

Riverbank Care Limited

# The Warren Care Home

## Inspection report

Cluden Road  
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## 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 Warren is a care home with nursing for up to 27 older people. Most people living at the service have nursing needs and or living with dementia. Some bedrooms are located on the ground floor and some on the first floor with a passenger lift to access these.

At the last inspection published in October 2015, the service was rated Good.

This unannounced inspection took place on 8 July where we found the service remained good in all domains which were previously rated good. The effective domain went from requires improvement to good following this inspection.

Why the service was rated as good.

People said they were well cared for by staff who understood their needs and wishes and treated them with kindness and respect. One person said "We are very well treated. The food is lovely and staff could not be nicer."

Staff were well trained and supported to do their job effectively. The management team valued staffs' experience and ideas and encouraged on-going learning through national diplomas in care as well as updates on key areas of health and safety.

People benefitted from an environment which was clean, homely and had the right equipment to keep them safe and well.

The staff provided care and support which was responsive to people's individual needs. This included ensuring their emotional and social needs were being met. People said they enjoyed a variety of activities and outings which helped them stay part of the local community.

People knew how to make any concerns known and were confident their views would be listened to and actioned. Visitors and family were made welcome and believed their views and suggestions were valued. One relative said "They could not have done more to help us spent time with our relative, nothing has been too much trouble."

The service was well led by a registered manager and provider who shared the same values and encouraged a culture of openness and transparency. Staff felt they worked well as a team and all worked within an ethos of encouraging people to be as independent as possible within a homely and loving environment.

## 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 has improved to good

People's rights were being fully protected with applications being made for deprivation of liberty safeguards where people lacked capacity.

Improvements had been made to ensure staff supervisions and support were being recorded.

### 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.

# The Warren Care Home

## Detailed findings

### Background to this inspection

This comprehensive inspection took place on 8 July 2017. The inspection was unannounced and carried out by one adult social care inspector.

The provider had been requested by the Care Quality Commission (CQC) to complete a Provider Information Return (PIR) prior to the inspection. 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 reviewed the PIR together with other the information we held about the home. This included previous inspection reports and notifications sent to us. A notification is information about important events which the service is required to send us by law. This enabled us to ensure we were addressing any potential areas of concern.

We met and observed the majority of the people who lived at the service and received feedback from seven people who were able to tell us about their experiences. Not everyone was able to verbally share with us their experiences of life at the home. This was because of their dementia/ complex needs. We therefore 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. We also spoke with seven visitors to ask their views about the service.

We spoke to eight staff, including the registered provider, deputy manager, senior care worker, care workers, the cook and domestic staff.

We reviewed information about people's care and how the service was managed. These included four people's care records and three people's medicine records, along with other records relating to the management of the service. These included staff training, support and three employment records, quality assurance audits and minutes of residents and team meetings. We also contacted health and social care professionals and commissioners of the service for their views. We received a response from two health and social care professionals.

# Is the service safe?

## Our findings

The service continued to provide safe care to people. People said they felt safe and well cared for. One person said "I would prefer to be in my own home, but I kept falling. My family decided I needed to be safe and I am certainly much safer here because there are staff around all the time."

One relative commented "I can leave here knowing (name of relative) is in safe hands. I have no worries about that."

People were kept safe by the use and review of risk assessments. This enabled staff to support people to maintain their independence but recognise the risks. Measures were put in place to mitigate risks which had been identified. For example, where someone was at risk of developing pressure damage, equipment had been used to minimise the risk. Staff were given clear instructions about how best to minimise this risk, by ensuring regular checks on vulnerable areas of skin and ensuring people were supported to change positions on a regular basis. We noted the pressure relieving mattresses were not always on the right setting for the weight of the person. The deputy manager thought this may be due to cleaning staff unplugging them. She took immediate action to ensure that the checking of the pressure mattresses was discussed and allocated as a task at each handover. This mean they would be checked daily. Previously this had been done monthly.

The recruitment and selection processes in place ensured fit and proper staff were employed. Staff had completed application forms and interviews had been undertaken. Any employment gaps had been explored. In addition, pre-employment checks were done, which included references and Disclosure and Barring Service (DBS) checks completed. The DBS helps employers make safer recruitment decisions and prevents unsuitable people from working with people who use care and support services. This demonstrated that appropriate checks were undertaken before staff began work in line with the organisation's policies and procedures.

