

Runwood Homes Limited

Rosedale Court

Inspection report

Hockley Road Rayleigh Essex SS6 8EP

Tel: 01268773180

Website: www.runwoodhomes.co.uk

Date of inspection visit: 15 August 2017 16 August 2017

Date of publication: 15 September 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?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

The Inspection took place on the 15 and 16 august 2017.

Rosedale Court provides accommodation nursing and personal care for up to 81 people some of whom may be living with dementia. At the time of our inspection 79 people were living at the service.

At our last inspection the service was rated as Good. At this inspection we found the service remained Good.

The service was safe. Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. People were cared for safely by staff who had been recruited and employed after appropriate checks had been completed. People's needs were met by sufficient numbers of staff. Medication was dispensed by staff who had received training to do so.

The service was effective. People were cared for and supported by staff who had received training to support people to meet their needs. The registered manager had a good understanding of their responsibilities in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. People were supported to eat and drink enough as to ensure they maintained a balanced diet and referrals to other health professionals were made when required.

The service was caring. Staff cared for people in an empathetic and kind manner. Staff had a good understanding of people's preferences of care. Staff always worked hard to promote people's independence through encouraging and supporting people to make informed decisions.

The service was responsive. People and their relatives were involved in the planning and review of their care. Care plans were reviewed on a regular basis and also when there was a change in care needs. People were supported to follow their interests and participate in social activities. The registered manager responded to complaints received in a timely manner.

The service was well-led. Staff, people and their relatives spoke very highly of the registered manager. The service had systems in place to receive feedback and monitor care. The registered manager had a good oversight of the service through their use of audits.

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	
Is the service effective?	Good •
The service remains Good	
Is the service caring?	Good •
The service remains Good	
Is the service responsive?	Good •
The service remains Good	
Is the service well-led?	Good •
The service remains Good	



Rosedale Court

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.

This inspection took place on the 15 and 16 August 2017 and was unannounced. The inspection was carried out by two inspectors and a specialist advisor on the first day and two inspectors and two experts by experience on the second day.

Before the inspection, we reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service has to let the CQC know about by law. We also reviewed safeguarding alerts and information received from a local authority.

During the inspection we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

During our inspection we spoke with 12 people, eight relatives, the registered manager, deputy manager and nine care staff. We reviewed 12 care files, six staff recruitment files and their support records, audits and policies held at the service.



Is the service safe?

Our findings

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

People told us that they felt safe living at the service. One person said, "It feels safe because there are always people around. Its home from home" Another person said, "It's very safe ten out of ten for safety." A visiting healthcare professional told us, "People are safe and well cared for."

Staff knew how to keep people safe and protect them from safeguarding concerns. Staff were trained and able to identify how people may be at risk of harm or abuse and what they could do to protect them. In addition staff were aware that the service had a safeguarding policy to follow and a 'whistle-blowing' policy. One member of staff said, "If I had a concern I would take it to the manager, and document everything, If I did not think it was being dealt with I would go to outside agencies or I would follow the whistle blowing policy." They went on to say that they have never had a concern since they worked at the service about people's safety. We saw that the registered manager displayed posters for staff, people and relatives with outside agencies contact numbers where they could raise concerns anonymously if necessary. The registered manager was fully aware of how to raise safeguarding concerns and the local authority told us that they worked in partnership to investigate any concerns.

The registered manager made sure they recruited staff of good character and ensured all staff completed enhanced disclosure and barring checks (DBS). In addition the registered manager was reviewing their process to ensure people remained of good character by periodically renewing DBS checks. Before staff were employed at the service they attended an interview and references were obtained. We saw evidence that people who used the service took part in the interview process of new staff and their opinions were taken into consideration before staff were employed.

The registered manager kept under review the numbers of staff required to support people and adjusted these numbers where necessary. During our feedback the registered manager told us that they had just decided to introduce an additional member of staff in the evening as this had been assessed as a time when people's needs increased. From our observations we saw there were sufficient staff available across the service with people's needs being met promptly without staff appearing to be rushed. One member of staff told us, "I always take my time with people to make sure they are comfortable, I do not feel I am rushed at all." One person told us, "Staff come in minutes if I press my buzzer." A relative said, "I come at all different times throughout the week and there always seems to be plenty of staff around."

