

Runwood Homes Limited

Elizabeth House

Inspection report

42-56 Benfleet Road
Hadleigh
Essex
SS7 1QB

Tel: 01702555786
Website: www.runwoodhomes.co.uk

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19 December 2017
09 January 2018
18 January 2018

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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 11, 19 December 2017 and 9, 18 January 2017 and it was unannounced. At the last inspection, the service was rated good. At this inspection, the service remains good.

Elizabeth House is a 'care home'. People in care homes receive accommodation and or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and we looked at both during this inspection. The service is registered to care for up to 108 older people, some of whom may be living with dementia, a physical disability and/or a sensory impairment. The service does not provide nursing care. There were 107 people living in the service when we inspected.

There was a registered manager in post. 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.

People received safe care and support. Staff had a good understanding of how to protect people from the risk of harm. They had been trained and knew how to support people with their mobility needs and what to do in an emergency. There were sufficient staff that had been appropriately recruited to ensure they were suitable to work with vulnerable people. The medication system and practice was good and ensured that people received their medication as prescribed. Staff had received training in infection control and knew to wear protection clothing. The environment was clean, safe and hygienic.

People's care and support needs had been fully assessed to ensure their diverse needs could be met. They, together with their families had been fully involved in the process and people's care plans had been regularly reviewed. Staff knew the people they cared for well, were well trained and supported and knew how to provide effective care.

People received the support they needed with food and drink. They were offered a good choice of meals and were supported to eat healthily. Staff helped people with their healthcare needs and worked together with other professionals to ensure that people received appropriate healthcare.

The service worked in line with other legislation such as the Mental Capacity Act 2005 (MCA) to ensure that people had as much choice and control over their lives as possible. 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 were cared for by staff who were kind, caring and respectful. They told us they felt they mattered and staff listened to them. Staff demonstrated a good knowledge of the people they cared for. People and their families were kept actively involved in their care and support. Advocacy services were available if people needed them. An advocate supports a person to have an independent voice and enables them to express

their views when they are unable to do so for themselves.

People received personalised care that was tailored to their individual needs and kept under review to ensure it reflected any changes. The service offered people a range of activities both in the service and out in the local community. People were encouraged and supported to maintain their personal relationships with family and friends. The registered manager supported people in using technology such as computer tablets and mobile phones. They told us of their plans to introduce SKYPE so that people could see their loved one when talking with them.

People and their relatives told us they were able to raise concerns and complaints with staff and management. They felt their complaints were listened to and acted upon. Complaints had been fully investigated and actions had been taken to prevent a re-occurrence. Concerns and complaints were discussed at staff meetings to ensure that lessons were learnt. People had end of life plans in place and staff were aware of how to support their families and other people at these times.

The management team valued and supported staff and worked well in partnership with other professionals. There were effective quality assurance systems in place to identify and improve the service.

Following our inspection we received some information for concern. We requested a response from the provider to tell us what actions they were taking to ensure people remained safe and continued to receive a good service. The provider sent an immediate detailed action plan to us to tell us what they were doing to address any identified shortfalls and we continue to monitor the service. Should risk escalate or any further concerns come to our attention, we will inspect again to ensure people are receiving effective and well led care. In the meantime the Local Authority is also working closely with 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.

Elizabeth House

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 11, 19 December 2017, and 9, 18 January 2017. It was unannounced and was carried out by two inspectors and two experts by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection, the provider completed a Provider Information Return (PIR). 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 also reviewed information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

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.

We spoke with 32 people, 13 of their relatives/friends, the registered manager, the deputy manager and 23 members of staff. We also spoke with the operations director and administrative staff. We reviewed 17 people's care files and 12 staff recruitment and support records. We also looked at a sample of the service's medication system, policies, audits, training records, staff rotas and complaint records.

Following our inspection we received notification of an incident following which a person using the service died in hospital. This incident is subject to an investigation and as a result we requested further information of the providers actions. The incident have been brought to the attention of the Police and the Local Authority who are also investigating the incident.

Is the service safe?