People benefitted from there being enough staff available throughout the day and night to meet their needs. The registered provider said they did not have to rely on agency because they had a stable staff team who helped to cover for any sickness and holidays. Staff confirmed they worked well as a team and that there were enough staff available to meet people's needs in a timely way. People said their call bells and requests for help were usually answered quickly. One person commented "They do have busy times when you may have to wait a while but they try their best."

People received their medicines safely and on time. There were systems to ensure clear audits of medicines received into the service, administered to individuals and stored appropriately. We observed the lunchtime medicines being administered in accordance with the service policy and procedures. People were asked if they needed additional pain relief. The nurse only signed the medicines administration records (MARS) once they had observed the person take their medicine.

Medicines which required refrigeration were stored at the recommended temperature and staff had guidance regarding the procedure when the fridge temperature was outside of the recommended range. We

observed that the medicines room appeared hot although there were two fans going. The deputy manager said they would keep a record of the temperatures and take action if it exceeded above the recommended temperature which may compromise stored medicines. The service ensured that staff who administered medicines had regular training updates and their competencies were checked annually.

Staff understood how to report any concerns about potential abuse. At the time of the inspection there had been no reported safeguarding issues. However since the inspection visit there has been an alert raised in respect of one staff members conduct. This was being reviewed with the local safeguarding team.

## Is the service effective?

### Our findings

When we last inspected this service we rated this section as requires improvement but did not issue any requirements. We found at the last inspection, the service had not ensured people's rights were fully protected in respect of Deprivation of Liberty Safeguards (DoLS). This was addressed swiftly with the registered manager completing applications for DoLS. The service have acted in accordance with the Mental Capacity Act 2005 (MCA). This provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The service had made applications for DoLS for those individuals they had assessed as lacking capacity to make decisions. All applications were awaiting approval.

People continued to benefit from staff who had the right skills and training to do their job. Since the last inspection the service had ensured they were recording when staff had supervisions in one to one sessions or as a group. This helped to ensure they had protected time to discuss their role and any training and support needs. Staff confirmed there was a good level of support and training to ensure they were confident and competent to do their job effectively.

New staff were required to complete an induction and had opportunities to work alongside more experienced staff before they were rotated to work as part of the care team. Staff who were new to care and who had no care qualifications were supported to complete the 'Care Certificate' which had been introduced in April 2015 as national training in best practice. Staff were also encouraged to complete diplomas in care to enhance their skills and knowledge.

People and relatives felt their healthcare needs were being well met. One healthcare professional said the service were "quick to refer and listened to advice." One relative said "They (staff) are very on the ball. They are quick to respond to a change in health for my relative, getting the GP involved and making sure we were kept up to date." Care files showed people had access to a variety of healthcare professional input including GP, optician and physiotherapist.

People were highly complementary about the food and menu choices. One person said "It's like a five star hotel. The food is excellent, always hot and lots of choice. I am not a big eater, but I do enjoy the food." Menus showed there was a good variety and choice taking into account people's likes and dislikes. Where people were at risk of losing weight due to poor appetite or being unwell, staff monitored their intake carefully and offered additional snacks and drinks. On the day of the inspection, one person was celebrating their birthday. The cook had prepared them their favourite walnut and coffee cake.

## Is the service caring?

### Our findings

The Warren continues to provide a caring service where people enjoy a homely atmosphere and their wishes are taken into consideration.

People and relatives said staff were kind and caring towards them. Comments included "Staff are all lovely, very kind."; "I would rate it 11 out of ten. The staff couldn't be nicer. They are very kind."

One relative said "We have been staying over as we are concerned about (name of relative) who is poorly. Staff have been very kind to all of us. Nothing has been too much trouble. They have even moved the room around so both of us can sit and hold our relatives hand."

People's privacy and dignity was upheld at all times. Staff described ways in which they worked to ensure this. For example knocking on people's doors and only entering when there was a response. They also made sure they checked with people they wished to receive care and support at the time they needed it. For example if people chose to stay in bed later, this decision was respected. People confirmed staff were considerate of their daily routines and choices about how they spend their days. One person said "I have my breakfast and then come into the conservatory. I spend time here and later go up to my room to watch TV. Staff know how I like to spent my time."

