

Runwood Homes Limited

Stafford Hall

Inspection report

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Date of inspection visit:

18 April 2017

26 April 2017

Date of publication:

07 June 2017

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?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

Stafford Hall is one of a number of services owned by Runwood Homes Ltd. The service provides care and accommodation for up to 40 people who may need assistance with personal care and may have care needs associated with living with dementia. The service has two floors and there is access to these via a small staircase and a passenger lift. On the day of our inspection the service did not have any vacancies and the service does not provide nursing care.

The service had a registered manager in post. 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 2008 and associated Regulations about how the service is run. The registered manager of the service had been in post for two years.

The service was remarkably responsive. Since our last inspection the service had continued to make further improvements that had a positive impact on people's lives. Staff, relatives, professionals and people living at the service all felt the care at the service was exceptional and people were enabled to have a good quality life. Staff cared for people in a very kind and compassionate way, they knew them well and people were happy and relaxed at all times. Relatives were very positive about the care provided at the service and complimentary about staff and management.

The service was safe. Staff showed a good knowledge of safeguarding procedures and were clear about the actions they would take to protect people. People were kept safe and risk assessments had been completed to show how people were supported with every day risks. Recruitment checks had been carried out before staff started work to ensure that they were suitable to work in a care setting. There were sufficient numbers of staff on duty and these were regularly reviewed. People's medication was well managed and they received their medication as prescribed.

The service was effective. Staff had been offered training to help ensure they had the skills and knowledge required for their role as a care worker. They also received regular support and felt well supported by management. Management and staff had a good understanding of the Mental Capacity Act 2005 and Deprivation of Liberty and protected people's rights and freedoms.

People were supported to be able to eat and drink sufficient amounts to meet their needs. They told us that the food was good and said that they were able to choose alternatives if they were not happy with the choices offered on the menus. People were supported to maintain good healthcare and had access to a range of healthcare providers such as their GP, dentists, chiropodists and opticians. The service kept clear records about all healthcare visits.

The service was caring. People had agreed to their care and had been asked how they would like this to be provided. They were treated with dignity and respect and staff provided care in a kind, caring and sensitive

manner. Meetings had been held for the people living at the service, relatives and people felt listened too and that their views and opinions had been sought and the service had made appropriate improvements.

Detailed assessments had been carried out and care plans were developed around people's individual needs and preferences. People were seen to receive very personalised care which was unique to them and their care records were person centred. People's daily lives included activities and hobbies that interested them and their involvement in participating in activities they liked was seen to be important and that they enjoyed their days. The service was decorated and set out in a way that meant that all the people living there had a space that they enjoyed. The environment full of unique areas and ideas to keep people engaged.

People told us that they knew how to complain. The service had a complaints procedure in place which was clearly displayed. This provided information on the process and the timespan for response. We saw that complaints had been recorded and action taken included any lessons learnt and how to reduce the chance of it occurring again.

The service was well-led. It was evident from the responses we received from people and relatives, staff and volunteers, health and social care professionals that this was a well-led service.

There were systems in place to regularly assess the quality of the service and that people were kept safe. People were able to share their views at regular resident meetings or during the regular surveys. Relatives were positive about the care provided and had been given opportunities to give feedback and make suggestions to improve the experience for people who used the service.

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 remains Good

Medication was well managed and stored safely.

People were safe and staff treated them with dignity and respect.

There were sufficient staff on duty and they had a good knowledge of how to keep people safe.

Is the service effective?

Good ●

The service remains Good

People were cared for by staff that were well trained.

Staff had received regular supervision and felt well supported.

Staff had a good working knowledge of the Mental Capacity Act (2005) and the Deprivation of Liberty Safeguards (DoLS).

People were supported to have a balanced diet that promoted healthy eating.

People experienced positive outcomes regarding their health.

Is the service caring?

Good ●

The service remains Good

People were provided with care and support that was tailored to their individual needs and preferences.

Staff understood people's care needs, they worked with them closely to establish their likes and dislikes and responded appropriately. Staff provided people with good quality care.

Is the service responsive?

