

Sunnyside Care Homes Ltd

# Sunnyside Care Homes Limited - 410-412 High Road

## Inspection report

410-412 High Road  
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20 June 2016

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service effective?

**Requires Improvement** ●

Is the service responsive?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

This inspection took place on 20 June 2016 and was unannounced.

We had carried out an unannounced comprehensive inspection of this service on 14 and 16 September 2015 where a breach of legal requirements had been found. We found that systems were not in place to adequately minimise risk and to ensure that people were supported as safely as possible. After the comprehensive inspection the provider wrote to us to say what they would do to meet the legal requirements in relation to the breach.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the "all reports" link for Sunnyside Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Sunnyside Care Home provides accommodation and support with personal care for up to seven people with a learning disability. At the time of our visit three people were living there.

There was no registered manager in post as the previous registered manager was in the process of cancelling their registration and the current manager was in the process of applying to be the new registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers they are registered persons. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

Since our last inspection the service had made improvements to raise the quality of care. We found the registered provider had taken sufficient action to ensure that people's risk assessments were detailed and person centred. People were looked after by staff who had a good understanding of safeguarding.

The manager was well regarded by staff, relatives and people who use the service.

People received care from staff who had regular training and whose knowledge and skills were able to meet people's needs. We saw staff were supported in supervision meetings with their managers. The service had safe recruitment procedures and new staff went through a comprehensive induction to make sure they had the confidence, skill and knowledge to support people well.

People were referred to other professionals as needed. People had care plans which were personal to them and they were asked to contribute to the plans in ways that suited them.

People were asked to say if they had concerns or complaints through using easy to read surveys and had been helped to complete these. People's families were asked to say what they thought of the service

through a survey and through talking with the manager and staff.

People were supported in a safe, clean and spacious environment where the manager carried out regular health and safety checks. Since our last inspection a new deputy manager had been appointed which ensured that managers were available. The premises had also been refurbished to a clean and modern standard.

## 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 safe.

People's risk assessments were detailed and individualised.

The service had complied with all the actions outlined in the enforcement notice from the fire service.

There were systems in place for regular health and safety checks.

This meant that the provider was now meeting legal requirements, so we have revised our rating of this key question to 'Requires improvement'; however to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for safe at the next comprehensive inspection.

**Requires Improvement** ●

### Is the service effective?

The service was effective.

Staff received support and training to meet the needs of people living at Sunnyside.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for effective at the next comprehensive inspection.

**Requires Improvement** ●

### Is the service responsive?

The service was responsive.

People were referred to other professionals in a timely manner when this was needed.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for responsive at the next comprehensive inspection.

**Requires Improvement** ●

## Is the service well-led?

The service was well-led.

The current manager had driven forward improvement and had appointed a deputy manager. The manager was held in positive regard by staff and relatives.

There were systems in place for quality assurance checks.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for well-led at the next comprehensive inspection.

**Requires Improvement** 

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## **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.

We undertook an unannounced focused inspection to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 14 and 16 September 2015 had been made. We inspected the service against four of the five questions we ask about services. Is the service safe, is the service effective, is the service responsive, is the service well- led. This inspection took place on 20 June 2016 and was unannounced.

During our inspection we spoke with the manager, three members of staff and one person who used the service.

We looked at three care plans, two staff files and three medicines records. We observed people's interaction with staff. We also looked at staff training records, staff meeting records and at a number of safety records for the premises.

After the inspection we spoke with two health care professionals who are involved with people who use the service and two relatives.

# Is the service safe?

## Our findings

One relative told us, "I am quite sure they are safely looked after." One member of staff told us, "It is very safe here because we follow the policies." One person told us "I love [staff member] who works here at night."

At the last inspection in September 2015 we had found a breach of regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014 as people had not been cared for in a safe environment and this placed them at risk in the event of a fire. People had not been adequately protected from risk, which resulted in a very serious incident at the service in August 2015. Following a fire safety inspection in August 2015, the fire service had served an enforcement notice on the provider.

During this visit we saw people were supported in a safe environment. An outside company had carried out a health and safety audit in March 2016. The service had fully complied with the requirement laid out in an enforcement notice which had been served by the fire service. We saw a letter from the fire service dated 27 October 2015 which confirmed the works had been satisfactorily completed within the specified time limit. We saw weekly fire checks were carried out and the last fire drill was in April 2016.

After the last inspection a social care professional told us the risk assessments for people had been of a very poor quality and were general and not relevant to each person's individual needs.

During our focused inspection of 20 June 2016, we found that people had risk assessments which were relevant and personal to them. Some of these risk assessments had been written in an easy to read format and the views of each person were included in the assessment. Each person had a personal emergency evacuation plan. People's files had photographs of equipment and guidelines on how to use this safely. They also included information about people behaviours and how staff should respond. Staff told us some people could say if something was wrong but for others they could tell from facial expressions and behaviour when something was not right. Staff told us they were trained to use equipment such as a hoist and were confident they knew how to support people safely. People were supported by staff who had a good understanding of safeguarding. Staff were able to give us examples of types of abuse and what they would do if they became aware of any concerns. Records showed that the manager had taken appropriate action when staff displayed poor practice and disciplinary procedures had been used.

# Is the service effective?

## Our findings

One relative told us, "I am quite happy with how they are being looked after."

