

Dove House Residential Home Limited

Dove House Residential Home

Inspection report

Dovehouse Green, Ashbourne,
Derbyshire. DE6 1FF

Tel: 01335 346079
Website: www.dovehouser Residential.co.uk

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Ratings

Overall rating for this service

Good 

Is the service safe?

Requires improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

This inspection took place on 10 September 2015 and was unannounced.

There was a registered manager in place at Dove House Residential Home at the time of our inspection. 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.

The service is registered to provide residential care for up to 16 older people.

Summary of findings

The registered manager confirmed improvements would be made to some procedures designed to help ensure protection from and control of infections. Cleaning schedules were followed to ensure all aspects of the home were kept clean.

The registered manager confirmed improvements would be made to ensure staff followed procedures designed to protect people from the risks associated with the management of medicines. We saw other aspects of medicines administration that followed guidelines for the safe handling and management of medicines.

People told us they felt safe and staff had been trained in, and understood how to protect people, should they be at risk of abuse. People and staff were also aware of risks to people and knew what actions to take to reduce these risks. Plans were in place, and staffs' competency in managing emergency situations, such as a fire, were regularly checked.

There were sufficient numbers of staff available to care for people's healthcare needs and support people with their interests and hobbies while living at the service.

Staff had the skills and knowledge to meet people's needs and their skills were kept up to date and current through ongoing and regular training. The registered manager had a good understanding of the Mental

Capacity Act 2005 and how people consented to their care and treatment. People told us they enjoyed the food and people's dietary requirements were catered for and they had access to other health care services as required.

People experienced care and support from staff who enjoyed spending time with them, and who understood them and showed kindness and affection. Staff understood and incorporated the principles of dignity and respect into their work and supported people's independence. People's views on their care and support were listened to.

People received personalised care that was responsive to their needs. People were supported to find, and pursue interests and hobbies that were enriching and enjoyable. People's achievements, experiences, memories and relationships were valued and celebrated. The service routinely invited people's views into how the service was developing. People we spoke with told us they had been able to contribute ideas to the development of the service.

The registered manager understood their responsibilities, demonstrated an open and approachable management style and was well supported by their staff team. The manager had clear aims and values for the service and promoted a positive, person centred care culture. The service had systems and processes in place to check on the quality and safety of services provided to people using the service.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not consistently safe.

Improvements were needed, and being undertaken by the registered manager, to help ensure people were protected from the risk of cross-infections and medicines. People felt safe and arrangements were in place to ensure staff working at the service were suitable to do so. There were sufficient staff to ensure people received the care and support they required.

Requires improvement



Is the service effective?

The service was effective.

People had access to sufficient food and drink of their choice. Staff had the skills and knowledge to meet people's needs and people had access to other health care professionals when required. The manager had a good understanding of the Mental Capacity Act 2005.

Good



Is the service caring?

The service was caring

People were supported by kind and caring staff who had the time to develop positive relationships with them. Staff understood and implemented the principles of dignity and respect in their work. People were at the centre of their care and support.

Good



Is the service responsive?

The service was responsive

People were involved in hobbies and interests that they were interested in and their achievements were celebrated. People's life experiences, memories and relationships were valued and supported. The management team routinely listened to people's feedback to improve the quality of services they received.

Good



Is the service well-led?

The service was well led

The registered manager understood their responsibilities. The management team demonstrated open and supportive leadership and staff were motivated and confident in their roles. The management team used a variety of systems to check on the quality and safety of services people received.

Good



Dove House Residential 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 was unannounced and took place on 10 September 2015. The inspection team included an inspector and an expert by experience, with experience of caring for an older person. 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 our inspection we reviewed relevant information, including notifications sent to us by the provider. Notifications are changes, events or incidents that providers must tell us about. We also spoke with representatives from the local authority.