Outstanding ☆

The service was very responsive.

The service responded to people's individual needs in all areas of their lives and ensured they were able to have a good quality of life. Interactions were natural, kind and caring and it was clear staff knew exactly what each person needed to enjoy a full and meaningful day.

People were listened to and staff supported them if they had any concerns or were unhappy. They were involved in activities outside of the home and enabled to live as full a life as possible.

Is the service well-led?

The service remains Good

The service was well managed and new ideas had been introduced which improved people's lives.

Staff understood their role and were confident to question practice and report any concerns.

Quality assurance systems were in place and effective.

Good ●

Stafford Hall

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 checked 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.

The inspection was an unannounced comprehensive inspection and took place on the 19 and 26 April 2016. The inspection was undertaken by two inspectors on the first day, and one on the second.

Before the inspection we reviewed the information we held about the service. This included notifications, which are documents submitted to us to advise of events that have happened in the service and the provider is required to tell us about. The provider also completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan what we were going to focus on during our inspection.

During our inspection we spoke with the registered manager, deputy manager, and seven members of the care team. During the course of the inspection we spoke with seven residents and received feedback from nine relatives with their views about the service. Where possible we have added their comments within the report.

Not everyone who used the service were able to communicate verbally with us. Due to this we observed people, spoke with staff, reviewed records and looked at other information which helped us to assess how their care needs were being met. We spent time observing care in the communal areas and also the dining room. We used the Short Observational Framework for Inspectors (SOFI). This is a specific way of observing care to help us understand the experiences of people who are unable to talk to us due to their complex health needs.

As part of the inspection we reviewed four people's care records. This included their care plans and risk assessments. We looked at the files of two new staff members, which included their support records. We also looked at a sample of the service's policies, their audits, the staff rotas, complaint and compliment

records, medication records and training.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse and risks to people's safety as at the previous inspection, and the service's rating continues to be Good.

People living at the service and their visitors all reported that the home was a safe and caring place to be. One relative told us, "With mum being here it has given us all peace of mind. We know she is being well cared for. She feels safe and secure and they (the staff) know what to look for when she is upset and how to make her feel ok." Another reported, "We had read and heard about homes, but this place proves it wrong. We love it here and are full of admiration for the staff. We have booked a holiday as we know [persons' name] will be safe here."

Staff we spoke with knew what action to take if they had any concerns and how to protect people from abuse and avoidable harm. Care staff had received regular training and were aware of their responsibilities and how to take appropriate action if they had any concerns. The service had systems in place to help protect people from potential harm and included a whistle blowing procedure for staff.

People's care plans included assessments of risks and how these could be reduced to help keep people safe. People were supported to take risks and where possible encouraged to make choices and decisions during their daily lives. Systems were in place to record and monitor incidents and accidents and these had been regularly monitored and reviewed by the registered manager and provider. The service had emergency plans in place and included guidance to staff on hot weather, fire risks and floods.

Regular checks had been completed to help ensure the service had been well maintained and that people lived in a safe environment. Appropriate monitoring and maintenance of the premises and equipment had been on-going and the building had been well maintained. Areas of the home had been decorated since our last inspection and included themed areas, which provided people with talking points and visual stimulation. The service had recently arranged for new doors and windows in some of the upstairs bedrooms which improved security and warmth of the rooms.

The registered manager had systems in place to monitor people's level of dependency and identify the number of staff needed to provide people's care. They added that the assessing of staffing levels was an on going process and during our inspection we noted that there were sufficient care staff available to meet people's individual needs. People were seen to be well supported and we saw good examples from care staff where people were provided and assisted with care promptly when they needed it. Staff confirmed that they there were sufficient staff and one added, "We do not use agency staff. We always have people who will do extra shifts or bank staff and the staff do not like using agency as they do not know the person or what their needs are." This helped with continuity of care for people as they knew the staff and that their care would be provided in the way they wanted.

The service followed correct recruitment practice and ensured correct checks had been completed on all new staff. We viewed the files of the last two recruited staff and these contained the required

documentation. The service also had a probationary period in place and a disciplinary procedure, which could be used when there were concerns around staff practice which would help to keep people safe.

