

Cumbria Emmaus Trust

Emmaus House Residential Care Home

Inspection report

Walkmill Close
Moresby Parks
Whitehaven
Cumbria
CA28 8XR

Date of inspection visit:
17 February 2020

Date of publication:
11 March 2020

Tel: 01946591362

Website: www.emmaustrust.co.uk

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

Emmaus House Residential Care Home (Emmaus House), provides accommodation and personal care for 26 older people, some who are living with dementia and/or have a physical disability. The home is purpose built providing single ensuite bedrooms over two floors. It is run by Cumbria Emmaus Trust, a registered charity formed to provide residential care for older people primarily of the Christian faith. People of other denominations and those with no faith also live in the home.

People's experience of using this service and what we found

People were safe and protected from abuse and avoidable harm. Risk assessments helped protect the health and welfare of people in the home. People received their medicines when they needed them from staff who were trained and had their competency regularly checked. The home ensured good staffing levels to meet people's needs. Infection control was well managed and the home was clean and free from hazards.

Staff supported people with their healthcare needs and worked well with external healthcare professionals. People were well cared for by staff who had the right skills, knowledge and training to meet their needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were treated with kindness and compassion by staff who respected their privacy and dignity. Staff gave people their time and understood this was important in supporting people's well-being. We received positive feedback from people in the home and their relatives about the caring approach of staff. One relative told us, "I couldn't believe how good this place is, it must be the best kept secret in Cumbria. The staff are really wonderful and they have never looked so well since coming in here. Nothing is ever done without consultation. It really is my relatives home."

The service put people at the centre of the care they received. People's changing needs were identified and responded to quickly. The service provided compassionate end of life care and took into consideration the needs of their relatives and friends. Links with local community groups were well developed and enhanced people's lives. There was a wide range of organised activities and entertainments for people to choose from.

The home was well-led by the registered manager, with support and oversight from Emmaus Trust Board. Together they carried out safety and quality checks of the home. Staff felt valued and enjoyed working at the home. People's views about the quality of care were being used to make improvements. Everyone we spoke with told us they would recommend the home.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 10 August 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Emmaus House Residential Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an Expert 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.

Service and service type

Emmaus House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with CQC. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed information we had received about the service since the last inspection. We asked the local authority and health

professionals visiting the home for their feedback. We used all of this information to plan our inspection.

During the inspection

We spoke with twelve people who used the service and five relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager. The Emmaus Trust chairman was also present and spoken to. We looked around the home to check it was clean and a safe place for people to live. We observed a medicines round being administered and a lunch time meal service.

We reviewed a range of records. This included five people's electronic care and medication records. We looked at four staff files in relation to recruitment and staff training. We also looked at a range of records relating to the management of the service, including how the registered manager and provider monitored the quality and safety of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The provider had systems to record, report and analyse any allegations of abuse. Staff had received training to recognise abuse and knew what action to take to keep people safe, including reporting any allegations to external agencies.
- People told us they felt safe. One person said, "I feel very safe here." A relative told us, "We have full confidence in the staff team. My [relative] is in the best possible place and is in safe hands."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff managed risks to people's safety. This included assessments of specific risks, such as the risk of falls and risks to skin integrity. Staff were provided with clear guidance on how to manage the risks in a safe and consistent manner, and in line with current best practice.
- The environment and equipment were well-maintained and safe. The provider had carried out environmental risk assessments in areas such as fire safety, the use of equipment and the security of the building.
- The registered manager promoted an open and transparent culture in relation to accidents, incidents and near misses. Where they identified any areas of concern these were shared with the staff team to ensure lessons were learnt to improve the service.

Staffing and recruitment

- People received effective and timely care and support. People told us there were always enough staff on duty. One person told us, "Staff are vigilant and make sure I have my buzzer to hand. I never have to wait." A relative told us, "There's always plenty of staff around when I visit." The provider made sure extra staff were available at busy times of the day or when people needed extra support, such as when giving end of life care.
- The registered manager followed safe staff recruitment practices and kept all the records, as required by law.

Using medicines safely

- The registered manager and staff followed effective processes to ensure people's medicines were managed safely. An electronic medicines system had been introduced to further ensure safety and timeliness of people receiving their medicines. Staff were suitably trained to administer medicines and checks on their practice had been carried out. Staff were knowledgeable about the side effects of medicines and were proactive in contacting the GP if they had any concerns.

