

Kal - Tan Limited

Homelea

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?	Requires Improvement ●

Summary of findings

Overall summary

About the service:

Homelea is a care home without nursing for a maximum of 19 older people, some of whom are living with dementia. The provider has made a business and care related decision to only care for a maximum of 14 residents. There were 11 people at the time of the inspection.

People's experience of using this service:

People were cared for in a closely knit community at this home. The small size of the home meant that people were always surrounded by socialising people and caring staff. The downstairs lounge was the central hub of the home where people congregated and enjoyed activities together. People enjoyed their privacy and independence as this was respected by staff. People received person-centred care which was supported by detailed care plans.

There were insufficient quality compliance audits recorded and analysed by the registered manager. We made a recommendation regarding this. Where certain auditing needed improvement, the management team and provider were receptive and swift to implement changes. The registered manager led by example in providing person-centred care and interacting with everyone who visited the service.

Staff were well trained to safely care for people and knew how to engage and empower them. People had access to health care professionals throughout the week.

People's needs, choices and preferences were recorded in person-centred care plans. The food at the service was enjoyed by people as they were able to choose what they ate from a menu that offered a variety of meals. The care records enabled staff to correctly provide care and support for people in a safe way. Complaints and concerns were recorded, responded to and used to consider improvements at the service.

Rating at last inspection:

Good (August 2016)

Why we inspected:

This was a scheduled comprehensive inspection. We inspect all services rated as 'Good' within 30 months to ensure that we regularly monitor and review the quality and safety of the service people receive.

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 was safe

Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led

Details are in our Well-Led findings below.

Homelea

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by two inspectors.

Service and service type:

Homelea is a residential care home registered for 17 people, however, the provider has made a business and care related decision to only care for a maximum of 14 residents. On the day of our inspection, 11 people were living in the home. Many people were living with dementia. The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

We carried out this unannounced inspection on 20 March 2019 at the home.

What we did:

We reviewed the information we held about the service. This included the previous inspection report, notifications since the last inspection and feedback from the local authority. Notifications are changes, events and incidents that the service must inform us about.

During the inspection, we spoke to five people, two relatives and five staff. We reviewed care records and policies and procedures. We reviewed three people's care records, and three staff files around staff recruitment, training and supervision. Records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider were also reviewed.

Is the service safe?

Our findings

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

At our last inspection in August 2016, we rated this Key Question as 'Good'. At this inspection we found that people continued to be safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse by knowledgeable staff. One person told us, "It's very nice here. I like the people and company and lovely room. Staff make me feel safe." Staff and the registered manager were aware of their responsibility to safeguard people. There had been no safeguarding incidents since the last inspection.
- A visitor from a local church commented, "They are very careful about the front door and visitors, to ensure safety of people here."

Assessing risk, safety monitoring and management

- Risk assessments were followed by staff to ensure people's known risks were managed and monitored safely. For example, one person could be unsteady on their feet so staff reminded them to ask for assistance when they wanted to mobilise. One staff member said, "She (Person) asks for help so we can assist her and reduce the risk."
- All care plans contained missing persons agreements with the local police force to enable efficient and easy practice to be followed in the event of an emergency.
- One staff member said, "One staff member invites the people who can walk and the other assists and supports the people who cannot walk well."

Staffing and recruitment

- People were cared for by a sufficient number of staff. One person told us, "There are enough staff. They don't seem under any pressure." There were enough staff at the home to ensure people's safety throughout the day.
- One staff member said, "There are enough staff here, we have time to do what we need to do. I love to work here, I am not stressed."
- The provider ensured appropriate recruitment checks were followed to help ensure staff were safe to work with people who used care and support services.

Using medicines safely

- People were supported to take their medicines as prescribed. People received the medicines they required as medicine administration records (MARs) were correctly filled out with no gaps. People had guidance in place for staff to understand how much medicine could be given to them. One relative told us, "The medicines are managed well by staff here."
- We found one medicine was not stored appropriately but this was swiftly corrected and noted by the registered manager. All other medicines were stored safely and with accurate stock checks completed.

Preventing and controlling infection

- People were protected against the risk of the spread of infection. The home environment was clean and well maintained. Domestic staff were observed cleaning the home during our visit.
- One staff member told us that they knew to "Take gloves off before touching something, use gloves when giving personal care, then put them in the bin." Staff consistently washed their hands and used aprons and gloves throughout the day.

