

Runwood Homes Limited

Ivy Court

Inspection report

Greenfield Lane

Balby

Doncaster

South Yorkshire

DN4 0PT

Tel: 01302853122

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26 January 2023

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Ivy Court is a purpose-built care home which has 2 floors. Each floor has its own dining and lounge areas. It provides accommodation and personal care for up to 70 people. Peoples' needs were varied and included people living with dementia. At the time of our inspection there were 39 people using the service.

People's experience of using this service and what we found

People were happy living at Ivy Court. They told us staff were kind towards them and knew their needs well. People were encouraged to make their own choices and retain their independence and people's care plans were individualised and person-centred.

People felt safe living at Ivy Court and where risks to people had been identified there was good guidance in place for staff. Staff were able to tell us how they kept people safe and had a good knowledge of how to identify and report a potential safeguarding concern.

People lived in an environment that was checked for its safety and suitable for their needs. The environment was spacious and well laid out and was kept clean and tidy by a team of housekeeping staff.

People were cared for by a sufficient number of staff who had been trained and demonstrated competence in their roles. Staff received the support they required through continual learning and development and regular supervision with their line manager.

The manager was involved in initiatives to help assist with the pre-assessment stage for people. Appropriately trained staff safely administered medicines and people received the medicines they required in line with their prescription.

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

People and staff said the service was well led and they felt their opinions were sought and listened to. The manager worked alongside the staff and was very visible, they knew people well and focused on delivering person centred care.

The provider had systems in place to monitor the service and improve outcomes for people. The manager monitored accidents and incidents and identified any actions that needed to be taken to prevent future occurrences.

The manager had a clear drive to improve the service for the benefit of people living at Ivy Court. They had developed strong links with external providers and had plans in place for further development.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was Good (report published 04 March 2020).

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Why we inspected

This focused inspection was prompted by a review of the information we held about this service. We only inspected the key questions, safe and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Ivy Court

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Ivy Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a manager in post who was in the process of registering with CQC.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We reviewed the information we held about the service since our last inspection. This included accidents, incidents and safeguarding concerns.

During the inspection

We spoke with the manager during the inspection, as well as 4 staff which included care staff and the regional manager. We spoke with 4 people and 1 relative to obtain their feedback about the care they received.

As part of the inspection we reviewed the care records for 6 people in varying depth, numerous medicines records, 3 staff recruitment files, governance systems and processes and other documentation relevant to the running of the service.

Following our visit, we received further information from the manager, which included training details and health and safety documents.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated Requires Improvement. At this inspection this key question has changed to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- At the last inspection we found the provider did not have robust PRN (medicines to be taken when required) protocols or recording processes. At this inspection we found they had taken action to address these issues. People's medicine records included information about any allergies they had and PRN protocols. This ensured staff knew how people's allergies and to take appropriate action when administering PRN medicines.
- The provider had recently notified us of medicines discrepancies identified during medicines audits. In response, they produced an action plan, retrained staff and strengthened systems to prevent reoccurrence.
- Staff managed medicines safely. Medicines were stored safely and the temperatures where they were kept were monitored and recorded.
- Staff administered and completed medicine administration records (MARs). There were no gaps in MARs and blister packs that we checked.
- The manager audited medicines and MARs. This helped identify any and rectify any shortfalls in medicine management.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. One person told us, "I do feel safe here." A relative said, "[Person] is safer than when they were at [their] own home."
- The provider had policies and procedures such as adult safeguarding and whistle blowing, which explained what constituted abuse and the procedures to follow to safeguard people.
- Staff had attended adult safeguarding training and knew the different types of abuse and the actions they needed to take. A member of staff told us, "If I become aware of abuse, I will straight away report to my manager. If I feel enough action is not taken, I will report to social services or the CQC."

Assessing risk, safety monitoring and management

- People had their individual risks assessed and monitored. This included risks associated with mobility, skin integrity and swallowing.
- Staff understood the risks to people and took actions needed to mitigate avoidable harm whilst respecting people's rights and freedoms. This included the use of specialist pressure relieving mattresses and pressure alarm mats to alert staff.
- Environmental risks had been assessed and included water safety, the safety of window restrictors and building security.

