

Aldwyck Housing Group Limited

Celia Johnson Court

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

At the last inspection, the service was rated Good. At this inspection we found the service remained Good

This inspection was carried out on 15 June 2017 and was unannounced. At their last inspection on 10 June 2015, they were found to be meeting the standards we inspected. At this inspection we found that they continued to meet all the required standards.

Celia Johnson Court provides accommodation and personal care for up to 37 older people with age related frailty. It does not provide nursing care. At the time of our inspection there were 27 people residing at the home.

The service had a manager who was registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the 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 and associated Regulations about how the service is run.

People were protected from potential harm and staff were able to demonstrate they were aware of the risks of abuse and how to report or raise concerns. We found that there was a robust recruitment process in place and sufficient staff deployed to meet people's individual care and support needs at all times. There were suitable arrangements in place for the safe ordering, storage administration and disposal of medicines.

People were asked for their consent and staff were aware of MCA principles and where people lacked capacity to make decisions, consent had been obtained in accordance with the Mental Capacity Act (MCA) 2005.

People were supported to maintain their health and well-being and had access to a range of healthcare professionals such as GP's, district nurses, and dentists. People were offered choices of what food and drinks they wanted and were supported to maintain a healthy balanced and varied diet.

People were treated kindly and in a way which respected and maintained people's privacy and dignity. Staff demonstrated that they knew people well and met their needs in a personalised way.

People were supported to participate in a range of activities and meaningful engagement which took into account people's individual abilities and interests. People and staff told us they were always consulted about all aspects of the service, as well as how the home was run. People told us they felt 'listened to' by the management team. The management team valued people and staff. There were systems and processes in place to monitor the overall quality of the service and to drive continual improvements.

The management team were open and transparent about all aspects of the service. The home is in the process of being sold to a new care home provider. We saw and people confirmed that people were fully

consulted throughout the process.

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

Celia Johnson Court

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 16 June 2017 and was unannounced. The inspection was carried out by two inspectors. Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us. We also reviewed the provider information return (PIR) submitted to us 26 October 2016. This is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

During the inspection we observed staff supported people who used the service and interacted with them positively. We spoke with 4 people who lived in the home, 1 relative, the duty officer domestic /relief cook, 3 care staff and a visiting district nurse. We also 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 reviewed care records relating to three people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality monitoring audits.

Is the service safe?

Our findings

People spoken with said they felt safe living at Celia Johnson court. One person told us "Yes I feel safe here. I could have a key to my room if I wanted but I don't. I know they always check I am ok". Another person said "I feel safe definitely, the staff are great".

Staff were confident in their understanding and knowledge of safeguarding and what action they would take if they had any concerns. One staff member said "We had good in house training, it was very thorough". Staff were able to demonstrate the process to report concerns both internally and externally if they needed to.

People had individual risks assessed and staff were given clear guidance on how to support people where risks had been identified. For example if a person was at risk of falls or skin breakdown actions were put in place to manage these to help keep people safe. One staff member told us "We work as a team and share any relevant information in a timely way which helps us look after people and keep them safe".

People told us they always felt there were always enough staff on duty. One person said "They come and check on us regularly and see if we need anything and even at night they will check on you". We observed during the course of our inspection that people were assisted in a timely way and there were adequate staff on duty.

There was a robust recruitment process in place. All staff spoken to confirmed they were recruited having completed an application form, and had any gaps in employment explored and references sought. A disclosure and barring check was also completed and staff confirmed that they did not start work until they had all pre-employment checks had been completed.

There were clear systems for the safe storage, management and disposal of medicines and people were supported to take their medicines by trained staff. People told us that people received their medicines regularly and that they were satisfied that their medicines were managed safely. One person said "I take a lot of tablets and they are always on time they also always tell me what they are giving me". Another person said "The duty officer gives out the medicines I know my medicines and they are given at the right time". We checked a random sample of boxed medicines and found that they tallied with records held.

They said "We will always review people's medicines if something changes or if they request them to be reviewed otherwise it is yearly." They confirmed no one was currently receiving any medicines covertly. They told us "One person self-medicates and has a locked drawer in their room, staff do check from time to time but the person is very capable and would highlight themselves if there were any problems". Medication audits were completed as part of the overall monitoring of the service.

Is the service effective?

Our findings

People told us they had confidence in the staff abilities to care for them. One person said, "They are really good and know also when you are not well, and seek appropriate assistance when you need it".

People confirmed the staff obtained consent and spoke with them before supporting them. One person said "After a while they know which part of my care I need help with but they always check if I want any other help or if anything has changed". Another person said, "Staff are very good they treat me always with respect and ask before they help me."

Staff gave clear examples of how they sought peoples consent before supporting them and how they gave people choices. One staff member told us "I always ask if people want a bath or a shower and respect their decision if they refuse. Or when they are getting dressed I show them their clothes so they can decide what to wear". Another staff member told us "We check where people would like their lunch where they want to sit it is their home their choice".

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 when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS) Staff understood and were able to explain their responsibility under the Act. We checked whether the service was working within the principles of the MCA and found that they were.

Staff all said they were very happy with the level of training and support they received. One staff member said "When I started I had a good induction over a 2 week period. Even though I was an experienced carer I had time to get to know the people I would be supporting".

All the staff spoken with confirmed that had regular training relevant to their roles which included topics in key areas including Moving and handling people, safeguarding, dementia , COSHH, MCA. One staff member told us "Its brilliant training and the yearly updates refresh your mind and keep you up to date with any changes and any new ideas".

Everyone felt confident in their role and said they had excellent support from their colleagues and from the seniors. One staff member said "We have regular individual supervisions, team meetings and yearly appraisals and we can go to the manager or any of the senior staff at any time plus we really work as a team".