Learning lessons when things go wrong

- Staff responded appropriately to accidents or incidents to ensure people were kept safe and the records supported this. Each care plan contained a record of every person's accidents and incidents for the past year. Staff had recorded the location, time and injuries sustained each time a person had fallen. When appropriate, staff had escalated serious injuries to the emergency services.
- One person had had a series of falls and in response they now had sensors in their room to alert staff if they tried to move and a detailed risk assessment was put in place.
- There was no over view or analysis completed to look for patterns or trends in the accidents or incidents that occurred. Following the inspection, the registered manager created an over view spreadsheet for this purpose. Correct and proportionate measures had been put in place in response to minor falls that had occurred.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

At our last inspection in August 2016, we rated this Key Question as 'Good'. At this inspection we found that people's outcomes had continued to be consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People told us they received care and support which was in line with their needs. People's needs and choices were assessed before they came to the home with regards to their personal care and preferences. Admission assessments also detailed people's medical conditions and any needs associated with these. The home had used these assessments in the past year to conclude that they were not the correct location for some people with higher needs. This meant that the assessments were effective at ensuring the home could cater for people's needs.
- There were guidance folders for staff to consider and read through which detailed best practice for areas such as hydration, falls and continence. Staff had good knowledge of

Staff support: induction, training, skills and experience

- Staff were adequately supported and trained to ensure they had the knowledge and skills to deliver care. One relative told us, "The staff know what they are doing. They can cope with any situation that arises." One person told us, "Staff are experienced, and know what to do. Nothing is too much trouble."
- Staff were well supported by the management team who provided regular supervision and checks on their competency.
- The deputy manager had recently attended further training on how to plan and prepare for future emergencies.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat healthy food and snacks throughout the day. People told us they liked the food. One person said, "The food is very good here." One relative told us, "They encourage them all to have a drink and come around to offer this."
- The staff knew the dietary requirements people had such as vegetarian and soft food diets and catered for these. People's weights were maintained at this home. Staff were proactive at ensuring people were hydrated throughout the day.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were proactively supported by staff to maintain good health and had access to external healthcare support as necessary. Records showed that appropriate referrals were made to professionals such as doctors, dentists, opticians and dieticians. One person told us, "I can see any professional when I want to. Quite recently I asked to see the doctor and they arranged this very quickly."
- Where appropriate, staff were supported by healthcare professionals to safely care for people. For

example, one staff member said, "We empty the catheter daily and change the bag every week. The nurse instructs us. She comes every day."

- Staff consistently completed daily notes to enable consistent and up to date information to be shared across the team.

Adapting service, design, decoration to meet people's needs

- People lived in a house that had been designed to meet their needs. There were signs on each person's door with their name. The home is an older house which has been adapted to enable care to be provided for people with mobility problems. There is a stair lift which people know how to operate and can use.
- The garden had ramp access so that people could enjoy being outside in the summer. One relative said, "People love being out there. They always make sure they have a hat on in the sun."

Ensuring consent to care and treatment in line with law and guidance

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 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 to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- People's legal rights were protected because staff followed the principles of the MCA. We spoke to staff who were able to explain and describe essential parts of the MCA and its application in the home.
- Every person at the home had capacity and the ability to make decisions. No one was restricted in a way they hadn't consented to or understood.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

At our last inspection in August 2016, we rated this Key Question as 'Good'. At this inspection we found that people continued to be supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People told us that they were supported by kind and caring staff. One person told us, "They are very helpful. They have time to listen." A second person said, "The staff are very understanding. They never bully you and if you are unwell they look after you."
- One relative told us, "The staff are always friendly. They speak nicely about the patients. They are dedicated and do long hours."
- Care records included information about people's sexual, religious or cultural wishes. The majority of people had decided not to provide information other than their religious preferences.
- The home had a family feel to it which was promoted by the deputy manager and the people living there. People supported each other throughout the day and interacted socially in the main lounge.

