

Mr T Ryan

# Ryan Care Residential

## Inspection report

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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

Ryan care is a residential care home. They are registered to provide accommodation with personal care for up to 15 people. It is a family run care home situated close to Runcorn old town. There were 15 people living at the home on the day of our inspection. Some of whom were living with dementia. The home is a spacious bungalow with a level access garden area.

At the last inspection on 12 November 2014, the service was rated Good. At this inspection we found the service remained Good.

People continued to be safe as staff knew how to recognise and report signs of abuse or poor practice. Staff were aware of the risks associated with people's needs and how to minimise these.

People were supported by enough staff to meet both their physical and social needs. The provider had safe recruitment procedures to ensure potential new staff were suitable to work at the home before they started to work there.

People received support to take their medicines safely. Only staff who had received training in the safe handling of medicine administered them. People were supported to access health care as necessary.

People continued to be supported by staff who had the skills and knowledge to meet their individual needs.

People enjoyed the food and were given choice. Where necessary staff helped people to eat in a patient and dignified manner.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

People found staff to be kind and caring. Staff had formed positive working relationships with people and their relatives. People were offered choice and were involved in decisions about their care. Staff respected people's dignity and supported them to keep their independence.

People continued to receive care and support that tailored to their individual needs. Staff knew people well and were able to respond quickly and appropriately to changes.

People had not had cause to raise any complaints but felt confident and able to speak to staff or manager if they had any concerns.

The management team were approachable and supportive. People and their relatives considered the service to be well run and were complimentary about the support provided.

There was an open and inclusive culture at the service. Where the registered manager had a clear vision for the service which was shared with and worked towards by staff and management.

The provider had a range of checks in place to drive improvements in the service.

Further information is in the detailed findings below

## 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.

# Ryan Care Residential

## **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.

This was a comprehensive inspection, which took place on 4 July 2017 and was unannounced. The inspection team consisted of one inspector.

Before our inspection we reviewed information we held about the service. Such as statutory notifications we had received from the provider. Statutory notifications are about important events which the provider is required to send us by law. We asked the local authority and Healthwatch if they had information to share about the service provided. We used this information to plan the inspection.

We spoke with six people who used the service, two relatives and a visiting health care professional. We also met and spoke with the registered manager, two providers the deputy manager and two care staff. We viewed two people's care and medicine records. We viewed other records which related to the running of the service. We observed care and used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who were unable to talk with us.

# Is the service safe?

## Our findings

People continued to receive care and support that made them feel safe living at the home. When asked whether they felt safe living at the home one person told us, "While I've been here nothing naughty has been said or done." They went on to say, "All I can tell you is it is a very good place to be." Another person said, "I'm just happy being here." This was echoed by relatives we spoke with one relative said, "[Family member] is happy, safe and well cared for."

People were protected from the risk of abuse and discrimination by staff who knew how to recognise and report any signs of abuse. Staff we spoke with were confident because they knew people well and felt able to recognise any changes. They also felt that people trusted them and would report any concerns of poor practice or abuse to them. Staff told us they would not hesitate to report any concerns they had to the registered manager. There had not been any safeguarding concerns since our last inspection however the registered manager demonstrated they would take appropriate action to protect people.

Risks associated with people's needs were routinely assessed and reviewed. Staff we spoke with were aware of the risks to people's wellbeing and how to minimise these. We saw that staff supported people to move around the home safely with the aid of equipment where necessary. Staff told us they looked out for changes in people's needs or environmental hazards on a daily basis and reported any concerns they had. The registered manager told us that the property was owned and maintained by a housing association. They reported any maintenance issues to them and they carried out repairs in timely manner.

People and their relatives felt there were enough staff to meet both people's health and social needs. When we spoke with one relative about staffing levels they said, "It's just lovely seeing staff sitting with people chatting and making sure everyone is alright." Staff we spoke with felt that there were always enough staff to meet people's needs in a timely and patient manner. One staff member said, "We're (staff) not rushed. I'm not used to being able to sit and talk with people." They went on to explain they had worked in other care homes where they were unable to spend time talking with people like they could at Ryan Care.