People had received their medicines safely and as prescribed. Medication had been administered, stored safely and recorded in line with the service's medication policy. Regular audits had been completed and staff who administered medication had attended regular training and received six monthly competency checks. Records of medicines that had been destroyed or returned to the pharmacy when no longer required had been kept, which helped to ensure that all medicines could be safely accounted for.

Is the service effective?

Our findings

At this inspection we found staff had the same level of skills, experience and support to enable them to effectively meet people's needs as we found the previous inspection. People continued to have freedom of choice and were supported, where appropriate, with their health and dietary needs. The service's rating continues to be Good.

New staff had completed an induction training programme when they first started working at the service. This consisted of completing mandatory training and also working 'shadow shifts' along an experienced staff member and gaining advice/support on how to meet people's needs. New staff had also completed the Care Certificate, which is recognised qualification and induction into care.

Staff had received regular support through one to one sessions, meetings and appraisals. Systems were in place to ensure staff received supervision in line with company policy. Staff confirmed they received regular support and added that they felt supported by the management and the care team managers, and could ask for support and advice at any time. Meetings that had occurred showed these were an opportunity for staff and management to communicate and receive updates in subjects such as the Mental Capacity Act, safeguarding people, health and safety and people's care plans.

There was a continual training programme available for all staff and training was closely monitored by the registered manager to ensure it was both up to date and relevant. Where gaps existed courses had already been identified and updates arranged. People received effective care and care staff had the knowledge and skills required to carry out their role as a carer. Staff spoken with were knowledgeable about people's needs and were seen to provide care and support promptly. Staff confirmed they had received regular training and felt they had the knowledge and skills to carry out their roles and responsibilities as a care worker. They had also been provided with specialist training relevant to the people they provided care and assistance to. The registered manager had recently organised training to assist staff to identify those people at risk of falling and which provided them with guidance on what action could be taken to help reduce the risk.

The service had arranged for all staff within the company to complete the Gerontology Test (GERT) and feedback from staff was very positive. This is a specialised suit and equipment which helps people to understand what it would be like to live with a number of conditions such as dementia, Parkinson's and visual impairment. It helps the person to understand how coordination, vision and general mobility can be affected when living with these conditions. The service also had access to the company's dementia team who supported the service and regularly visit and offer support and make suggestions on how to improve people's lives and give relatives and staff a better understanding.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA) 2005. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether staff were working within the principles of MCA and DoLS. We found the registered manager had a good understanding of MCA and DoLS and had made appropriate referrals.

People's capacity to make day to day decisions had been assessed to help ensure they received appropriate support. Staff we spoke with demonstrated an awareness of the MCA and DoLS and confirmed they had received training. This showed that staff had up to date information about protecting people's rights and freedoms.

The registered manager had developed a system to help assess people's ability to make decisions and give consent. This consisted of a set of questions which each person was asked and helped identify the person's understanding and how much assistance they needed with certain tasks and whether they were able to give their consent. This also provided a base line on future questionnaires and whether further assistance was needed. The registered manager stated, "This has been really good as we have learnt so much more about the people by doing these questions it really helps to identify how much they understand." Relatives were also positive about the help and assistance they received from the registered manager and staff at the service and one had written in to say 'thank you' for the advice and support they had been given in applying for the Power of Attorney for a relative. Another had written in and stated, "As a family we have peace of mind that Mum's best interests are being met by the staff of Stafford Hall."

People were supported to have sufficient to eat and drink and maintain a balanced diet. Staff had a very good understanding of each individual person's nutritional needs and how these were to be met. People's nutritional requirements had been assessed and their individual needs were well documented and included their likes, dislikes, dietary or cultural needs. There were nutrition and weight charts in place to enable care staff to regularly monitor people and where risks had been identified or where people required assistance from a nutritionist or healthcare professional this had been gained. Relatives were very positive about the food and their comments included, "There are snacks around the home and people will help themselves to crisps and grapes" and, "The meals provided are plentiful and nutritious and mum is well fed." One relative went on to tell us that they were always offered a meal when visiting and had even been offered Christmas dinner so we could spend time with their relative, which they added was very important to them.