At the last inspection in September 2015 we found systems were in place to support staff but these needed to be more robustly implemented to ensure that training was up to date. We also found that the service looked rather shabby and was in need of redecoration to provide a comfortable, homely environment which met people's needs.

During this visit staff told us they had training to help them do their job well. We looked at the training record and saw they had up to date training in a range of areas which enhanced their skills and knowledge about how best to support people. One healthcare professional told us one person's medicine for their particular health need had to be changed and the provider had paid for staff to have the specialist training in how to administer the new medicine.

We looked at two staff records and saw that staff had received regular supervision which helped to ensure they could provide effective care and support to people. One staff member told us, "I am supervised by the deputy manager every month, she is supportive." There were regular staff meetings and records were kept of the meetings. Staff were asked to sign and date a copy of the notes taken at the meetings to make sure everyone was up to date. Staff had a communications book they used to report any issues to the manager. Staff meetings covered issues such as reminders for staff, staff congratulations, staff suggestions, quality assurance issues, service user changes and included actions to be taken and timescales.

We spoke with a new member of staff, they told us they had a good induction which included a four day, face-to-face training course at head office. They had been able to do on line learning on the computer and time had been given for them to do this at work. They had also been able to shadow other staff to learn how best to interact with people and how to learn people's likes, dislikes and how they wanted to be supported.

One staff member told us, "I like working here because it is very personalised. I am very happy working here, I have progressed well."

The service had been refurbished throughout. During our visit workmen were putting the finishing touches to the work. The premises were modern, bright, spacious and clean. People had chosen the colours for their own rooms and their furniture. They had personal treasures which reflected their personalities and likes and dislikes. Bathrooms had been refurbished and were spacious, some had equipment for people who needed help with their mobility.



## Is the service responsive?

### Our findings

After our inspection on 20 June we spoke with two healthcare professionals. One professional told us, "Staff ring me and chase me for things they need and alert me if there is any deterioration." Another health professional told us, "If they are not sure about something they call us, they are quick to call us."

At our last inspection in September 2015 we found that the service was not consistently responsive. A social care professional told us there had been issues due to a lack of responsiveness, an example was given about not referring people to external services in a timely manner. We also found that most activities for people were limited and repetitive and the manager agreed to develop the service's activities programme further.

During this visit we looked at one person's review of their care and support. Notes from the review highlighted the need for referral to another healthcare professional and we saw this referral had been made. Another person's records showed that they needed dental treatment and this had been arranged. People's health appointments were recorded in their files.

We looked at people's care plans and saw they had dedicated "talk time" with staff who knew them well. We saw that when people had raised issues they had been dealt with. For example, one person was being supported to apply for a place at college. Because staff knew people well they were able to support people's religious and cultural needs. One person was supported to go to church and another person had food that was in accordance with their religion. One person liked to go out shopping and went out every day. One person enjoyed swimming and was supported to do this. One person loved to look at trains and lorries and enjoyed going to the nearby station. The person enjoyed sitting near the front door at times during the day where they could watch the traffic. All three people had just returned from a holiday to butlins. One person told me how much they had enjoyed the trip and told me about the entertainment they had enjoyed. During our visit we saw people playing board games with staff.

There was a clear complaints procedure for people to use and people's care plans showed that this had been explained in a way they could understand. Staff told us how they used pictures to help people make a choice or show things and watch for people's reactions to make sure that they understood what people wanted or needed.

The manager told us that when they looked to see if they could support someone who wanted to move to Sunnyside they made plans for people to spend a little time there first. They told the people living at Sunnyside about the new person and invited the new person to have a meal with the others and then offered an overnight stay to make sure that any transition to Sunnyside was well managed.

## Is the service well-led?

### Our findings

People, staff and their relatives were complimentary about the management of the service. One relative told us, "The manager always has an open door and he will listen and act on what I tell him." Another relative echoed this by saying, "If there are any issues the manager will sort it out."

At our last inspection in September 2015 we found the service was not constantly well-led. The registered manager had not been at the service since June 2015. An interim manager had been covering the service for three days a week since then and was currently applying to become the registered manager.

On our visit on 20 May 2016 we saw that the manager had continued to lead service improvements and was pursuing his application to become the registered manager. There was now a deputy manager in post to ensure that there was always a management overview of the day- to- day running of the service.

The manager had put systems in place to check the quality of the service which included performance management systems. The deputy manager and senior staff were required to carry out regular audits which were then double- checked by the manager. A number of quality checks had been introduced. There was now a duty checklist for each shift to complete.

Staff told us, "The manager is very strict, always on top of things, very supportive, keeping an eye on our training." Another staff member told us, "The home is well run, people are safe here. We are asked to contribute and make suggestions."

Staff told us, and records confirmed, that team meetings were held regularly. Staff told us that they were encouraged to make suggestions that could improve the quality of the service. One staff member told us, "The home is well run." Another staff member told us, "We are asked to contribute, I can make suggestions, we all put in together."

We saw the service had a clear complaints procedure for people to use.

The service sought feedback from the people who use the service and their relatives. People who use the service had been assisted to fill in an easy to read questionnaire. A family survey had been carried out and the outcome had been that things in the service were positive with no negatives identified.

People were involved in the development of the service at residents' meetings and through their "talk time" with staff. They had chosen the colours for the new paintwork in their rooms when the refurbishments were being considered.