The provider continued to follow a safe recruitment procedure. This was confirmed by a staff member who told us they were unable to start work at the home until the provider completed the necessary checks to ensure they were suitable to work at the home. These included the receipt of satisfactory references and a Disclosure and Barring Service (DBS). The DBS service enables employees to make safer recruitment decisions.

People received the support they needed to take their medicines safely. We saw a staff member check with a person if they wanted their tablets one at a time or all together. They were given a drink to take them with and the staff member stayed with them until the person had taken them all. A relative told us that staff had supported their family member to apply cream to their legs and they had seen an improvement. Only staff who had received training in the safe administration of medicine were able to do so. The provider had systems in place to advise staff when to administer medicines that needed to be given 'as required'.

## Is the service effective?

### Our findings

People continued to receive care and support from staff who had the knowledge and skills to meet their individual needs. One person told us, "They (staff) are very good. I can't fault them." Another person said, "I'm very grateful to be here. I would not want to be anywhere else." A relative we spoke with said, "The staff are very good every one of them. I can't fault them."

Staff we spoke with told us they felt supported by the registered manager and the provider. They had one-to-one meetings where they were able to discuss matters of concern and any training requirements they had. They said the office door was always open and they could gain support at any time. Staff had access to training relevant to their role and to further their career in care. One staff member told us they had found the dementia training beneficial. It had got them thinking about what people living with dementia may be thinking and how to approach them differently.

New staff received a structured induction into the role where they received essential training and an introduction to the provider's policies and procedures. In addition to this they worked along side experienced staff until they felt confident and able to support people independently. New staff who had no previous experience of working in care were supported to undertake the Care Certificate. The Care Certificate is a nationally recognised training programme that trains staff to the standards of care required of them.

People were supported to have choice and control over their lives and staff supported them in the least restrictive way. People told us that staff asked their permission before supporting them and respected their decisions. Staff we spoke with confirmed this. Staff often found if a person declined support from one staff member they might benefit from a 'change of face' and accept support from another staff member. Where staff had problems communicating with people verbally they told us they showed people choices and watched their body language to involve them in decisions.

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 MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The provider had made appropriate applications to the DoLS team and had systems in place for applying and renewing applications.

When we asked people about the quality of the food provided, one person told us, "It's lovely. You get a choice, get a lot of it and you get more if you want it." Another person said, "It's very good." A relative we spoke with said, "The food is excellent. I've had Sunday dinner here, the kitchen is spotless." We saw that people were offered choice of food and drinks throughout our visit. We heard a staff member ask a person if they would prefer a hot or cold drink. The person asked if they could have both and these were provided with a smile and some friendly 'banter'.

People's dietary needs were routinely assessed monitored and reviewed. Staff demonstrated they were

aware of these as well as people's likes and dislikes. People's weight was monitored and if there were any concerns they were referred to the GP. Staff told us where necessary people were referred to the dietician or if they had swallowing difficulty to the speech and language therapist. Some people were supported to take supplements or fortified foods to boost their calorific intake. Where required we saw that staff supported people to eat and drink in a patient and dignified manner. Staff checked that people were happy with their food and that they had enough eat before taking their plates away. We heard one staff member ask a person, "Are you sure I can't tempt you to have any more before I take it away?" They went on to ask another person, "Are you full? Would you like me to take it (plate) way?"

People told us staff monitored their health and arranged health care as necessary. A visiting health care professional told us that staff referred people to them when they needed to and followed the advice they provided. They found staff to be helpful they said, "Someone (staff) comes with me to see people and stays with me to see if I want anything." One relative told us they had seen doctors coming in for various people as well as other professionals.



## Is the service caring?

### Our findings

People and their relatives found staff to be kind and helpful. One person told us, "They (staff) are very good here. They are always very pleasant and nothing is too much trouble for them." Another person said, "Everything about it [the home] is nice." A relative told us, "They (staff) are just really nice and kind."