We completed an observation of a lunchtime meal during our second day of inspection and found the food looked appetising, was hot and people were very complimentary about their meals. Those people who needed assistance were provided with this appropriately and with dignity and respect. The service also had protected meal times so visitors were requested not to call during these set times. Relatives felt this was a good idea and one added, "I think the protected meal times are very good, I would not like anyone sitting and watching me eat. I always work round the times so I know [person's name] is not distracted by my visits." On our second visit to the service it was noted that one person was having breakfast at 10:45am. Staff advised us that this person 'Liked to have a lay in some days' and they had chosen not to get up early that day, which was clearly supported by the staff.

People had been supported to maintain good health and had access to healthcare services and received ongoing support. Referrals had been made to other healthcare professionals when needed and this showed that staff supported people to maintain their health whilst living at the service. One relative stated, "They always keep us up to date on health issues and get [person's name] the help they need." Another added, "We have confidence that they will ring us if there are any issues. When people get old they are so dependent on the carers and we can be confident that [person's name] gets the support they need." Examples of where the service was willing to go above and beyond were provided. This included one person who had needed a hearing aid for years, but had always refused an appointment. Their relatives told us, "Our mother has needed a hearing aid for years, but would not agree to have one. They [the staff] have arranged to take her to the hearing clinic, which she would not have done with us, but she will do it for the staff, I think it is excellent." Another added, "Their care and attention is over and above the best we could have hoped for. [Manager's name] was happy to pick up and take dad to visit my mum in hospital when she needed to be

admitted a couple of months ago. They are so caring."

Is the service caring?

Our findings

At this inspection we found people were as happy living at the service as they had been during our previous inspection. The service's rating continues to be Good.

People were seen to be relaxed with staff and given the time and support they needed. Care was provided with kindness and compassion and people had regular contact from staff during our inspection to ensure they did not need anything and were comfortable. People were observed with care staff and they showed through their body language that they were happy and comfortable with the care being provided. Staff were seen responding to people's needs quickly and they were kind and caring in their approach. Feedback from relatives was very positive and included, "I can't express enough how happy we all are with the care, love and attention my mum receives from all the staff at Stafford Hall. Their care and attention is over and above the best we could have hoped for." Another said, "Whilst mum has been in Stafford Hall the relief of seeing her being so well cared for and having constant company has not only improved her quality of life and her safety, but has also allowed me to have peace of mind."

We saw that people's privacy and dignity was respected and care staff were polite and courteous and were observed knocking at doors before entering. Staff knew the people they were looking after very well and we heard them addressing people in an appropriate manner; clearly choosing the most appropriate form of address by either using their first name or a name the person had chosen to be called. There was lots of laughter and chatter during the day and it was clear that people were happy living at this service and they were comfortable with the staff and care they received. Feedback from a relative visiting the service included, "All staff are consistently welcoming, friendly and approachable and treat mum and our family with respect and consideration at all times."

People were encouraged to be part of their care and the care staff were observed providing support and encouragement when needed. Each person living at the service was clean, tidy, dressed appropriately for the weather and looked comfortable. People told us that they were well treated and one relative told us, "We are really thrilled with the care [person's name] receives and they treat her well. The staff work hard and they are a good team who do a great job."

Where possible people were supported to express their views about their care and were well supported. People at the service and their relatives told us that they had been involved in decisions about their care and changing needs and families had regular contact with the registered manager and staff. Relatives had been actively involved in people's reviews and any decisions on their care. If someone did not have access to family or friends that could support them, the service would arrange for an advocacy service to offer independent advice, support and guidance to individuals.

Relatives wanted to tell us how good the service was and the care being provided, feedback included, "All the staff are lovely and they make you feel welcome and they are very friendly" and, "It does not matter what time of day we visit whether it is night or day they we are always made welcome."

Is the service responsive?

