

Elm Bank Healthcare Limited

Elm Bank Retirement Village

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

Elm Bank Retirement Village is registered to provide accommodation and personal care for up to 115 people. There were 97 people living at the home at the time of this inspection. At the last inspection, in February 2015, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care. Staff were appropriately recruited and there were enough staff to provide care and support to meet people's needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision, training and on-going professional development that they required to carry out their roles. People were supported to maintain good health and nutrition.

People developed positive relationships with the staff who were caring and treated people with respect, kindness and courtesy. People had detailed personalised plans of care in place to enable staff to provide consistent care and support in line with people's personal preferences. People knew how to raise a concern or make a complaint and the provider had implemented effective systems to manage any complaints that they may receive.

The service had a positive ethos and an open culture. The registered manager was a positive role model in the home. People and relatives told us that they had confidence in the manager's ability to provide consistently high quality managerial oversight and leadership to the home.

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 ●

This service was safe

People felt safe and staff were clear on their roles and responsibilities to safeguard them.

People received their care and support from sufficient numbers of staff that had been appropriately recruited and had the skills and experience to provide safe care.

People's medicines were appropriately managed and safely stored.

Is the service effective?

Good ●

This service remains good.

Is the service caring?

Good ●

This service remains good.

Is the service responsive?

Good ●

This service remains good.

Is the service well-led?

Good ●

This service remains good.

Elm Bank Retirement Village

Detailed findings

Background to this inspection

Elm Bank Retirement Village is registered to provide accommodation and personal care for up to 115 people. There were 97 people living at the home at the time of this inspection. At the last inspection in February 2015, the service was rated Good. At this inspection we found that the service remained Good.

People continued to receive safe care. Staff were appropriately recruited and there were enough staff to provide care and support to meet people's needs. People were consistently protected from the risk of harm and received their prescribed medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision, training and on-going professional development that they required to carry out their roles. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice'. People were supported to maintain good health and nutrition.

People developed positive relationships with the staff who were caring and treated people with respect, kindness and courtesy. People had detailed personalised plans of care in place to enable staff to provide consistent care and support in line with people's personal preferences. People knew how to raise a concern or make a complaint and the provider had implemented effective systems to manage any complaints that they may receive.

The service had a positive ethos and an open culture. The registered manager was a positive role model in the home. People and relatives told us that they had confidence in the manager's ability to provide consistently high quality managerial oversight and leadership to the home.

Is the service safe?

Our findings

Everyone we spoke with told us that staff at Elm Bank Retirement Village provided safe care. One person told us, "Staff know what they are doing, they are quick to notice if I am not well." A relative told us, "[Name] is safe and well here." Staff understood their responsibilities to safeguard people and knew how to raise any concerns with the right person if they suspected or witnessed ill treatment or poor practice. One member of staff told us "I would report anything of concern to my manager, and if they did not respond I would contact the local authority safeguarding team." Staff had received training on protecting people from abuse and records we saw confirmed this.

People were assessed for their potential risks such as falls. People's needs were regularly reviewed so that risks were identified and acted upon as their needs changed. For example where people's mobility had deteriorated their risk assessment reflected their changing needs. People's care plans provided instruction to staff on how to mitigate people's risks to ensure people's continued safety. For example, where people were identified as being at risk of pressure ulcers, the risk assessments and care plans were updated to reflect that staff carried out more frequent position changes to relieve people's pressure areas.

People were assured that regular maintenance safety checks were made on all areas of the home including safety equipment, water supplies and the fire alarm. People had personal emergency evacuation plans in place in case of an emergency; these were colour coded to enable staff to see clearly in an emergency situation the level of support people required. Fire safety systems were in place and appropriate checks were conducted; these included weekly fire alarm tests and regular fire drills. Fire safety equipment and other equipment were regularly checked to ensure it was maintained in good working order.

People could be assured that prior to commencing employment in the home, all staff applied and were interviewed through a recruitment process; records confirmed that this included checks for criminal convictions and relevant references.

People's assessed needs were safely met by sufficient numbers of experienced staff. People told us there was always enough staff on duty to meet their needs and we saw that staff were on-hand to support people when needed. One person said, "When I use the call bell, they [staff] always come in good time." One relative told us "I'm very impressed with the staff; they look after [my relative] brilliantly and are so quick to respond if [my relative] uses the call bell." Staff told us there were sufficient staffing levels to meet people's needs, and that the Registered Manager ensured that people got the extra time they needed when their needs increased. Staffing levels were set according to people's dependency and care needs.

There were appropriate arrangements in place for the management of medicines. People received their medicines in a way they preferred. Staff had received training in the safe administration, storage and disposal of medicines. We observed staff administering medicines to people and heard them explain what the medicines were for. Staff had arranged for people to receive liquid medicines where they found swallowing tablets difficult. Staff followed guidelines for medicines that were only given at times when they were needed for example Paracetamol for when people were in pain. There were regular medicines audits,

where actions had been taken to improve practice.

Is the service effective?

Our findings

People received care from staff that were knowledgeable and had received the training and support they needed. Staff training was relevant to their role and equipped them with the skills they needed to care for people living at the home. For example, staff had received specialist dementia training and were supported by a dementia lead to put what they had learned into practice. All staff had regular supervision and appraisal; one staff member said "my supervisor who is the registered manager is great, I am able to talk about residents' changing needs and the processes we have in place and she makes me feel fully involved, part of the team and part of the decision making processes."