Our findings

At this inspection, we found the same level of protection from abuse, harm and risk as at the previous inspection and the rating continues to be Good.

People repeatedly told us they felt safe. One person said, "I trust the staff in every way. They are totally trustworthy." We saw that people were relaxed and happy in staff's company and with each other. Staff knew how to raise any concerns and demonstrated a good understanding of how to protect people from abuse. The systems, processes and practices of the service generally safeguard people from abuse. However, after our inspection we attended a meeting and learnt of some issues that had not been appropriately reported. The registered manager gave their assurance that improvements had been made since then, and that all relevant issues were now reported to the appropriate authorities.

People's freedom was respected and risks to their health and safety were monitored and managed. Staff had received training in first aid and fire safety and they knew to call the emergency services when needed. There were detailed fire evacuation plans in place to ensure that people evacuated safely. Regular fire drills had taken place. People had risk assessments in place, together with management plans for their mobility, skincare, nutrition and falls.

People were cared for in a safe environment. Other risks such as for the safety of the building and the equipment being used had been regularly assessed and well maintained. There were safety certificates in place for the service's gas, electric and water systems. Routine maintenance work was carried out appropriately by the maintenance person.

There were enough staff to support people to stay safe and to meet their assessed needs. We saw that staff were quick to attend to people's requests throughout our visits. However, people's views varied and two people told us that they did not feel there was always enough staff as they sometimes had to wait for their support. One person said, "Sometimes there doesn't seem to be enough staff around." The other person told us, "I need two carers to support me and sometimes have to wait too long for them to attend to me." All of the other people we spoke with felt there were enough staff and their comments included, "If I need help, staff come quickly," And, "People are never left alone for long." We tested call bells during our visit and staff attended within a few minutes. The registered manager kept a log of call bell times and monitored any delays.

The service had robust recruitment processes that ensured people were supported by suitable staff. Appropriate checks had been carried out which included Disclosure and Barring Service (DBS) checks, written references, proof of the right to work in the UK and evidence of staff's skills and knowledge.

The service ensured the proper and safe use of medicines. People told us they received their medication appropriately. The service had a medication champion who was responsible for ordering, receiving and checking that medication was given correctly. There was guidance available and staff had been trained and had their competency to administer regularly checked. Weekly audits of the medication system had taken

place.

People were protected from the risk of infection. People told us that the service was kept clean and hygienic. One person said, "They are good at cleaning here, spillages are dealt with immediately." Another person told us, "There is never a bad smell here, or stains on the carpets or furniture, that means a lot to us." We saw that staff wore protective equipment when carrying out tasks such as administering medicines or giving personal care.

Staff understood their responsibilities to record all safety incidents and near misses. The registered manager monitored incidents and accidents and analysed the information which they shared with staff during staff meetings. They told us that this ensured that lessons were learnt and improvements implemented to minimise future risks.

Is the service effective?

Our findings

At this inspection, we found that staff had the same level of skills, experience and support to enable them to meet people's assessed needs effectively as we found at the previous inspection. People continued to have freedom of choice and were supported with their dietary and health needs. The rating continues to be Good.

People's physical, mental, health and social needs were holistically assessed on an on-going basis in line with legislation, evidence based guidance and other expert professional bodies. As part of the pre-admission assessment people were asked about their sexuality and asked if they had a preference of staff's gender when providing them with personal care. This choice was highlighted in people's care plans and people confirmed that their choice was respected.

People were cared for by staff who had the skills, knowledge and experience to deliver effective care and support. Staff told us, and the records confirmed that they had received regular supervision, appraisal and a wide range of training appropriate to their role. One staff member said, "Morale has improved greatly recently." Another staff member told us, "I Love it. It is a great place to work. People repeatedly said that staff seemed well trained and happy working at Elizabeth House and that it was a friendly, happy atmosphere.

People were supported to eat and drink enough to maintain a balanced diet. We observed the lunchtime meal and saw that people were offered choice from the pictorial menus and plated meals. There was a social, friendly atmosphere with lots of laughter and friendly banter between staff and people using the service. Staff showed patience and understanding when supporting people to eat their meals. People repeatedly told us they enjoyed the food and appreciated the choices made available to them. There were ample drinks offered throughout our visits and people told us drinks were always available.