Supporting people to express their views and be involved in making decisions about their care

- People were involved in their care and supported to express their views. If people wanted to, they could sit in any part of the home to entertain their family or sit peacefully. Each person was asked each day about what they wanted to do and what support they required from staff. For example, people could choose if they got out of bed and whether they had a bath or shower.
- Staff consistently asked people if they wanted to go somewhere or do something. People were given options and choices.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected. One person told us, "We can go to our own rooms and be undisturbed if you want. We aren't pushed into doing anything at all. I have my independence here." Staff consistently knocked on peoples' doors and respected their privacy. One staff member told us, "I always close the door when I am carrying out care. To keep their dignity."
- Relatives told us that staff respected people and the home they lived in. One relative said, "She's (Person) always having showers and she's always clean."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

At our last inspection in August 2016, we rated this Key Question as 'Good'. At this inspection we found that people's needs continued to be met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- There were meaningful activities for people to take part in each day. People took part in a quiz in the morning which involved everyone in the lounge with the deputy manager. Some people told us they preferred to stay in bed or enjoyed their time alone. One person told us, "I don't do much each day as I can't see very well. I don't want to do anything each day." One staff member told us, "I can tell when they enjoy something. I don't like to see them doing nothing."
- People told us they didn't get bored at this home as they all socialised together and were engaged by staff regularly. One staff member said, "We try to do an activity and give tea at 3 pm. Usually do a quiz or paint nails."
- Care plans were person centred. One person's care plan contained information about their family, hobbies, general preferences and music. The section that detailed personal facts had been completed by them and their son. One person liked to attend church services or have church volunteers visit them. The home supported them to continue this activity.

Improving care quality in response to complaints or concerns

- There was a clear complaints policy displayed in reception at the home and people told us that they were aware of how to raise a complaint if they had any concerns. There had been no major complaints since the last inspection. In some minor complaints such as lost clothing, the clothing had been found and returned to the person.
- One person told us, "If I saw or found any problem, we report to the manager. No really serious things have cropped up here." A second person said, "It's too good to complain."

End of life care and support

- People received appropriate and sensitive end of life care when it was necessary. In the past two years one person had passed away at hospital after living at this service for a long time. All of the staff remembered this person and were able to describe how they had ensured they had been comfortable.
- There was sufficient information to enable staff to provide person-centred end of life care should the need arise. Following the inspection, the provider completed end of life care records for each person which contains more information about people's preferences towards the end of their lives.

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 in August 2016, we rated this Key Question as 'Good'. At this inspection we found that service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care. Some regulations may or may not have been met.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There were insufficient records of quality compliance audits being completed by the registered manager. The registered manager was able to explain and described the steps that were taken visually and verbally in checking quality across the service. Yet, there were no records to support these assertions. There were no records of audits for infection control, medicines, care plans, daily notes or health and safety.
- The impact of this was minimal as we did not find there to be any serious issues or concerns with the areas where audits would usually be recorded. Records such as care plans did sometimes contain old information that could be removed.
- Following the inspection, the registered manager created new audit forms which will be used in order to record quality compliance checks. We will check this at the next inspection.

We recommend that the registered manager implements these new audits into practice.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- People and relatives spoke positively of the management team and felt confident to approach them with their views. One person told us, "The manager is a nice person." A second person said, "The manager is very approachable. Shes interested in what I want." A third person told us, "I think its well managed here. There are never any problems."
- The registered manager was aware of her responsibilities about reporting significant events to the Care Quality Commission and other outside agencies and ensured these were done in a timely way.

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

- People, staff and the local community were engaged by the management of the service. One relative told us, "The manager is very good, shes very caring. The staff and management are always around. Its very well run." One staff member said, "If I say something she (the registered manager) reacts to it. She listens to me. If one client needs to see the doctor and I tell her, then she will arrange the doctor immediately."
- Residents meetings were held every month or so for people to contribute to the running of the service. At the last meeting people had said that they were happy with the activities as they were and they wanted to only have sandwiches in the afternoons now. Following this, sandwiches were served in the afternoons for people.

Continuous learning and improving care

- The registered manager completed annual surveys and feedback questionnaires to assess how happy people were. The responses in February 2019 were positive with no changes requested. One relative said, "They have asked me for feedback in the past. At the start of this year."
- Following the constructive feedback of the inspection, the registered manager created an action plan to record audits at the home. The action plan considered person-centred care at its core and demonstrated the registered manager's dedication to implementing changes and improvements.
- The registered manager was always looking for new ways to learn such as taking on contingency planning training and sending staff to train with catheters this month.

Working in partnership with others

- People benefitted from partnerships with others. There were several local groups who worked with the home. A local pantomime group performed shows in the summer and at different times of the year. People had given very positive feedback about these shows at the home.
- The registered manager maintained connections with other local groups and services such as schools, churches and the library. These connections enabled more people to visit the service and interact with the people living there.