We spoke with six people who used the service and four health care professionals involved with people who used the service. We spoke with ten members of staff, including the registered manager, deputy manager and director. We looked at three people's care plans and we reviewed other records relating to the care people received and how the home was managed. This included some of the provider's checks of the quality and safety of people's care, staff training and recruitment records.

Is the service safe?

Our findings

Some procedures designed to help ensure protection from and control of infections were not always followed. During our inspection we found gloves and aprons used by staff for either cleaning duties or personal care had been disposed of into open topped waste bins, along with used continence products. In addition, we found a single used glove had been left on the side of the bath. Staff we spoke with told us they would put used gloves, aprons and continence products into a bag, before placing into the waste bins, however this did not happen consistently during our visit. We spoke to the registered manager about our findings and they took action to remind staff about the correct disposal of gloves, aprons and continence products and confirmed they would introduce an audit to monitor this. Staff we spoke with confirmed the registered manager had spoken with them about the correct procedure to follow.

Staff told us, and we saw, that one manual sluice was situated in the laundry area. During our inspection this area was being used to dry clean laundry. Best practice guidelines recommend that manual sluice facilities should not be situated in laundry room to reduce the risk of any airborne contamination. However, staff understood these risks and told us the sluice was not often used to wash down soiled laundry. They were aware of the need to move any clean laundry into another room before using the sluice facility which reduced the risk of cross-contamination. Staff told us that eye protection was not provided for when they used the sluice. We brought this to the deputy manager's attention who confirmed eye protection was available and they would make sure staff were aware to use it.

We saw that recent feedback from people using the service and their families had stated that they were very satisfied with the levels of cleanliness at Dove House. We saw people's bedrooms were clean and we saw staff changed any bedding when required. During our inspection we spoke with staff who were responsible for cleaning. Staff were clear on their role and what things needed cleaning on a daily basis and other weekly duties, such as deep cleaning certain rooms. Staff were clear on where cleaning

materials should be stored and on the day of our inspection we found these were stored securely. Cleaning schedules were followed to maintain a clean environment for people using the service.

Some procedures designed to help ensure the safe management of people's medicines were not always followed. These included handwritten medicines administration record (MAR) charts without a second staff signature to ensure details were correct with the prescription issued. We also found MAR charts had not always been completed correctly to record that people had been offered their medicines. When we observed staff administering medicines, we found the MAR chart was signed before the medicine was administered which is not in line with best practice for administering medicines. This practice would make it difficult to then record if the person had declined to take their medicine at that time. Other aspects of medicines administration did follow safe practices and these included ensuring the medicines trolley was kept secure and locked when staff were not with it. Staff administering medicines also stayed with each person to ensure they had taken their medicines. We also heard that staff checked whether people felt well or whether they required any further pain relieving medication. We spoke to the registered manager about our findings and they confirmed they would complete an audit of MAR charts and remind staff to follow the correct procedures. After our inspection, the deputy manager confirmed these actions to improve medicines management had been completed.

People told us they felt safe living at Dove House Residential Home and a recent questionnaire showed that families felt their relatives were cared for safely. We saw that staff had received training in how to identify and report any concerns for people's well-being and safety under local safeguarding procedures. When we spoke with staff they told us they would be confident to raise any concerns should they need to. This meant the provider had taken steps to protect people's safety while they used the service.

Some people we spoke with understood when they may be at risk and what to do to reduce those risks. One person told us they used a call bell by their bed to obtain the help of staff in the night time should they require it. They told us staff came quickly to help and this helped to reduce any risks to the person getting out of bed without staff assistance. When we spoke with staff they were able to tell

Is the service safe?

us what actions they took to mitigate risks to people. These included knowing which people required diabetic foods and which people required help mobilising. Risk assessments were in place and identified actions that could reduce risks to people. For example, what equipment had been assessed as safe to help people mobilise. Staff were aware of and followed these risk assessments which helped to mitigate risks to people to keep them safe.