Staff worked well with other organisations to ensure that they delivered effective care and support. For example, the service had designated a room for the weekly GP visits to enable people to feel they were, 'going to the doctors'. People told us they had access to healthcare services and received on-going healthcare support. They told us, and the records confirmed that they received the support they needed, when they needed it. For example, the outcomes from GP, hospital, chiropodist and district nurse visits had been recorded in people's care plans, including any follow up actions. People repeatedly said that staff understood their health conditions and were quick to notice if they were unwell. One person told us, "I am confident that staff will call for medical help when I need it."

People's individual needs were met by the adaptations, design and decoration of the premises. People and their relatives told us they were happy with the building. We saw there were many different areas to cater for differing tastes. There was a tea room, a cinema, a wedding corner and a bar. The long corridors were sometimes problematic as the distance between rooms meant that staff may be delayed in responding to people at the other end of the building. However, most people told us that they did not feel this was a problem. The service was nicely decorated with many reminiscence items, pictures and photographs.

People who lack mental capacity to consent to arrangements for necessary care and 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 procedure for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The service was working within the principles of the MCA. People had assessments in place for different decisions setting out how they were supported to make them. Appropriate DoLS applications had been made to the local authority and authorisations were in place where required. Staff demonstrated a good understanding of how to support people to make decisions and knew that any made on their behalf must be in their best interests.

Is the service caring?

Our findings

At this inspection, we found people were as happy living in Elizabeth House as they had been during our previous inspection because they felt staff cared for them. The rating remains Good.

Staff were compassionate and thoughtful, they knew people well enough to care for their emotional wellbeing and engage with them personally at all times. People repeatedly told us that staff knew them well, were kind and caring and treated them respectfully at all times. One person said, "A member of staff came with me to the hospital, they stayed with me the whole time. That was wonderful and we've become good friends." Another person told us, "The staff are very good here, they are kind and gentle and make sure that we have everything that we need." Other comments included, "I'd give them nine out of 10 for friendliness." "Staff are always polite and respectful." We saw that staff respected people's dignity and engaged with their families and friends in a kind, courteous manner.

People clearly felt that they mattered and that staff listened to them. They told us that staff treated them well and took their time when supporting them. People's care plans contained good information about their likes, dislikes and preferences. One person said, "The staff are exceptionally kind, they don't mind you asking for anything. We saw many occasions throughout our visits where people thanked staff for their kindness and they responded by saying, "It's my pleasure." "That's what I am here for." And, "I like helping you."

People and their families were actively involved in making decisions about their care and support. The service held regular resident and relative's meetings to ensure that people had ample opportunity to give their views and opinions. Advocacy services were available should people need them.

Staff understood the importance of promoting people's independence whilst still keeping them safe. People told us that staff supported and encouraged them to remain as independent as they possibly could. During our visits we saw that people were encouraged to join in with the singing and dancing at the Christmas party. People were enjoying themselves and were able to join in as much or as little as they were able to.

Is the service responsive?

Our findings

At this inspection, we found staff were as responsive to people's needs and concerns as they were during our previous inspection. The rating continues to be Good.

People received personalised care that was individually tailored and responsive to their needs. People told us that they were involved in the care planning process. One person said, "My family and I discussed what help I needed and my care plan tells the staff how I like to be cared for." The care plans viewed included information about all aspects of people's care. For example, people had care plans for their mobility, their communication and for their social and emotional needs. The care plans viewed had been updated to reflect people's changing needs. People had 'family tree' documents in their care files which gave an overview of their immediate family and a summary of their social history such as jobs and upbringing. This gave staff the opportunity to learn about people's past life. One staff member said, "I find the family tree really interesting and very useful for getting to know people."