- People were protected because of effective fire safety measures at the home. The provider had recently had an external company undertake a fire risk assessment. Where risk areas were identified, actions were being taken to address these.
- People had personal emergency evacuation plans in place that provided key information should they need evacuating from the building.

Staffing and recruitment

- There were enough staff working to ensure people were safely supported.
- Staff had undergone a robust recruitment process, which ensured they were safe to work with people. As part of their recruitment process, staff completed application forms, attended interviews, provided written references and underwent criminal record checks.
- Staff recruitment processes also included training, completing staff induction and shadowing existing and experienced staff for a period of time. This allowed new staff to know people and to understand how the service operated.
- People and relatives felt there were enough staff. One person said, "There is always someone there should I need them." A relative told us, "There are enough staff and [person] is well looked after."

Preventing and controlling infection

- The provider used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them. The service had good arrangements for keep premises clean and hygienic.
- The provider prevented visitors from catching and spreading infections.
- The provider followed shielding and social distancing rules using current guidelines.
- The provider admitting people safely to the service.
- Staff used personal protective equipment (PPE) effectively and safely.
- The provider followed current guidelines to test for infection in people using the service, and staff.
- The provider promoted safety through the layout of the premises and staff's hygiene practices.
- The provider made sure that infection outbreaks could be effectively prevented or managed. It had plans to alert other agencies to concerns affecting people's health and wellbeing.
- The provider's infection prevention and control policy was up to date.
- All relevant staff had completed food hygiene training and followed correct procedures for preparing and storing food.

Visiting in care homes

The service supported visits for people living in the home in line with current guidance. People and relatives told us they were able to visit.

Learning lessons when things go wrong

- There were systems in place to manage, monitor and support learning from accidents, incidents and safeguarding.
- Staff understood the importance of reporting and recording accidents and incidents and how best to respond.
- Accidents and incidents were monitored by the manager on a regular basis to identify themes and trends as a way of preventing recurrence.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA 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 to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and where needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There was a structured team in place to support the manager. This included senior care staff and heads of department. A regional manager provided management support on behalf of the provider.
- Managers and staff understood their roles and responsibilities and were committed to learning and improving care.
- The provider used effective systems and processes for checking on and improving the quality and safety of the service. A range of checks and audits were carried out regularly to check on the quality of the home.
- CQC and other relevant agencies were notified without delay about incidents and events which occurred at the service. Lessons were learnt following incidents and shared with staff.
- The manager and staff completed training and kept up to date with the law and current good practice guidance to update their knowledge and learning.
- Staff performance, learning and development was continually assessed, monitored and reviewed and they were given opportunities to progress within their roles.
- Staff had access to a comprehensive set of policies and procedures which were current and in line with best practice.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The management team's aim was to maintain a positive culture within the staff team. Staff told us they felt supported. One staff member told us, "I feel really supported". Another said, "There have been some changes, but we do work well together and get the support we need."
- The service had a commitment to meeting people's individual needs and providing person-centred care.
- Management and staff were committed to their roles and had built positive relationships with people. Staff understood people's individual care and communication needs and this helped to ensure people received care and support that promoted their well-being.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood their duty of candour and relatives confirmed they were kept informed when issues arose.

Engaging and involving people using the service, the public and staff, fully considering their equality

characteristics

- The manager and staff sought feedback from people and those important to them and used the feedback to develop the service. People told us they were involved in the planning and review of their care and support.
- People were asked their views by staff throughout the inspection. We saw on a number of occasions where people were clearly confident to raise issues with staff and people told us staff would help them.
- People and relatives told us they knew how to complain if they needed to. Complaints had been reviewed and actions taken to avoid re occurrence.
- Staff told us they were supported, and the manager was approachable. Staff had the opportunity to comment on the service delivery and were encouraged to make suggestions to improve practice.

Working in partnership with others

- The manager had a clear vision for the direction of the service.
- The manager and regional manager were open and transparent throughout the inspection and expressed their desire to continually improve.
- The staff worked well in partnership with other health and social care organisations, which helped to improve the wellbeing of the people they supported. During our inspection the home hosted a meeting with the local GP surgery and enhanced care team to arrange future multi-disciplinary meetings regarding the future care of people living at Ivy Court.