Our findings

People received a high standard of personalised care that was responsive to their needs. It was clear during our inspection that the registered manager had worked with the staff, people and relatives to look for ways that would improve people's lives. Since being in post the registered manager had introduced a number of projects and ideas to the staff team and it was clear that the service had improved and developed since our last inspection visit. People were receiving care that was very personalised to them and this helped to improve their health and wellbeing, and enabled them to have a better quality of life. One relative told us, "There had been such a difference to our mother's life since she has been here. We wish we had done this years ago." Another added, "It is a fantastic home."

People and their relatives had been actively involved in the assessing and planning of their individual care needs. Pre-admission assessments had been completed and people or their relatives had been invited to visit the home to look at the facilities on offer and to meet the staff team. The service provided written information about what they were able to offer, to help people make a choice on whether Stafford Hall would be right for them. One relative told us, "Finding a suitable establishment for care for our mum was extremely important to my brother and I. I spent a great deal of time and energy researching local care homes prior to reaching decisions that Stafford Hall ticked all the boxes." Relatives told us how welcoming the service had been and that the registered manager had been happy to answer any questions and help them through the admission process.

The assessment process gathered information about the person's care and support needs and provided a 'whole picture' of the person including any care needs due to the person's diversity. Care plans were detailed and covered the person's cognitive and physical abilities, their physical health and well-being, their prescribed medicines and any dietary requirements. It also included the person's lifestyle choices, their preferences and some life history. Staff were very knowledgeable of people's needs and they received the support and assistance they needed in the way they wanted their care to be provided.

As part of the continual improvement to people's lives and well being the registered manager had looked at the importance of hydration of people and how this can influence falls, pressure care and urine infections (UTI). They had introduced a chart to assist with easily identifying who may be at risk of dehydration, pressure sores or prone to a UTI. The 'fluid champions' were responsible for ensuring that people received the allocated fluid allowance each day and if this was not achieved then it would be their responsibility to take appropriate action. Since introducing this they had found that a number of people's fluid intake had increased. Furthermore, where concerns had been raised by the fluid champions the service had then sought the appropriate medical assistance for this person. Hydration stations had also been introduced around the home to increase fluid intake and this included a set of bar 'optics' which had a variety of juice for people to choose. People spoken with thought the optics were a good idea and brought back memories of going to the local pub. Through this project the registered manager had increased staff learning and skills around the importance of hydration, which had impacted positively on people's well-being and had reduced the number of UTIs people developed. Health care professionals were positive about the changes in the service and added that they visited the home less frequently due to the improvement in pressure care.

The registered manager had further arranged for a number of staff to identify areas of interest within the service that they could champion. There were now staff who were weight monitoring champions, call bell and environment champions and key worker champions. Regular feedback was gained on each of the areas covered and staff were also able to speak with 'a champion' if they needed further guidance and advice in a particular area. This helped to ensure that these areas were continually monitored and the registered manager had used the information gained to arrange further medical support or put systems in place to ensure people received extra support when needed.

As part of this process of improvement the 'Butterfly Project' had been introduced into the service. This included guidance to staff in people's rooms which stated, 'Today you are a butterfly flitting from room to room making seconds count and brightening up my room. Feel free to enter with a smile upon your face and grace me with your presence for today is not to waste.' The registered manager advised that it was aimed at people who spent a lot of time in their rooms, who did not communicate well and could easily be isolated. A butterfly has been placed on each person's door to help identify those in more need and staff called in regularly and documented their contact and interaction. Snack boxes had also been placed in people's rooms and staff were seen offering these when they 'flitted' in and out. We observed staff with one person who spent a lot of time in their room and they went in to ensure they had their favourite music on and also offered snacks, they 'thanked' the staff and added that they loved listening to their music. Another person was offered a box of chocolate and spent time choosing one of their favourites and was smiling and happy by the time staff left. When speaking with staff about the project they were very positive and added that it made them think about what they were doing when they went into people's rooms and they now made sure that each visit counted; however small.