Staff ensured that people experienced meaningful activities. We observed many activities throughout our visits. They included, a quiz, a knitting club, a reminiscence session, a Christmas party and a gentleman's club. People told us they looked forward to the activities on offer and could choose whether or not to join in. We saw that there were books for people to read in quiet areas around the home where people could sit and listen to the radio, which was playing calm, relaxing music. One person told us, "There is absolutely no reason to be bored or lonely here. I'm very creative and I still have the chance to make things and be artistic, and I am grateful for that."

The service encouraged links with other services and the local area to ensure people remained part of their community. People had attended a dementia awareness festival in the summer where there was live music and dancing. They had the opportunity to meet with other people including the Mayor. They said that they had enjoyed a picnic in the park and meeting other people in the community.

The service encouraged people to maintain relationships and was continuously looking for ways to improve the use of technology to enhance people's lives. For example, the registered manager told us about their plans to introduce SKYPE to enable people to see their loved one when talking to them. One person had a computer tablet and others had mobile phones. Staff told us that some people preferred to maintain their contact with family and friends through letters, family visits and telephone calls. People said that staff supported them in their preferred methods of communication.

People's concerns and complaints were listened to and acted upon. People told us that their complaints were dealt with. One relative said, "I am very content with the service now, although there were some problems at first but the manager was very responsive and sorted things out." Another relative told us, "There is a book in the reception area for us to write any comments in." Other people told us they had no complaints and one person said, "I would go to 'the redcoats' [care team managers] as they never make you feel you are a nuisance." There was a policy and procedure in place and the records showed that people's complaints had been dealt with appropriately.

People had discussed their end of life wishes with staff and there were clear plans in place to ensure that they were met. Staff were in the process of obtaining end of life information for people who were new to the service to ensure that their needs and wishes were met. Other people's care plans contained details of their funeral arrangements and who should be involved. Where people and their relatives had not wanted to discuss end of life care, it was clearly documented and there were basic details in every care file that we looked at. Where people had Do Not Attempt Resuscitation (DNAR) in place they had been appropriately authorised and were kept at the front of the person's care file for ease of access.

Is the service well-led?

Our findings

At this inspection, we found the staff were as well-led as we had found during the previous inspection. The rating continues to be good.

The registered manager has been in post since 24 May 2017. People and their relatives told us they had confidence in the registered manager. One relative said, "The new manager is approachable. They and the deputy are about all of the time.I get the impression nothing much gets past them." Staff told us that the registered manager was supportive and helped them in any way they could. One staff member said, "They [registered manager] are good to their staff. They are the best thing that has happened to this home." People and their relatives told us they would recommend the service to others.

The registered manager had a good knowledge about the people they were caring for, their relatives and individual staff members. The service operated an open and inclusive culture where people felt able to raise issues. People told us, and the records confirmed that they were fully involved in how the service was run and how to make improvements where necessary. Staff told us they felt listened to and that the registered manager and staff communicated with each other effectively. One staff member said, "We have regular meetings and we can raise anything we like – it's good that we're supported. There were clear whistle blowing, safeguarding and complaints procedures in place and staff were confident about implementing them.

People had good community links such as visits to local amenities and trips out in the service's mini-bus. They told us that children from a local school had visited the service at Christmas-time and they said how much they had enjoyed the visit. The registered manager said more visits were planned as people benefited from the interaction with young people in the community.

The service had an effective quality monitoring system in place. People's views were sought, their responses analysed and actions taken to address issues and make any improvements. Audits had been carried out on the service's systems, processes and practices. The service worked well in partnership with other professionals. However, after our inspection we attended a meeting and learnt of some issues that had not been appropriately reported. The registered manager gave their assurance that improvements had been made since then, and that all relevant issues were now reported to the appropriate authorities.

People's personal records were securely stored when not in use. Staff knew who they could and could not share personal information with and had been trained in the Data Protection Act and confidentiality.

Following our inspection we received some information for concern. We requested a response from the provider to tell us what actions they were taking to ensure people remained safe and continued to receive a good service. The provider sent an immediate detailed action plan to us to tell us what they were doing to address any identified shortfalls and we continue to monitor the service. Should risk escalate or any further concerns come to our attention, we will inspect again to ensure people are receiving effective and well led care. In the meantime the Local Authority is also working closely with the service.