Staff had formed effective working relationships with people and had created a warm and welcoming atmosphere at the home. A relative told us, "I'm made to feel welcome all the time." They went on to say that staff always offered them tea and biscuits when they visited. These qualities were recognised by a visiting health care professional who told us staff and management took the time to get to know people and their families. They went on to say, "I think it is lovely, one of the nicest homes around." Staff told us they got to know people by spending time chatting with them and their relatives. One staff member told us, "We get to know them and they tell us stories." They explained that the home used to be a school and some people remembered it as so and reminisced about their school days. Throughout our visits we saw that staff talked to people about day-to-day things. One staff member told people about the difficulties they had trying to make a pie at home the previous evening. This resulted in a lot of laughter and chatting. The registered manager had brought their baby into the home, we saw that people were really animated and enjoyed talking with the baby and the registered manager.

Staff and management showed genuine warmth and affection towards people. They talked with and about people with respect. One staff member told us they recognised everyone as an individual. They said, "They have all got something different about them." They went on to say they wanted to ensure people got the best care they could give. A visiting health professional told us staff had a caring approach. If a person was distressed they would comfort them and ask them if they wanted them to contact their relatives for them. We saw that when one person became anxious they put their head on the registered manager's shoulder who reassured them by touch and talking to them about their family.

People and where appropriate their relatives were involved in decision about their care and support. One person told us, "They (staff) ask how I like things done." They went on to tell us staff helped them wash and dress but encouraged them to do things for themselves where able. We saw that staff offered people choice throughout our visit. At lunch time we saw that people were able to sit where they liked and were given the choice of whether they wanted to wear an apron or not. The registered manager felt it was important to identify what worked best for people. They said that some people did not sit at the dining table for their meals as they found it difficult to concentrate. Televisions were also turned off during meals so people were not distracted. Staff told us they always offered people choice. One staff member said, "Some places can be quite regimental. It's not like that here. They (people) have a choice of what they want to do."

Staff and management were respectful of people and their environment. The registered manager told us, "It's our workplace and their home we acknowledge and respect this. People have to feel safe to trust you." People, their relatives and a visiting health care told us staff treated people with dignity and respect. Staff told us they were promoted people's independence and dignity. In doing so one staff member explained that they always asked people if they wanted any help. They said, "Some people are able to do little bits for

themselves. We know which people need you more than others." Another staff member explained when supporting one person to eat they found if they started off by assisting them, they then might continue to eat by themselves. Staff said they were always mindful of people's dignity and privacy and supported them in a discreet manner. They ensured doors and curtains were shut when providing personal care. Another staff member told us they did not disclose personal information about a person without their consent to do so.

## Is the service responsive?

### Our findings

People continued to receive care and support that was tailored to their individual needs and were impressed with the quality of the service provided. One person told us, "I would recommend it to everyone. I would suggest to come here because you get very good attention." They went on to say, "I've been here for some time and I've been very happy since I have been here." A relative said of the care, "It's brilliant-excellent." A visiting health care professional we spoke with told us the care provided was very person centred and there were always staff around to support people as necessary.

People and their relatives told us staff asked them how they wished to be supported and knew them well. One person said, "They (staff) will chat away to me. They must know all my details." A relative said, "[family member] is very well looked after, for which I'm very grateful." They added, "They (staff) all know [family member] they really do." Staff and management stressed the importance of knowing people and what was important to them. One staff member said, "It's about knowing them (people) individually. With new people we ask them what they want out of being here." They explained that people's care plans were developed overtime and were reviewed as people settled in and staff got to know them better. The registered manager told us they assessed people before they moved into the home to ensure that they could meet their needs and expectations. Where possible they encouraged people to visit the home. They also asked relatives to contribute to people's 'life history' books so that staff could learn about people's past lives and interests.

Relatives we spoke with found the service to be responsive to changes in people's needs. One relative told us staff were quick to identify and respond when people were upset. They said, "When someone is wobbly or sad it is picked up straight away (by staff). That's the lovely thing no one is neglected." Another relative told us, "They (people living at the home) have all got different needs but they (staff) can spot when there is something is up with [family member]." Staff told us they were informed of any changes in people's needs both during handover and during discussions with other staff during their shifts. We saw that staff were quick to respond to a person who had become upset, we saw that a staff knelt by the person and provided reassurance to good effect.