There were mixed views of the food. One person said "I don't like the food but they will get me cheese on toast if I want it". Another person said "The food is good and bad. If I don't like it I can get an alternative". We

saw people had good access to drinks and there were frequent tea rounds. During lunch some people sat in the garden others in the dining room and some chose to eat in their rooms. There was a relaxed unrushed atmosphere. The service catered for specialist diets including diabetic or soft diets and people's food and hydration was monitored where required.

Is the service caring?

Our findings

People spoke positively and warmly about the staff and how caring they were. One person said "When I was very ill my family stayed with me and they even got them a room". Another person told us "My [relative] comes in late after work so the staff gave them a key so that they can come in easily".

Another person told us "The staff are very caring indeed I never feel they are rushing me". We observed that staff spent time supporting people and worked at a pace that suited people and helped maintain their independence. So for example people were encouraged and supported to do what they could for themselves including supporting people to do some of their own personal care. This helped them to retain some control over their lives.

People told us that the staff were caring and treated people with dignity and respect. One person told us "They know I like my coffee a certain way and it always is made just right". "One staff member looks after me like a mother hen I am spoilt". Staff described how they knocked on people's doors before entering to ensure privacy was maintained. Another person said "it is a very good home it has a very good name it's always relaxed and has a friendly atmosphere".

People said staff always showed respect and helped maintain their dignity when supporting in personal care. For example one person said "I always feel comfortable with the staff they make you feel good".

People and their relatives where appropriate were involved in the development and review of their care plans. People told us they were involved in discussions and had 'key workers' who reviewed their needs at regular intervals.

A visiting relative told us "The staff are great. They will contact us if there is anything they need to tell us and share information in a timely way. They are really welcoming and helpful. My relative is happy here".

Confidentiality was well maintained throughout the home and people's personal and confidential information was stored securely. Information about a range of service including how to access advocacy services was available to people and their relatives should they wish to access these services.

Is the service responsive?

Our findings

People told us staff gave them choices and respected their preferences. One person told us, "I can discuss anything with staff and they respond to my requests". Senior staff were able to describe situations where people's needs changed and how the service responded to their changing needs. For example when a person's health deteriorated and they needed equipment to support them with their mobility.

People told us how the staff gave them a choice about what time they got up and went to bed. We saw from meeting minutes that people were asked about what their preferred meal times were and they set the meals times at the time the majority of people preferred to have their meals and made arrangements for other people to have their meals at the times that suited them. This demonstrated how the service responded to people's individual needs.

People told us they were able to live their lives exactly how they wished and were given choices about all aspects of their lives. One person told us "I can go to bed when I want and I get up when I want to have a wash go for my breakfast, what more do I want." Another person told us, "I only need help with a shower and they [staff] never refuse, I wouldn't say they [staff] encourage me to be independent I just do it, I can go to bed when I want but they do ask me to turn my radio down sometimes."

People comments included "I chose to stay in my room and staff know what I like and don't like and they respect that, I wouldn't want to be anywhere else".

Another said "Coming here is the best thing that has ever happened to me. It's a relaxed atmosphere and you are free".

People said their culture, spiritual or religious views were respected. One person said "I have my own prayers and I also like to go to the bible readings. I am a Muslim they respect my religion and beliefs. Also the fact that I don't eat pork or gammon they prepare alternatives".

People said how they felt the staff were flexible and fitted around their needs. For example one person said they always want to check on you at night but as I am a light sleeper they are happy I shut my door and they don't disturb me go to bed late and they wake me up at seven o'clock".

Everyone spoken to said they knew about their care plan and it would be reviewed when necessary. Everyone said the staff knew their preferences and respected them.

People said they had been asked feedback about the home and they could also speak directly to the manager or use the resident's meeting to raise something. "One person said "There are residents meetings every 2 months and we voice what is wrong or right.

Everyone knew how to make a complaint. One person said they had raised a complaint when an agency staff forgot them and left them in the toilet. However they said things have improved since then and they got a very good response from the manager. They have since worn a pendant and say staff do respond when

called. One person said "I have no complaints but I would speak to the manager if I did.

Is the service well-led?

Our findings

The registered manager was spoken highly of by both people living in the home and the staff. They were known to everyone and comments about them included "It is really well managed and all praise to the manager [name] and the assistant. They are very accessible and will always come straight away when you ask to see them".

Another person told us "The manager is excellent [name] listens to you and comes to talk with you ". Another said "The manager is very nice and is available and relatives can see them whenever". People said the residents meetings were positive and you could raise any concerns there. One person said "You can raise any concerns and they are responded to".

Staff comments included "It is definitely well led – the manager is always around and the duty officers are so supportive and are there if you need them".

All the staff were clear about the ethos and values of the home. They emphasised how they worked as a team. Staff had excellent support and training. Staff comments included "I get regular one to one supervision and can ask advice at any time. There is great support from the manager and seniors and amongst the staff- we are a team". Another comment was "We work to make residents happy and we do that as a team I really love my job"

All the people who lived in the home and the staff knew about the takeover by another care provider and had been extensively involved in the consultation process. People were apprehensive but also relieved that the staff would remain. One person said "We were asked if we wanted to see one of their homes but I am happy here so I didn't go". Another person said "We know that another care company are taking over we are keeping our fingers crossed ".

There were systems and processes in place to monitor the quality and safety of the service. These were completed both by the home and area manager and looked at all aspects of the service. Audits included medicines, the environment and infection controls were completed.

The senior management team operated in an open and transparent way and had a clear vision for the service. People's views were sought and changes were made where possible as a result of feedback. This demonstrated that the service listened to and valued people's feedback.