Preventing and controlling infection

- People were protected against the risk of infection. Staff received training in infection prevention and control and followed good practice in their work. The home had achieved a five star rating from the national food hygiene standard rating scheme. This is the highest rating and meant the hygiene standards were very good.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People received effective and appropriate care which met their needs and protected their rights. The registered manager carried out assessments of people's needs before they came to live at the home, to ensure they could be looked after properly. Assessments from health and social care professionals were also used to plan effective care.
- The management and staff team applied their learning in line with expert professional guidance such as the management of nutrition, oral health and skin integrity. Staff knew people's individual needs and preferences very well. This supported a good quality of life for people.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and had completed training which gave them the skills they needed to carry out their role effectively. Staff were clear on their roles and responsibilities. This was supported by senior staff who gave clear direction and set high expectation on the standards required.
- People gave us positive feedback about how staff supported them. One person told us, "I've been very impressed with the staff. They get plenty of training and this comes across in how professional they are."

Supporting people to eat and drink enough to maintain a balanced diet

- Staff supported people to receive a balanced diet and to have sufficient fluids to maintain their health. They assessed people's nutritional needs and sought professional guidance where people were at risk of malnutrition or had difficulties with swallowing. Relatives reported people had healthy weight gains since being in the home.
- People were extremely satisfied with the quality of homemade food and the range of choice. One person told us, "The food is marvellous. You get so much choice and its made fresh. You couldn't ask for better."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked well with healthcare professionals to ensure people's healthcare needs were met effectively and consistently. Staff incorporated professional guidance into people's care plans. Healthcare professionals told us staff reported changes and requested input "promptly" and were "competent and knowledgeable about each person."
- A number of relatives told us of the progress their relative had made since being at the home. One told us, "The staff include us as part of the team with health services to get the best possible outcome for people. Nothings done without consultation."

Adapting service, design, decoration to meet people's needs

- The service was adapted to be safe, accessible, comfortable and homely. The provider ensured the premises were well maintained. There was a passenger lift and each floor had adapted bathrooms. The garden was accessible and well used. People were consulted about improvements, for example, about how the home was decorated, and we saw people had been supported to personalise their bedrooms.

Ensuring consent to care and treatment in line with law and guidance

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's rights were protected. Staff had received training in MCA. Where a person was found to lack capacity to make a decision the best interest decision-making processes were followed. This included involving relevant family, representatives and professionals in the process.
- The registered manager completed DoLS applications when required and kept a record of those awaiting authorisation. DoLS conditions were being adhered to and included in how care was planned and delivered.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and supported them to maintain their dignity. People were very complimentary about the care and support they received. One person said, "The staff are brilliant you couldn't ask for better, they always take time for a chat." A relative of a person living with dementia told us staff always supported their relative to be well dressed and presented which helped to promote their self-esteem.
- Staff supported people to maintain their independence. The staff team were knowledgeable about accessing services so people could have equipment and adaptations to keep them safe whilst promoting their independence. One relative told us, "[Relative] is fiercely independent and staff do their utmost to support [relative] safely whilst respecting their need to move around the home independently."

Ensuring people are well treated and supported; respecting equality and diversity

- People told us they were treated in a very kind and caring manner by staff all levels, including the management team and chairman. A number of staff had worked in the home with the same people for several years and this had led to strong and meaningful relationships. Staff gave people their time and understood the importance of this in supporting people's well-being. One person told us, "It's grand here, I'm as happy as could be." A relative said that living in the home had been the happiest period of their relative's life. Another relative told us, "The home has a very calm, peaceful and happy atmosphere. Staff are really efficient but there's no rushing or raised voices, except when people are laughing, and there's a lot of that!"
- Staff supported people's religious, spiritual and cultural needs. The provider website states 'The home was set up to provide care to primarily older Christians. The emphasis is placed on high quality individual care and attention to each resident, in a loving Christian environment.' While the majority of people in the home were Christians, people of other denominations and those with no faith also lived in the home. Their individual support needs and views were respected.