Staff told us they felt confident to manage an emergency situation at the service, such as a fire. Managers told us that staffs' competence in managing such an event was checked on a regular basis through the use of fire drills. Staff told us they reported any accident or incident to managers and we saw that they had completed relevant

records regarding any accidents and incidents. Managers analysed these reports and identified any further actions that could prevent repeat incidents. This meant that risks to people were reviewed to help prevent future incidents.

People told us enough staff were available to help them when needed. During our inspection we observed staff had time to sit and talk with people as well as responding quickly when people needed assistance. The registered manager planned staffing based on the needs of the people using the service. We saw the registered manager had consistently provided additional staff to ensure staff could spend quality time with people using the service. The registered manager also employed housekeeping staff, a cook, and activity coordinators. These arrangements meant that people using the service were supported by sufficient members of staff.

Is the service effective?

Our findings

Staff had received appropriate training and support to enable them to meet individual's needs. During our inspection some people using the service required assistance to mobilise safely. We observed staff assisting people and we saw they had the knowledge and skills required to provide effective support and care. Staff also showed an awareness of how to help orientate people, some of whom may have had dementia, as to the time of year. Staff did this by engaging people in seasonal activities and talking about frost in the mornings. One member of staff told us they had received training from district nurses on managing people's diabetes and they had found this training useful. Following our inspection, the provider sent us additional evidence of their contribution to a preventative educational programme for a specific health condition. Staff demonstrated the skills and knowledge required to provide effective care to people, based on best practice from other specialist professionals.

We saw that staff received training in aspects of care relevant to people's needs. This covered, amongst other areas, food hygiene, first aid, health and safety, and control of substances hazardous to health (COSHH). Staff were confident to talk to us about their training and told us that it was kept up to date. Records we saw confirmed this. Staff we spoke with told us they felt supported by the registered manager and deputy manager. They told us that in addition to their yearly appraisal, they could have a meeting, whenever they needed, with any member of the management team for support and guidance if required. Staff skills were kept up to date through regular, ongoing training and access to support from the management team.

People were asked for their consent to care and treatment. When one person felt unwell, staff asked, "Is it ok if we get the GP to see you?" Care plans recorded where people had signed their consent to receive a vaccination against

influenza. Staff we spoke with had received, or were due to receive, training on the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS) and most staff told us they understood the principles of this legislation. This legislation ensures people who lack capacity and require assistance to make certain decisions receive appropriate support and are not subject to unauthorised restrictions in how they live their lives. We spoke with the registered manager regarding the MCA and DoLS. They had a good understanding of the DoLS process and recognised when restrictions on people required lawful authorisation.

People we spoke with all told us they enjoyed the food and that they had plenty to eat and drink throughout the day. One person told us they had just had, "A lovely cup of hot tea." People told us they could choose where to have their meals, with some people preferring breakfast in their bedrooms. People we spoke with told us there was one main choice for lunch, however we saw that where people had requested different choices these had been provided. We saw people requesting a range of different puddings during our inspection and all of these were provided. We spoke with the chef and they understood which people required diabetic foods and showed us a selection of foods in stock and suitable for the people who required a diabetic diet. People received sufficient amounts of food and drink that met their needs.

During our inspection people received care and treatment from other health care professionals when they felt unwell. We spoke with a number of healthcare professionals who had experience of supporting the care and treatment of people living at Dove House Residential Home. They reported that their involvement had always been requested in response to any concerns identified in people's well-being. We saw from people's care plans that they had access to a range of other professionals involved in their healthcare, including opticians and dieticians. This meant people received appropriate care and support for their health and care needs.

Is the service caring?

Our findings

All the people we spoke with told us the staff working at Dove House Residential Home were very caring. One person told us, "They are all very good." Another person said, "Very nice staff." One person told us they did not like to use the lift on their own. They told us a member of staff would always accompany them so they would feel reassured. Staff supported people in ways that showed kindness and understanding.