Each person had a key worker and they were now allocated one to one time to spend with people. Time had been set aside on a weekly basis, so each person did something that was individual to them. This included going for a walk, sitting in the garden, looking at scrap books, having their nails painted or a hand massage, reading papers and magazines, reading letters or just having a chat. Scrap books had been introduced to help staff identify areas that could be discussed with each individual and make the one to one time they spent with them 'quality time' and relevant. One person who liked to travel had a scrap book with postcards, pictures and details of food and places to visit. This enabled the staff to interact with them and ensure the person gained the most out of their one to one time. One relative told us they felt this was a great idea and went on to tell us how they looked forward to the key worker ringing them up and tell them what they had been doing and they felt they were more involved in their relative's care and it was nice to know what they had been doing. Looking at records of time spent it was clear to see that each person had spent their time the way they wanted and it was very individualised. Records included, 'Sat with [person's name] and chatted whilst cutting and filing their nails' and, 'Sat with [person's name] and read a book about plants and eating fruit we had cut up. We had our picture taken.' Staff were positive about the new arrangement and many told us how they had spent time with the person they cared for to see what they wanted to do. Trips to the shops had also been arranged and it was clear that both staff and people looked forward to their time together. The one to one key working sessions were having a positive impact on the people who lived at the service; allowing quality one to one time for staff and people to build special relationships.

One person told us, "It is evident to everyone who has visited mum in Stafford Hall how much her quality of life and health have improved by the stimulation of company and activities this placement and staff have provided." The service actively supported people to follow their interests and hobbies and gain access to the local community through day trips and events. The service had an activity coordinator who organised regular entertainment and daily activities. These included ball games, hand massage, word games, music, jig saws and afternoon teas. They also had regular church services for those who wished to attend. The activity coordinator advised us, "Trips out have increased and we try to take people out more. It is horses for

courses; we are all very different and like to do different things. We went to a Chinese restaurant the other day. One lady who does not eat very much filled their plate up three times, which was lovely to see."

The service used innovative and individual ways of involving people so that they felt consulted, empowered, listened to and valued. Following a severe decline in one person's health they found their speech had been affected and communication was becoming very difficult and frustrating for this person. To help assist with this the registered manager purchased an IPAD and downloaded a speech application. Staff were now able to sit with this person and assist them to communicate more effectively. Staff had found that this had enabled the person to be more involved in their care and surroundings, had enhanced their communication and generally provided them with a better quality of life.

Another example was where staff had introduced doll therapy for one person and they have found this to be really helpful for them. Through the use of the therapy this person was no longer on a high dose of medication and they were now more settled, which had improved the care that staff were able to provide this person. During our inspection this person was seen 'cuddling' and 'talking' with their doll and smiling from the experience. Staff were also heard chatting with the person and asking about their doll, which created an opportunity for a chat and some good interaction on both sides. It was clear that this person was content and happy.

As well as a real focus on people's individual social wellbeing, the service also ensured that there were many opportunities for socialisation in the service and out and about to add to people's quality of life. There were many photographs around the service of parties, entertainment and general outings that people had taken part in. The atmosphere within the service was friendly and laughter and chatting could be heard throughout the day. People we spoke with told us they could join in with the organised activities if they wished, but some preferred to watch the television or stay in their room; which showed that people's individual choices and preferences were respected. Feedback on activities included, "Activities are organised but mum chooses not to join in and prefers to sit in the quieter lounge, she prefers not to interact with people" and, "Lots of entertainment come in. We had a man with a guitar the other day and he was very good. We also had a school choir visit us and sing to everyone." The garden had also recently been updated with new garden furniture and was a pleasant area to sit. This received very positive feedback from relatives. One told us, "Changing the garden has had a positive impact for those that live at Stafford Hall. It has provided an area people want to use and they look forward to being in it."

Since the last inspection many of the corridors and communal areas had been redecorated. Areas around the home had their own themes and there were many stimulating pictures and images, which assisted those people living with dementia. Each bedroom door had a door knocker with a number and the person name and key workers detail. Photo frames had also been placed on people's bedroom doors with details of each person and a bit of personal history. These were very personalised and provided information to staff about the person's preferred name, when they were born, where they were born, who they married and the year, where they met, how many children they had and how they spent their working life. These provided the reader with person centred details of the history of each person and ideas for starting conversations that were relevant to each individual.