Staff had the information they needed to support people safely. Staff undertook risk assessments to keep people safe. The assessments included preventing falls, moving and handling, nutrition use of bedrails and prevention of pressure sores. Staff knew it was important to follow these assessments to keep people safe. Staff also recognised that people's level of independence changed depending on how they were feeling. The service had emergency plans in place and these included guidance to staff on hot weather and fire evacuation procedures. Each person had a personal evacuation plan and the registered manager was

reviewing these to ensure there was clear guidance to staff on evacuation of people from the first floor if lifts were not in use. Staff knew how to raise the alarm if somebody suddenly became unwell and they needed immediate assistance. One member of staff said, "If there was an emergency we could double press the call alarm and everyone would come running to assist us,"

People were cared for in a safe environment. The registered manager ensured there were regular risk assessments completed of the premises and equipment used. There was an onsite maintenance person who undertook day to day repairs and monitoring of the service's environment and equipment. In addition access to the service and units was via keypads which were frequently changed as a safety measure.

Medicines were managed and administered safely. People told us that they got their medicine on time and when they needed it. A relative told us, "The staff are hot on medication it is always on time." Only trained and competent staff administered medication. Medication was stored safely in accordance with the manufactures guidance. Regular audits of medication were completed and policies and procedures were up to date.



Is the service effective?

Our findings

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

The registered manager was very keen for staff to develop and attend training courses. Staff told us that they were supported to achieve nationally recognised qualifications, one member of staff said, "I have just completed training on the Gold Standard Framework for end of life care." They went on to tell us how they are working with other staff to collect evidence of the care the service provides to gain accreditation to the framework. We saw evidence that the service was already implementing elements of the training as staff had shared their knowledge of best practice. Other staff told us how they had been on courses to improve their understanding of other conditions such as dementia, Parkinson's and arthritis. A member of staff said, "We did this training recently where we put on a special suit, wore oven gloves and special glasses then had tasks to do. It really made you realise what it feels like to walk when things seem distorted or when you try to do up buttons and your fingers won't work." They went on to tell us how it made them understand the needs of people they support. The registered manager told us that this training is called Gerontology Experiential Training (GERT) and it raises staff awareness of a number of conditions including dementia, diabetes, Parkinson and visual impairment. They went on to say they are pursuing this training as a standard for all staff to complete.

Staff received regular support through supervision, meetings and appraisals. New staff underwent a full induction and if they were new to care they were enrolled into completing the care certificate. Staff told us that they felt listened to by management and that they felt fully supported to perform their roles.

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 20015 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

Staff knew how to support people in making decisions and how people's ability to make informed decisions can change and fluctuate from time to time. The service took the required action to protect people's rights and ensure people received the care and support they needed. Staff had received training in MCA and DoLS, and had a good understanding of the Act. Appropriate applications had been made to the local authority for DoLS assessments and to protect people's rights under the court of protection by the registered manager. We also saw assessments of people's capacity in care records had been made. This told us people's rights were being safeguarded.

People were very complimentary of the food and chef and said that they had enough food and choice about what they liked to eat. One person told us, "The food is fantastic." We observed a couple of mealtimes and we saw people were offered choice and staff were accommodating to people's requests. People enjoyed eating meals together and were complimentary of what they had to eat. We saw that the chef involved

people with menu choices and completed regular catering survey's to gather people's opinions of the food provided.

Staff carried out nutritional assessments on people to ensure they were receiving adequate diet and hydration. Staff also monitored people's weight for signs of loss or gains and made referrals where appropriate to dietitians and speech and language therapist. We saw from records that staff were very good at ensuring where people were at risk of poor nutrition they were supported to have fortified diets and additional fluids. One person told us, "I have special drinks three times a day as well as normal drinks."

People were supported to access healthcare as required. The service was taking part in a pilot to prevent hospital admissions and to reduce out of hours calls to GP services. Each week there was a multi-disciplinary meeting at the service involving the GP, social workers and other health professionals to review people's care and health needs. In addition the service also had district nurses, chiropody and palliative care nurses attending regularly. One health care professional told us, "This is a very good home, they follow care instructions and there is a very low incidence of skin tears or pressure sores." People told us that they had access to the GP should they need to see them, one person said, "Staff are very good they get the GP to come and see me if I am not well."