People told us they enjoyed chatting with staff working at the service. Staff we spoke with told us they enjoyed spending time and talking with people. One member of staff told us, "The residents are all so nice, they enjoy us and appreciate us." Another member of staff said, "It's amazing here, we're like family." One member of staff told us, "We've got time for people here, people here want to sit and talk and we can do that." Throughout our inspection we observed staff talking with people, respectfully and with affection.

Throughout the day of our inspection, people were asked by staff if they were happy and were enjoying what they were doing. People had choice and independence in how

they spent their time and we saw that staff respected people's different choices. We saw one person working independently to help staff prepare for dinner and staff positively acknowledged and supported their contribution. Staff we spoke with were aware of people's views regarding their care and support and told us people were involved in discussions if any changes were planned. Records showed people had been involved in monthly reviews of their care with staff and had the opportunity to contribute their views on their care and treatment. People using the service had their views listened to and respected.

People had responded to a recent questionnaire to say they were 'very satisfied' with the attitude of staff at the service. Families had also responded to a questionnaire saying they were always satisfied that their relative was treated with dignity and respect. Staff told us how they would always ensure they knocked on people's doors and ensured people had towels to cover them during any personal care. The registered manager told us she was very clear when staff started working at the service that they were working in people's own home. People were cared for by staff who were respectful and who promoted their dignity and independence.

Is the service responsive?

Our findings

People told us they were regularly consulted on what interests they would like to pursue and that this was reviewed with them on an ongoing basis. During the day we saw responsive and creative interactions between people and staff that resulted in enjoyment, interest and lively discussion. For example, people were talking about places that were special to them. The member of staff talking with them used a tablet to share photos of that special place from the time period the person remembered. We also saw the results of a person's 'time lapse' photography project. The person had taken a sequence of photographs of a table being set for dinner and when played back, the table seemed to be set and cleared again, as if by magic. Other people could choose to spend time alone as they wished, and during the day people had access to their preferred newspaper or magazines. One person told us, "I like reading [this magazine]." People were supported to engage in interests and hobbies that were of interest to them.

During our inspection we found staff took opportunities to introduce ideas for creativity into people's day to day routines. One person usually enjoyed a morning walk with staff in the garden. During this, staff had asked them if they would like to collect some autumn leaves that had fallen as they could be used by people later on for art. Later on in the day we saw these were being used to create art work by people. People's art was displayed around the home and included mosaics and pictures. Books had also been collated of people's favourite poetry. A poetry club met once a month for recitals of people's favourite poetry. People's interests and hobbies were celebrated.

One person we spoke with told us staff had, "Stepped in," when their family member had been unable to take them out. Staff had taken them out instead so they would not miss out. Staff told us about another person who they regularly supported to stay involved with the local community and attend local events. Other professionals we spoke with told us they noticed staff were responsive to people's moods and made the time to sit and chat with people. They felt this was a valuable aspect of providing individual care that resulted in reduced anxiety for people using the service. During our inspection we observed staff

engaged with people flexibly and in response to their different preferences. Staff provided responsive care that was individual to each person. This promoted improvements to people's well-being and life experiences.

People told us they had formed friendships living at Dove House Residential Home. One person told us they referred to their friends as, "A nice little gang." People had been supported to create 'memory books' and those people who were happy to share them had them on display. These contained photographs of some of their favourite places and memories. We saw one person creating their own memory book with a member of staff. They were looking at photos together and choosing which ones to stick in the book. We could hear that the person enjoyed recalling their memories to the member of staff supporting them. Other memory books had been created with people and were available for them to look through. These included books on the royal family and the birth of the new prince and princess. Following the inspection the provider sent us additional evidence to show how relationships were supported between the local students in the community and people using the service. They also provided an additional example of a person supported to maintain their relationships with their relative by use of technology. People's life experiences, memories and relationships were valued and maintained.