Supporting people to express their views and be involved in making decisions about their care

- People were supported to make decisions and were able to express their views. People and relatives were asked for their views in satisfaction surveys, in residents meetings and at review meetings. The results of the survey were used to make changes. One relative told us, "Nothing is done without consultation. We feel part of the team. The manager's door is always open to us and we often pop in to discuss a variety of matters."
- People were treated very much as individuals and made their own choices about how they wanted to spend their time. Those people who chose to spend time in their own rooms were regularly checked by staff

and their had their wishes respected.

Is the service responsive?

Our findings

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care and support was centred around their choices and preferences. The registered manager and staff understood people's needs well and recognised the importance of appropriately supporting people on an individual basis. They understood the importance of promoting equality and diversity and respecting individual differences.
- People's care plans described their health, care and support needs and included their preferences, routines and social needs. Daily records were written in a meaningful way, with any changes being recorded so action could be taken, such as seeking a referral to a GP. Health professionals were complimentary about the responsiveness of the staff team and being able to discuss people's needs in depth.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The staff knew how people communicated and gave people the support they needed to understand important information. People's communication needs and preferences were recorded in their care plans to guide the staff on how to support them. We observed staff taking time to communicate effectively with people and repeating information when necessary.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were able to maintain relationships that were important to them. They told us their friends and relatives could visit them as they wished and said there were no restrictions on when they could see their visitors. Pastoral care was provided through a variety of individuals and groups from different Christian denominations.
- People were provided with and supported to participate in activities to help maintain their social health and well-being. Staff supported people with individual and group activities such as visiting entertainers, arts and crafts and trips out to local attractions. People told us they enjoyed the activities. One person told us, "There's lots to do here, if you want it. We are going out to indoor bowling later and then for a meal."

Improving care quality in response to complaints or concerns

- The provider had a procedure for receiving and responding to complaints about the service. People told us they had no complaints or concerns. However, they would feel confident talking to the registered manager, senior staff or the board's chairman if they had a concern or wished to raise a complaint. The registered manager told us in future informal complaints and actions would also be recorded to assist in improving the service offered to people.

End of life care and support

- Staff gave people the support they needed to remain in the home, if this was their wish, as they reached the end of their lives. Staff had been trained in how to support people who were reaching the end of their lives. The home worked with local healthcare services to ensure people were able to remain comfortable and pain free at the end of their lives. We saw a number of relative's thank you cards commenting on the high standard of end of life care for their relative.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The home was well-led. People, relatives and staff all spoke highly of the registered manager and how well the home was managed. Staff and people knew the chairman of the trustee board well and said he visited frequently and took an interest in their well-being.
- All staff had a clear understanding of their job roles and how to provide high-quality care through well-organised team work. The deputy manager played a key role in supporting the registered manager with monitoring the quality of the service. Senior staff were good at organising and deploying care staff. Board members also carried out internal audits and visits to seek people's views on the running of the service. We saw action had been taken where inconsistencies were identified.
- The registered manager kept abreast of latest good practice and research. People had recently benefitted from the introduction of digital medicines administration system and an alert system for people who needed to take time specific medicines at set times for example, Parkinson's medicines.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and staff team demonstrated a commitment to providing person-centred care and to ensure people received good quality care. People's wishes were respected, and care was arranged around people's preferences and requirements.
- People told us this was a good home and they were well cared for and happy living here. Everyone we spoke with told us they would recommend the home. One person told us, "I cannot fault the place. I feel the very caring nature of the home comes right from the top and filters through to every level of staff. It's very well managed."
- Staff told us they felt valued and listened to and the management team gave them support to do their jobs well. Staff were described by external trainers as being, "Passionate about their role and making a difference." One staff member said, "There's a very supportive atmosphere and we're always encouraged to talk any issues through. Team work is really good, we all know each other and the residents so well."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The management team were aware of their responsibilities regarding duty of candour. They promoted and encouraged candour through openness. Good relationships had been developed between staff and

people using the service and their family members.

- The service engaged with people, others acting on their behalf and staff in an inclusive way. The registered manager held meetings with people in the home, relatives and the staff to gather their views and to take action. A with a variety of topics were covered, such as food provision, activities and changes to the building and decoration.

Working in partnership with others

- The registered manager worked in partnership with other agencies, including the local commissioners who conducted their own reviews of the service. The registered manager attended local forums and had developed links with training networks to keep up to date and to help improve the service.