Is the service caring?

Our findings

At this inspection people remained happy living at the service, they continued to be very complimentary of the staff and felt cared for. The rating continues to be Good.

Staff had positive relationships with people. One member of staff told us, "I see everyone here as my relative and I treat them like my family." A relative told us, "The care here is brilliant, I am very happy with the care my mother receives. The staff are like family we have built up a good relationship." We saw that staff interacted in a kind and caring way with people living with dementia. We saw that staff new the best distraction techniques to use when people were becoming distressed or anxious, this included singing and dancing with people, or assisting them to do colouring. One member of staff said, "We always work on this unit so that there is consistency, people may not know my name but they know my face." We saw that people went up to staff and were relaxed with them holding their hands or giving them a hug and were seeking guidance and assistance from staff.

Staff knew people well including their preferences for care and their personal histories. Doors to people's rooms had a picture on of something that was significant to them for example a boat for a person who liked sailing. This aided people to identify their rooms. In people's rooms there was a short synapsis of some interesting aspects of their life's for example one person was fluent in speaking French. This gave an opportunity for staff to be able to engage with people immediately about some aspects of their life. We saw lots of happy interactions between staff and people, which related to people's past for example one person liked to do a particular style of dancing which they did with staff. Throughout our inspection people were observed to be happy and relaxed. Staff were able to explain to us how people liked to spend their time and how they respected people's wishes. For example staff knew what activities people enjoyed and how some people might prefer to on occasion remain in bed until mid-morning or go back to bed for an afternoon nap.

People told us that staff respected their privacy and promoted their dignity. One person said, "I get up when I want. Always treated with care and dignity, always a feeling of privacy, it's perfect." We saw that staff addressed people by their chosen name and people told us that staff were always polite. People told us that staff were respectful of their dignity especially when they were receiving personal care. One relative told us, "I come every day and I have never seen (person name) wearing the same clothes two days running." Another person told us how they liked to have their nails painted by staff. We also noted that people who were not mobile and remained in bed that the hairdresser went into them to wash and cut their hair. We saw that people were encouraged to take pride in their appearance to help their general feeling of well-being.

People's diverse needs were respected. People had access to individual religious support should they require this. In addition there were church services held at the service by different faiths, on the day of our inspection a church service took place which was well attended by people. Cultural and religious requirements in care plans seen were met. Staff interviewed were clear about the equality and diversity policy with no evidence seen of any discriminatory practice. The registered manager also arranged for people to have advocates should they require this service to speak on their behalf and look at their best interests. People were encouraged to maintain contact with friends and relatives who could visit people at

any time. The registered manager told us how they supported one person to meet up with a friend in the community every week at a local café.		



Is the service responsive?

Our findings

At this inspection we found staff were as responsive to people's needs and concerns as they were during the previous inspection. The rating remains Good.

People received personalised care that was responsive to their needs. People and their relatives were actively involved in their care planning. We saw evidence that people had taken part in writing their own care plans explaining how they would like to be supported by staff. Relatives told us that they were also actively involved and one relative said, "Staff are very good at communicating and going through the care plan with us." Each person had an identified key worker who took a lead in supporting their care. The keyworker's picture was placed in each person's room with a brief summary of their role and how they would support people. Staff we spoke with told us that they felt it was very important that relatives were involved in people's care and they invited relatives to attend meetings when care was being reviewed. We saw that care plans were reviewed at least monthly and full care reviews took place every three months. Before people came to live at the service their needs were assessed to see if they can be met by the service. People and relatives are also encouraged to look around the service to see if it was somewhere they would wish to be. One relative told us, "Initially I came and had a look around and arranged for my relative to come in for respite; however they immediately settled and have remained here."

The service has remained responsive to people's needs. People were well supported at the service to maintain their independence and if they had lost some skills following an illness staff supported them to regain these skills. One person told us, "When I came in I couldn't even get into bed alone, now I am walking with one crutch. That is down to the hard work of staff." Staff told us that on the rehabilitation unit they had a 90% success rate of people being able to return to their own home. The service employed a physiotherapist and an occupational therapist to work with people to ensure they had everything they needed in terms of rehabilitation, walking aids and that their homes were adapted for equipment they required when they were discharged. Since our last inspection the registered manager had involved the service in the PROSPER project. This promotes safer provision of care in the elderly to prevent falls, pressure areas, urinary tract infections and chest infections. Staff are trained to promote hydration and to observe for signs of infections and to ensure people receive prompt treatment and referral to GPs, district nurses or the falls team to promote safer more responsive care. The registered manager told us that since taking part in the project over the past twelve months there had been a noticeable decline in falls at the service by two thirds.