Staff with responsibility for supporting people to follow their interests and hobbies noticed those people who declined the opportunities for interests and hobbies currently available. This was then reviewed to ensure the opportunities available matched with people's preferences and expressed wishes. As a result, new opportunities were explored and considered with people. Staff told us that other areas for improvement were identified by the management team and addressed with them at staff meetings to ensure improvements were made. Staff gave an example of how record keeping had recently been identified for improvement. Following the inspection the provider sent us additional information to show how people were involved in regular reviews of their care plans. The management team were proactive in identifying with people where the quality of service may not be meeting their needs and taking action to respond.

People, families, staff and other professionals were asked for their views on the service and on any future planned developments. During our visit, preparations were under

Is the service responsive?

way for a meeting that evening with people and families to discuss a proposal to make some changes to the building. Staff we spoke with told us they had been able to contribute their ideas and raise some concerns. They told us these had been acknowledged and their concerns had been addressed. Other professionals we spoke with told us they had been asked their views on their recent visits. We saw feedback had been collated from people using the service and their families on aspects of care and support provided at Dove House Residential Home. This had been analysed by the management team. Feedback to the questions asked had been mostly positive. People were given the opportunity to contribute their ideas to improve services at Dove House Residential Home.

People we spoke with told us they would know who to talk with should they have a concern or complaint and information was displayed throughout the service on how to do so. We saw that relatives had replied to a questionnaire to say they were satisfied that their thoughts, concerns or complaints were responded to in good time. Where concerns had been raised, we could see these had been acknowledged and responded to. The registered manager also collated compliments received at the service and shared these with staff. Procedures were in place and followed, to ensure any concerns were dealt with.

Is the service well-led?

Our findings

Dove House Residential Home is required to have a registered manager and this requirement was being met. The registered manager understood their responsibilities and had sent appropriate written notifications when required to tell us about any changes, events or incidents at the service. The registered manager was supported by a deputy and clear management structures were in place. Staff working at the service were clear on their own, as well as other people's roles and responsibilities.

People using the service knew the registered manager and director well. People we spoke with told us the registered manager and director, along with all the staff team, were very approachable. We observed people were happy and relaxed to talk with all of the staff team, including both the registered manager and the director throughout the day of our inspection. Staff we spoke with told us they felt the management and leadership at the service was open and fair. One member of staff told us, "[The registered manager] is open to any suggestions," and, "Any query I have I can go to [the registered manager] with full confidence." During our inspection, any issues we brought to the registered manager's attention were acknowledged and actions put in place to address them. People experienced the service being managed by people who were open and approachable.

Staff we spoke with were motivated in their job role and told us they enjoyed working at the service. Their comments included, "I love it here," and "I do enjoy working here very much." Staff who had specific responsibilities, for example housekeeping and laundry, were able to clearly tell us about the systems in place. This meant staff were motivated, understood their role and were accountable for their responsibilities.

Resources were planned and made available to secure the maintenance and development of the service. This had included repairs and improvements to the building as well as ongoing resources required to support people's interests and hobbies. We saw that a development plan was in place to manage, in a coordinated and efficient way, future changes and improvements to the building. These included changing the building so people could enjoy improved views and access to the garden. Staff told us equipment was well maintained and replaced when needed. One member of staff told us a new bath chair had been purchased as the one currently in use required changing. During our inspection the regular maintenance person was completing improvements to a person's bedroom. The service was being managed and developed in a way that aimed to improve people's experience of living at the service.

During our inspection we reviewed various records and processes used to manage and analyse information. Staff were able at all times to retrieve the information we requested and understood what different records were maintained and for what reason. The service demonstrated an organised approach to managing records for both people's care and for the running of the business.

Regular checks were completed on the safety and quality of the service. We saw furniture was checked to ensure it remained secured to walls, and that systems, such as the emergency lighting were regularly tested to ensure they were in good working order. Other audits were completed, including records of people's care and treatment to ensure they were being maintained to a sufficient standard. The service completed a variety of regular checks to ensure the service was safe and delivered in a way to meet the standard of quality required by the registered manager and director.