well-led?

Our findings

There were no formal quality assurance systems established in the home. Quality checks or auditing of the service provision had not been recorded. We could not see that any checks had been made to ensure the safety and quality of the service. The registered manager was running the home in the best interests of people living there. The registered provider told us in their view "It is a unique style of care home for older people". In that it was of a very small scale and accommodated people who did not have complex needs.

We found a number of concerns that related to the planning and regular review of care and how it was delivered to people such as assessing of needs prior to admission, people's preferences, care plans, risk assessment and working with people's consent. There were no systems in place to monitor these areas or to monitor standard and safety of medicines management.

Where there had been concerns about the safety of person it had not been reported to other professionals to obtain their advice. The risk identified was not appropriately managed by the registered manager or registered provider in order to protect the welfare and safety of the service user.

The registered manager and provider spoke to people and their family members often to ask their opinion of the service. These opinions needed to be recorded to enable the service to demonstrate what actions had been taken to address any suggestions made and to monitor the quality of the service provision.

We found during this inspection that aspects of how the home was run and managed were not compliant with the

essential standards of quality and safety required by law. This meant there was not an effective system in place to monitor the quality of the services provided to people or to identify, assess or manage risks relating to their health, welfare and safety.

This was a breach of regulation 10 assessing and monitoring the quality of the service provision of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 which corresponds to regulation 17 good governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Because the registered person did not have effective systems to regularly assess and monitor the quality of the service against the requirements set out in the regulations. This breach has been dealt with by issuing a Warning Notice.

Where incidents had occurred affecting a person who used the service requiring notifications to CQC these notifications had not been sent. The CQC had not received any notifications required in relation to the requirements of the Health & Social Care Act 2008 Regulations. We were told by the provider that he was not aware that they had to notify the Commission of such matters.

This was a breach of regulation 18 notifications of other incidents of the Health and Social Care Act 2008 (Registration) Regulations 2009.

We saw that people's health care needs were being met through good working relationships with the local doctors and community nursing services. Chiropody and physiotherapy was also arranged for those who required it. People had also been supported to access dental and optical services when necessary.

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 did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 9 HSCA (RA) Regulations 2014 Person-centred care</p> <p>The registered person did not take reasonable steps to ensure that the service users was protected against the risks of receiving care or treatment that was inappropriate or unsafe.</p> <p>The registered person did not make sure that service users were involved in making decision's relating to their care and treatment or treated service users with consideration and respect for their choices.</p>

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>The provider failed to protect people who used the service against the risks associated with the unsafe use and management of medicines.</p>

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>The provider did not have suitable training arrangements in place to support staff to enable them to deliver care and support safely.</p>

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 18 CQC (Registration) Regulations 2009
Notification of other incidents

Where incidents had occurred affecting a person who used the service these notifications had not been sent by the registered person.

The enforcement action we took:

Warning Notice to be compliant by 28 May 2015

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 17 HSCA (RA) Regulations 2014 Good governance

Systems and processes were not established or operated to ensure compliance with the requirements of the regulation.

The enforcement action we took:

Warning Notice to be compliant by 28 May 2015

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 13 HSCA (RA) Regulations 2014 Safeguarding service users from abuse and improper treatment

Suitable arrangements were not in place to ensure that service users were safeguarded against the risk of abuse as reasonable steps to identify the possibility of abuse were not taken and appropriate responses to any allegation of abuse were not made.

The enforcement action we took:

Warning Notice to be compliant by 28 May 2015

Regulated activity

Accommodation for persons who require nursing or personal care

Regulation

Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed

This section is primarily information for the provider

Enforcement actions

There were no records of the home's recruitment processes that included all of the appropriate checks to ensure that the persons being employed were of good character or were physically and mentally fit for the work they were employed to do.

The enforcement action we took:

Warning Notice to be compliant by 28 May 2015.