

Mrs Saima Raja

# Braemar Lodge Residential Care Home

## 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

The Inspection took place on the 5th September 2017.

Braemar Lodge provides accommodation and personal care for up to 13 people some of whom may be living with dementia. At the time of our inspection 13 people were living at the service.

At our last inspection the service was rated as Requires Improvement. At this inspection we found the service 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 monitor and provide good care and these were reviewed on a regular basis.

## 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.

People felt safe with staff. Staff took measures to assess risk to people and put plans in place to keep people safe.

Staff were only recruited and employed after appropriate checks were completed. The service had the correct level of staff to meet people's needs.

Medication was stored appropriately and dispensed when people required it.

### Is the service effective?

Good ●

The service was effective.

Staff received an induction when they came to work at the service. Staff attended various training courses to support them to deliver care and fulfil their role.

Staff had a good knowledge and understanding of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Where people lacked capacity, decisions had been made in their best interests.

People's food choices were responded to and there was adequate diet and nutrition available.

People had access to healthcare professionals when they needed to see them.

### Is the service caring?

Good ●

The service was caring.

People were involved in making decisions about their care and the support they received.

Staff knew people well and what their preferred routines were. Staff showed compassion towards people.

Staff treated people with dignity and respect.

### Is the service responsive?

Good ●

The service was responsive.

Care plans were individualised to meet people's needs. There were varied activities to support people's social and well-being needs.

Complaints and concerns were responded to in a timely manner.

### Is the service well-led?

Good ●

The service was well led.

Staff felt valued and were provided with the support and guidance to provide a high standard of care and support.

There were systems in place to seek the views of people who used the service and others and to use their feedback to make improvements.

The registered manager had a number of quality monitoring processes in place to ensure the service maintained its standards and to drive it forward.

# Braemar Lodge Residential Care Home

## **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 5th September 2017 and was unannounced. The inspection was carried out by one inspector.

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 seven people, three relatives, the registered manager, provider, quality manager, cook and two care staff. We reviewed three care files, four staff recruitment files and their support records, medication records, audits and policies held at the service.

# Is the service safe?

## Our findings

At our last inspection in July 2016 safe was rated as requires improvement because we wanted to see that improvements with staffing were sustained. At this inspection we have rated the service as Good.

People told us that they felt safe living at the service. One person said, "I feel safe here, the staff are always around and all the doors are locked at night." A relative said, "[Person name] is happy here, they prefer living here than to living in their flat."

The registered manager and provider made sure they recruited staff of good character and ensured all staff completed enhanced disclosure and barring checks (DBS). The registered manager and provider told us that where possible they only employed staff who were experienced in care work and who had obtained nationally recognised qualifications. Before staff were employed at the service they attended an interview and references were obtained.

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 saw anything or had any concerns I would inform the manager. If they did not act I would tell the owner and if still nothing was done I would go to the local council safeguarding team." The registered manager clearly displayed guidelines for staff to follow in raising safeguarding concerns. The provider monitored if there were any safeguarding's raised each month. The registered manager and provider were willing to work with the local authority to fully investigate any concerns and protect people.

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 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. One member of staff said, "We try and encourage people to stay mobile but some days they may need more support and use a hoist or wheelchair." The service had emergency plans in place and these included guidance for staff on hot weather and fire evacuation procedures. Each person had a personal evacuation plan and staff undertook regular fire evacuation training. Staff knew how to raise the alarm if somebody suddenly became unwell and they needed immediate assistance. One member of staff said, "If somebody had a fall we would check they were alright and call 111 for advice if it was serious we would call 999."

There were sufficient staff to meet people's needs. We saw that staff had time to spend with people and were unhurried in their interactions with people. Staff told us that they felt they had the correct number of staff on each shift to meet people's needs comfortably. Relatives and people told us that they felt there were enough staff at the service. One relative said, "There always seems to be plenty of staff around and I come at all different times."

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 the provider was making arrangements for on-going improvements, redecoration and upgrading of equipment at the service.

Medicines were managed and administered safely. People told us that they got their medicine on time and when they needed it. 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 our last inspection in July 2016 effective was rated as requires improvement because we wanted to see that improvements with staff training were sustained. At this inspection we have rated the service as Good.

The registered manager was very keen for staff to develop and attend training courses. The way training was delivered to staff had changed, moving away from computer based learning to face to face training. The registered manager had employed a trainer to come in to deliver training, in addition the registered manager and provider delivered training sessions to staff. One member of staff said, "I am up to date with all my training and I am continuing to complete an NVQ." New staff had a full induction when they started to work at the service, which included 'shadowing' more experienced staff. Staff told us that they had regular staff meetings and supervision with the registered manager to discuss the running of the service and their performance. From records we reviewed we saw this was a two way process for staff to receive support and updates on best practice.

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 2005 (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 about the food and cook, and said that they had enough food and choice about what they liked to eat. One person told us, "The food must be good because I like it and you get plenty of it." We saw that the cook went around each morning to discuss with people what they would like for lunch. We observed the dining experience which was a very pleasant experience for people with most choosing to use the dining room and socialise at meal times. We saw that the registered manager encouraged mealtimes to be unrushed and relaxed occasions for people.

Staff carried out nutritional assessments on people to ensure they were receiving an adequate diet and hydration. Staff also monitored people's weight for signs of loss or gains and made referrals where appropriate to the GP for dietitian input. 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, which were all monitored and recorded.