People were encouraged to make decisions about their care and their day to day routines and preferences. Staff had a good understanding of people's rights regarding choice. Detailed assessments had been conducted to determine people's ability to make specific decisions and where appropriate Deprivation of Liberty Safeguards (DoLS) authorisations had been obtained from the local authority. One person told us "The staff always ask me what my plans are for the day, whether I need any support and what activities I would like to be involved in, they never try to pressure me and if I feel like not doing much that is okay as well."

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).

People were supported to maintain a healthy balanced diet and those at risk of not eating and drinking enough received the support they required to maintain their nutritional intake. People had regular access to healthcare professionals and staff were vigilant to any changes in people's health. Records confirmed that prompt referrals were made to healthcare and social care professionals and their guidance was followed.

Is the service caring?

Our findings

People developed positive relationships with staff and were treated with compassion and respect. One person told us "The staff work very hard and they are always kind to me." Another person told us "I feel really comfortable about talking to the staff about anything." Many relatives commented that they felt their relatives were treated with kindness and respect, one relative told us "The carer's are really kind; I wouldn't let [my relative] stay here if it was any different.

People were relaxed in the company of staff and clearly felt comfortable in their presence. We observed that staff knew people well and engaged people in meaningful conversation. People's choices in relation to their daily routines and activities were listened to; staff treated people as individuals, listened to them and respected their wishes. Staff were observed speaking to people in a kind manner and offering people choices in their daily lives, for example if they wanted any snacks and drinks or what activities they wanted to join. One person told us "So many choices; some days I choose not to join in the activities and the staff are happy with my decision."

People were treated with dignity and respect. We saw that people were asked discreetly if they required any support. One relative told us "Whenever I have been visiting I always see people treated with dignity and respect; I don't just look out for my family member I look out for everyone." Staff were aware if people became anxious or unsettled to provide support in a dignified manner. Staff approached people calmly, made eye contact and had a positive approach to supporting people. One person told us "Some days I need more support than others, but I don't feel like I am bothering the staff."

Is the service responsive?

Our findings

People received care that met their individual needs. A range of assessments had been completed for each person. People and where appropriate their relatives and other health and social care professionals were involved in developing detailed care plans. Staff knew people very well; their backgrounds and what care and support they needed. One staff member said "We really take the time to get to know each person, to understand their life story; this is really helpful in helping them settle and feel at home here." One person told us that "The staff were great when I moved in, I spent some time visiting first to get used to the surroundings and it has been great since then." A relative told us "I was worried at first about [my relative] coming to such a big home; but it has all turned out great. [My relative] likes it here and I know from the conversations the care staff have with [my relative] that they have got to know them really well; I'm fully reassured."

People were supported to follow their interests and take part in social activities. The home had a varied activities calendar that catered for everyone's needs. Activities included arts and crafts, library book swaps, motivational exercises, themed and holiday activities, visiting entertainers. Therapeutic interactions including pet therapy, a 'men only' pampering session and hair and nails beauty sessions. One person told us "We have quiz nights which are good fun and also I like to join in the dominoes and do the arts and crafts." A relative told us "[My relative] has so much more stimulation here than they did in their previous home; it is great to see the change in him since living here."

People and their relatives knew how to make a complaint if they needed and were confident that their concerns would be carefully considered however none of them had needed to make a formal complaint. One person told us "I've never really needed to make a complaint; if I am not happy with something I talk to the staff and they normally put it right." We saw that there was a clear complaints policy in place. One relative told us "I have made a complaint before, in fairness the home cannot get everything right but when I raised the issue I received an apology and the issue was put right straight away; I can't ask for a better response." Complaints records were maintained and issues that had been raised with the manager detailed the actions that had been taken.

Is the service well-led?

Our findings

The values and ethos of the provider was clear in all of the interactions all levels of staff had with the people who used the service. The registered manager worked alongside staff in the home and used a coaching style of leadership, delegating duties to staff and setting clear expectations of expected standards. They acted as a role model for staff about the standards of care and attitudes they expected, and monitored and supported staff in their practice. Staff described the registered manager as "always on the ball." Staff felt well supported and said that they would not hesitate to speak to the registered manager if they needed to. One member of staff said "The manager is great, she is knowledgeable about every single resident and her dedication is second to none."

People benefited from receiving care from a team of staff who were committed to providing the best possible care and support they could which was consistent and could be relied upon. Staff were focussed on the outcomes for the people that used the service and staff worked well as a team to ensure that each person's needs were met. All of the staff we spoke with were committed to providing a high standard of personalised care, support and rehabilitation. One member of staff told us "This is a really good company to work for; we provide person-centred care, everyone is treated as an individual."

Staff felt listened to and were in regular contact with the management. Staff told us that they were involved with the development of people's care plans. The management team were receptive to staff ideas and suggestions and made the appropriate changes when necessary. Meetings were held with staff which enabled them to share good practice and keep up to date with any changes or developments within the company. Staff were individually recognised for their care and commitment through employee of the month recognition which was voted for by people who use the service and staff. This helped to embed the culture and ethos of the service that was to 'make every moment matter' and 'love every day'.

Quality assurance systems were in place to help drive improvements. These included a number of internal checks and audits as well as a provider audit. These helped to highlight areas where the service was performing well and the areas which required development.

The provider was committed to providing staff at all levels opportunities to be involved in embedding the values in the workplace and ensuring this had a continual positive impact on the people who lived in the home. The provider and staff spoke about inspiring people, how they valued making 'magic moments' for people, giving extra-ordinary care, supporting people to live in an environment that was inspiring and uplifting and the difference this made to peoples holistic well-being.