Our observations showed people and staff had a warm and friendly relationship. In handover staff talked about people in a respectful way. It was clear staff enjoyed celebrating things which were important to the people they cared for. For example when a birthday cake was taken into the garden for afternoon tea, every member of staff went along and sang happy birthday.

The service had received many cards and letters of praise, especially for their care and attention at the end of people's lives. One said "Thank you for the kindness and caring you all showed at (name of persons) final few days. I can't thank you enough to know they had such compassionate care." Another letter said "This is a short letter of thanks for the wonderful care you gave dad during his long stay with you. We recall all the many happy occasions we all shared as one happy family, particularly the wonderful party given when he reached 100...we want to thanks all your nursing staff for their most professional and loving care- all the carers both day and night- dad fell in love with all of them..."



## Is the service responsive?

### Our findings

The service continues to be responsive to people's needs and wishes. It was clear staff knew people well and understood what was important to keep them well both physically and emotionally.

The provider information return (PIR) stated "We aim to provide a person centered approach. We do this by seeking the views of residents, we promote their wellbeing in an included and open environment." It was clear from our observations and review of care files that this worked in practice. Staff knew people well. Care and support was being well planned with care plans being reviewed monthly and sooner if people's needs changed. Care plans gave clear instructions to staff about how to provide care and support to ensure people's needs were being met and honouring their preferred routines.

Daily records showed staff were observant to people's changing needs. For example they had noted a change in one person's behaviour which was out of character. They tested for a urine infection and liaised with the GP for the person to be treated successfully with antibiotics.

People continued to benefit from an activities programme which included games, quizzes, social events, craft sessions and paid entertainers. One person said "We have quite a few activities here. I enjoy joining in, particularly the singing." The registered provider said they ensured that on two days per week there were two activity coordinators which enabled people to get out and about, visiting the local town and places of interest. They said "just to get out for some fresh air, see the sea and have an ice-cream is important and we try our hardest to achieve this for people who wish to go out."

The service had various ways to ensure people and relatives had a voice and could air their views. There was a complaints process which people had a copy of when they first came to live at the service. There had been no new complaints over the last 12 months. The service also used surveys to gain people's views about the types of activities and menu choices they wished to try or continue. People and relatives confirmed they would feel confident to raise any concerns and believed they would receive a full response. One relative said "Whenever I have raised anything, even minor, it has been addressed."

## Is the service well-led?

### Our findings

The service continues to be well-led by the registered manager, deputy and the registered provider. The PIR stated "we have an open culture, pro-active in sourcing new ideas. Both the manager and her deputy are integrated into the care team working with, challenging and supporting all staff to maintain high levels of care and professionalism. They always try to empower staff to progress in their skills." People and staff confirmed the management approach was open and inclusive. Staff confirmed that training and support to them was seen as a key to providing the best care possible. One staff member said "We are always being asked to do training here. I feel very supported and I love working here. The managers are all very good and listen to any ideas we have."

Systems were in place to ensure people's safety and welfare; These included weekly checks on the environment, ensuring fire safety checks were up to date and staff had fire training to keep people safe. Equipment was regularly serviced and a maintenance person was employed to ensure the upkeep of the building.

The service used an annual survey to gain the views of people and their family. The results of these were collated and then a meeting was held to talk about this and what actions the service could take. This year they had used a format with pictures and words which they felt would be more accessible for people with dementia to use. The areas for improvement had been looked at by the management team. This included how to ensure people could have outings and assurances to people and family that if any clothing shrank as part of the laundry process the service would reimburse the cost of replacement clothes.

The registered manager understood their role and responsibilities and had ensured the Care Quality Commission (CQC) were kept informed of all accident and incidents. There was evidence that learning from incidents and investigations took place and appropriate changes were implemented. For example, changes to a person's care plan and risk assessment to reflect an increased risk of falls.

The ethos of the service was to provide a caring, homely and safe environment and it was clear that all staff worked hard to ensure this was achieved. Staff who cleaned, kitchen staff and nursing and care staff all showed a caring approach and diligence to ensuring people received good care, a clean environment and tasty food.

The previous CQC certificate was on display in the main entrance. This meant the public and staff were kept informed, in accordance with the regulations.