People were supported to access healthcare as required. The service had good links with other healthcare

professionals, such as, chiropodist, opticians, district nurses, dementia nurses and GPs. The provider and registered manager had developed a matrix to follow which helped staff identify when people needed to be referred to other healthcare professionals. We saw from records that staff were very observant of people's changing health conditions and sought prompt medical advice for them following this matrix. The registered manager told us that district nurses called regularly to the service to review people and provide nursing care if required.

## 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. They showed kindness and compassion when speaking with them. Throughout the inspection we saw people were living in a calm and relaxed environment. People and relatives told us on numerous occasion that the service felt homely one person said, "I like living here it is homely everyone here is like my family." Staff took their time to talk with people and showed them that they were important. People we spoke with were very complimentary of the staff and the support they received. One person said, "All the staff are very good, they are very caring." A relative told us, "The staff are brilliant, all very patient." We saw that people were relaxed in the company of staff and shared many conversations throughout the day.

Staff knew people well including their preferences for care and their personal histories. Staff told us that they try to support people to maintain their independence as much as possible and assessed the level of support people needed all the time. A member of staff said, "I always try and support people to keep their independence, some days they will need more support than others." We saw care plans were very detailed and contained biographies of people's life so far as well as containing all the details of how they preferred to be supported. People spent their time how they wished to and staff knew people's routines well. For example, one member of staff told us, "[Person name] likes to get up late on some mornings and [person name] always like to go for a lay down in the afternoon."

People told us that staff respected their privacy and promoted their dignity. Some people shared rooms at the service, this was done with their agreement and should they require privacy curtains were in place to separate the rooms. The registered manager told us that people had access to religious support should they choose to have this. In addition advocates services were available should people need support in making decisions about their care. People were encouraged to maintain contact with friends and relatives and they could visit people at any time.

## Is the service responsive?

### Our findings

At our last inspection in July 2016 responsive was rated as requires improvement because we wanted to see that improvements with person centred care was sustained. At this inspection we have rated the service as 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. Each care plan was written in a person centred way and told a story of how people wanted their needs to be met. Relatives told us that they were also actively involved, one relative said, "Staff are very good at communicating with us and keeping us informed." Relatives also told us that they had an opportunity to look around the service before their loved one came to live there. We saw that care plans were regularly reviewed and updated each month, with detailed information of any changes to people's care. This meant staff had the most up to date information they needed to support people.

The service was responsive to people's needs. For example, making sure people's changing care needs can be catered for such as involving the falls team when people have had issues with becoming unsteady when walking. The aim being to help people maintain their independence but to be supported to do this safely. Another example of responsive care was when a person found it difficult to use the call system in their room the registered manager arranged for them to have a hand held call bell which they could carry around and operate more easily.

People enjoyed varied pastimes and the management and staff engaged with people to ensure their lives were enjoyable and meaningful. The service employed an activities person to support people with social activities and hobbies. People were also supported to access the community if they wished to go out. Relatives told us that they were also involved with activities at the service one relative told us, "There is always a lot going on when I come in, they have singing and tap dancing and play skittles." Another relative told us how they frequently took their relative on trips out, which they enjoyed.

The registered manager had a robust complaints process in place that was accessible and all complaints were dealt with effectively. People said if they had any concerns or complaints they would raise these with the registered manager. However, people told us they generally did not have any complaints.

## Is the service well-led?

### Our findings

At our last inspection in July 2016 well-led was rated as requires improvement because we wanted to see that improvements made within the service were sustained. At this inspection we have rated the service as 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, "[Manager's name] is very good, any issues get sorted quickly." People frequently told us that they were happy living at the service and felt very lucky.

Staff shared the registered manager's vision for the service. One member of staff said, "I want to promote people's independence." Another member of staff said, "I want people to feel happy and contented and to be treated the way I would wish to be treated."

People benefited from a staff team that worked together and understood their roles and responsibilities. One member of staff said, "We have a good team, we all work well together and know what to do." Staff had regular supervision and meetings with the registered manager and provider to discuss people's care and the running of the service. Staff felt the registered manager was very supportive to their roles and listened to their opinions. In addition staff told us that the registered manager was supportive to them at work and with their personal lives. Staff had a handover meeting between each shift, to discuss any care needs or concerns that had happened and used a communication book and handover sheet to share information. This demonstrated that people were being cared for by staff who were well supported in performing their role.

People were actively involved in improving the service they received. The registered manager gathered people's views on the service on a daily basis through their interactions with people and their relatives. The registered manager also gathered feedback on the service through the use of questionnaires for people, relatives, visitors, staff and other stakeholders. A relative told us that they had recently completed a survey and was awaiting feedback from the manager. We were informed that a yearly survey had been sent out and the information was currently being gathered and reviewed. In addition the service had a suggestions box should people, relatives, staff or visitors wish to make suggestions or complete feedback forms on the service. This showed that the management listened to people's views and responded accordingly, to improve their experience at the service.

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 the environment. The provider also undertook a whole service review following our last inspection so that they could benchmark where they

were and identify where they wanted to be. We saw that the registered manager and provider had developed action plans to demonstrate how they had made changes at the service and how they monitored and sustained these changes. All information from audits was used in a meaningful way to ensure the quality of the service was maintained and to assist them to continually drive further improvements.