The registered manager was keen to link with other services and the community to provide enriched opportunities and life experiences for people living in the service. The registered manager was working with another manager and staff to organise a concert for all the people living within Runwood Homes services and also for the wider community. The aim of the concert was to promote people getting out and about, mixing with the younger generation and creating an understanding of dementia care to show that, with the right approach, no disability can stop people enjoying life and having fun. This had been arranged to take

place in August 2017. The registered manager was very enthusiastic about this and hope to make it a regular event.

People's feedback was valued and matters raised were are dealt with in an open, transparent and honest way. The service had effective systems in place for people to use if they had a concern or were not happy with the service provided to them. People had been provided with information on how to make a complaint and this was also available within the service. The service had set forms to record details of the any complaints they received and this included how these were investigated, the outcome and what had been learnt from the complaint. A complaint log was also in place so management could identify any trends or reoccurring issues and complaints had been monitored as part of the monthly audit. Management were seen to be approachable and they listened to people's experiences, concerns or complaints. Care staff stated that they felt able to raise any concerns they had. Relatives spoken with said they would be able to speak with management if they had any concerns, but added that they were happy with the service and that they had no concerns. They all added that they found management very approachable and were seen entering the office during the inspection for updates on relatives or just for a general chat. Relative's feedback included, "I know I can discuss any concerns/complaints I have with the manager and they are swiftly addressed" and, "We are aware of people who have had issues in other homes and they have not been listened too. [Manager's name] wants to know and will deal with things straight away."

Compliments the service had received included, 'Thank you to all the wonderful staff for all their kindness and support you have shown toward and father and to me. It was helpful to see that he was being cared for during a difficult time,' and, 'Thank you for all you hard work and care looking after our mother, We appreciate all that you have done for many years.'

Is the service well-led?

Our findings

At this inspection we found the service was as well-led as we had found during the previous inspection. The service's rating continues to be Good.

The registered manager of the service had been in post for two years. A registered manager are like 'registered person' and have legal responsibilities for meeting the requirements in the Health and Social Care act 2008 and associated Regulations about how the service is run. The registered manager was supported by a deputy manager who had worked at the service for some time.

People received good quality care and the service had a number of systems in place to help monitor the standard of care received. The registered manager was committed to delivering a high standard of care and carried out regular checks and audits such as health and safety, medication and fire systems to ensure people's health and welfare. Regular night visits had also been completed by management to ensure people received the care they needed and night staff had support.

Staff told us they felt supported and valued and enjoyed working at the service. Regular supervision and staff meetings had been organised and staff morale was very good. Some staff spoken with had worked at the service for a number of years and were very positive about the management of the home, adding that they had seen improvements since the registered manager had been in post. Management had systems in place to help ensure staff were kept up to date with information about the service and the people who lived there and this included staff handover meetings.

Staff were aware of their responsibilities and there was clear accountability within the staffing structure. This meant that people living at the service benefitted from a cohesive staff team, who worked together to deliver good care. The service had clear aims and objectives and also a 'service user's charter', which included dignity, independence and choice. The ethos of the service was made clear to people through the service's aims and objectives and staff had a good understanding of the standards and values that people should expect.

People told us that the registered manager's door was 'Always open' and they were very approachable. People who lived at the service and their representatives were provided with regular opportunities to provide their views about the care and quality of the service. The registered manager was seen speaking with people and relatives during the inspection and we were advised they had daily interaction. They knew people very well and had a good understanding of their care needs and each person as an individual. Regular quality assurance questionnaires had been sent to relatives and people who used the service to gather their views and opinions. Information from these was collated and an action plan produced where issues had been raised. Meetings had occurred with people who lived at the service and their relatives which showed they had been made included in feedback on the service. The registered manager also held a 'surgery' each Wednesday from 17:00 for anyone who wished to meet with her. Feedback from one relative included, "It is like having a second family, the carers are absolutely lovely. It all stems from the manager as she is excellent." Another added, "We have been very impressed and have been since [person's name] has

been here."