People were supported to do things they enjoyed doing. This was appreciated by people and their relatives. One relative told us, "What I really like is how staff integrate and do things with them." They went on to say how finding this home had been a big relief to them. The registered manager told us and we saw that people were asked what they wished to do on a daily basis. They said some people would choose to watch television while others preferred listening to music or playing games. They had a range of music discs for people to choose from. Daily newspapers were delivered to the home and staff would read and discuss the contents with people. They also had local entertainers who came into the home. There were two lounges in the home, one larger one and a quiet lounge which had sensory products such as lamps and dementia blankets for people to engage with. During our visit we saw people take part in a quiz, playing games and some people had their hair done.

In addition to day-to-day activities the provider arranged fund raising activities to pay for outings for people. These outings included a trip out for people and their relatives to the Welsh Mountain Zoo. We looked at

photographs of the outing and observed that people were happy and smiling. Staff told us they made a whole day of their outing with relatives joining people for a 'hot pot' on their return to the home.

People were encouraged to maintain contact with family and friends. One person took a telephone call from their relative. We saw that staff warmly welcomed visitors with a smile and the offer of a drink. One person had recently celebrated a landmark birthday. The provider had put on a party with buffet food and family were invited to share the event with the person. The registered manager also encouraged people to engage with and form relationships with other people living at the home.

People had not had cause to raise concern but felt able to speak with staff or management should they have any concerns. One person told us, "Staff are very, very nice if you have a problem you can speak to them. I can't find any fault." The registered manager told us and we saw that meetings were held at the home to gather people's views on the service. We also saw that the provider had received many thanks you cards from people's relatives who were complimentary about the service. For example, one card read, "Every time I come to see [family member] there is someone (staff) sat chatting with them holding their hand. The staff are loving and caring like a family. I feel very lucky to have found Ryan Care."

## Is the service well-led?

### Our findings

People and their relatives felt the home was well run. One person said, "I think the home is well run. I have been in two others and they were horrible." This was a view echoed by relatives. One relative told us of the home, "It's the best I have seen by far. Everything is very clean, staff are excellent and it's not too big." Another relative said, "After the experience of two other care homes this is absolutely perfect." The registered manager told us they had worked hard to get to where they were. They were careful to recruit staff who would uphold their vision and standard of care. They said, "We're looking for qualities in staff. They have got to be right for people. They have to have that little something. They can't be clinical, they have to be caring."

Relatives felt communication with the staff and management was excellent. One relative explained each time they contacted the home staff could answer their questions straight away without having to check. Another relative told us staff would speak with them on arrival and let them know how their family member had been since their last visit. We saw that people and their relatives knew the registered manager and providers well and were comfortable in their company.

The registered manager was present during our inspection and demonstrated a clear understanding of the Regulations and the requirement to meet them. They had submitted statutory notification as necessary and had clearly displayed the ratings of the previous inspection in the reception area of the home.

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 told us their vision for the service was, "For people to have everything they needed. To be well looked after and to feel safe and comfortable." They felt as a family business they had higher expectations for people. They went on to say, "We are here to protect everyone who lives here. We go out of our way to do this." This was vision shared by staff. One staff member told us, "We want them [people] to reach their potential and to be happy. Give them the best time they can have while they are here." Another staff member said the aim of the service was, "To be one big happy family, for it to be like their (people's) own home."

There was an open and inclusive culture at the home. The provider played an active part in the running of the home. They and the registered manager wanted people to feel part of a family and to be involved in the running of the home. For example, at Christmas time one person's relative helped decorate the ceilings in the home. We saw that one of the providers ask a person to help them with the cleaning.

Staff we spoke with talked of a positive working environment where their views were valued. One staff member said, "You can put your viewpoint to [registered manager] and they listen." The registered manager was hands on and led by example. There was a real sense of teamwork, one staff member told us, "I love it

here. The team is very good, we work well together. We all know how each other work." The registered manager recognised the importance of team work they said, "We don't expect our staff to do something we are not prepared to do."

The provider had a range of checks in place to drive quality in the service. In addition to audits they and the registered manager worked alongside and monitored staff practice on a daily basis. The registered manager told us, "[provider] is the eyes and ears of the home [provider] watches like a hawk."