Staff encouraged people to maintain their interests and links with the community. People were supported to go out with staff and relatives, one relative said, "The manager encourages us to go out, my relative still goes swimming and to a local day hospital that they like. We also go out together to the local town." Throughout the service we saw staff engaging with people and doing activities. In addition to this the service had a dedicated activities person who did very well at involving the whole service with activities. On the first day of our inspection we observed people joining in a quiz, colouring, completing jigsaws and taking part in a multifaith service. We spoke to people who chose to stay in their rooms and they told us that they had enough to keep them occupied and that the activity person also came in and did activities with them along

with other staff. On the second day of our inspection along with day to day activities that people took part in the service also hosted a small garden party. People and relatives were in good spirits enjoying tea and scones. People we saw also enjoyed using the café area at the service with their relatives. One relative told us, "We enjoy coming in here, one evening we had fish and chips with wine, it felt like we were out at a restaurant."

The registered manager had a robust complaints process in place that was accessible and all complaints were dealt with effectively. We saw that where complaints had been made these had been fully investigated and any lessons learned had been implemented. People said if they had any concerns or complaints they would raise these with the registered manager. The service also received a number of compliments, one of these read, 'Being here has transformed our lives as we now have quality time when we meet.' Another read, 'Thank you for all your help care and kindness.'



Is the service well-led?

Our findings

At this inspection we found staff were as well led as at the previous inspection. The rating remains Good.

The service has a registered manager. 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.

People, relatives and staff told us that they felt the service was well managed. One relative said, "The manager is very receptive, I have had meetings with them and feel there is a good management team."

Staff shared the registered manager's vision for the service. One member of staff said, "We want people to feel included, comfortable and safe in an environment that improves their well-being." Another member of staff said, "We encourage people to live well to engage as much as they can and care for them with dignity and respect."

Staff felt supported and valued by the management team. Staff told us that they had regular staff meetings and felt that their ideas were listened too. The registered manager and deputy manager were both visible within the service providing hands on care with staff. A relative told us, "I have seen the manager assisting at meal times and they have even put make up on my relative." A staff told us that in addition to regular meetings they also had supervision to discuss their practice and any learning needs they may have. Staff told us that they felt they worked well as a team and communicated well with each other. The registered manager had a number of ways of showing their appreciation for staff, one of these was that people, staff and relatives could nominate an employee of the month and this staff member would receive a gift voucher.

The registered manager had a number of ways of gathering people's views and gaining feedback. These included holding meetings with staff, relatives and people. They also used questionnaires regularly for feedback and held care reviews. In addition the registered manager held a weekly surgery where anyone could drop in to speak to them, to make this accessible to everyone they alternated the time and held sessions at the weekend as well as during the week. There was also a suggestion box should people wish to use this.

The registered manager was keen to continually drive quality and improvements at the service. Since our last inspection they had signed up to take part in a number of initiatives with the local authority and clinical commissioning groups. This had included taking part in an initiative to prevent unnecessary admissions to hospitals by having regular input from a GP and other health professionals to review people's physical healthcare needs. The service has also signed up to work with the PROSER initiative to promote safer care for the elderly. In addition to this the registered manager had implemented additional training for staff as previously mentioned in the report for dementia and physical healthcare issues called GERT training. The registered manager had appointed a Dementia specialist to work at the service and raise awareness of dementia needs for people. They had also hosted training for relatives to attend on dementia awareness.

The registered manager had a number of quality monitoring systems in place to continually review and improve the quality of the service provided to people. They carried out regular audits, for example, on people's care plans, accident and incidents, health and safety, and environment. The information was used to continually improve the service and where there were any issues identified we saw action plans were in place to correct these. The provider also had oversight of the service and carried out their own audits to ensure the service was performing to their expectations. The service was awarded 'Home of Excellence 2016' by the provider.