

Runwood Homes Limited

Woodbury Court

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

The inspection took place on the 2 and 3 May 2018 and was unannounced.

The inspection took place in response to a concern raised regarding the quality of care people receive when they need medical intervention. No risks, concerns or significant improvement were identified in the remaining Key Questions through our on-going monitoring or during our inspection activity so we did not inspect them. The ratings from the previous comprehensive inspection for these Key Questions were included in calculating the overall rating in this inspection and the service continues to be rated Outstanding overall.

Woodbury Court is owned by Runwood Homes Ltd. The service provides care and accommodation for up to 94 people who may need assistance with personal care and may have care needs associated with living with dementia. The building is a purpose-built care home designed around the needs of the older person and in particular those people living with dementia or cognitive impairment and physical impairments. There is a passenger lift and secured staircases to all levels, which mean all parts of the home, are accessible for people with impaired mobility. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a registered manager. 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 had continued to provide care that was outstanding and had made further improvement within the service that had a positive impact on people's lives. Staff cared for people in a kind and compassionate way; and people, relatives and other healthcare professionals remained complimentary of the service.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. People's needs were met by sufficient numbers of staff. People were cared for by staff recruited and employed after appropriate checks had been completed. Medication practices were safe and dispensed by staff who had received training to do so. There were systems in place to minimise the risk of infection.

The registered manager ensured lessons were learnt from any accidents or incidents and had processes in place to review these with staff to mitigate future risks. In addition, the registered manager and provider shared findings with people, family and other stakeholders in line with their duty of candour responsibilities.

The registered manager, deputy manager and nursing team, remained passionate in upholding the values of the service to provide outstanding care to people. They continually looked at innovative ways of improving the service and experience for people living at the service.

The registered manager was supportive to staff and helped in their development and training needs, to ensure people were supported by staff with the skills required to perform their role. In addition, the registered manager worked collaboratively with other healthcare providers and the local authority to develop the service provided for people.

The registered manager had a number of ways of gathering people's opinions and people were actively encouraged to voice their views. They held regular meetings with people and used questionnaires to gain feedback. The registered manager carried out quality monitoring checks to help ensure the service was running effectively and to make continual improvements.

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 remains Good

Good ●

Is the service well-led?

The service remains exceptionally well led.

Outstanding ☆

Woodbury 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 the 2 and 3 May 2018 and was unannounced. The inspection team consisted of two inspectors and an expert by experience on the first day.

We undertook this inspection to check the service remained safe and well-led for people living there.

Before the inspection we reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service has to let the CQC know about by law. We also reviewed safeguarding alerts and information received from the local authority.

During the inspection we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

During our inspection we spoke with 14 people, six relatives, the registered manager, deputy manager, regional manager, chef and nine care staff. In addition, we spoke with three visiting healthcare professionals. We reviewed eight care files, four staff recruitment files and their support records, audits and policies held at the service. We also looked at medication procedures, safeguarding concerns, complaints and compliments, and questionnaires received.

Is the service safe?

Our findings

Throughout the inspection people were complimentary of the service. People told us they felt well cared for and safe. One person told us, "It is great here, my choice what I do; I could have a shower every day if I wanted, they do help me, staff are brilliant." Another person said, "I have been here for six years and I love it, staff are marvellous, all so kind, I am so happy here." A relative told us, "It is quite good here, staff are very genuine, they definitely make me feel welcome."

Staff knew how to keep people safe and protect them from safeguarding concerns. One person told us, "I definitely feel safe; staff are so good, only say something and they put it right." Staff were trained and able to identify how people may be at risk of harm or abuse and what they could do to protect them. Staff were aware of the service's safeguarding and 'whistle-blowing' policies. One member of staff said, "If I had any concerns I would report it to the manager or deputy, or I could go to the regional manager. If I needed to report it outside I would go to the council or CQC." The registered manager worked with the local authority to fully investigate any concerns and protect people.

The registered manager ensured lessons were learnt from any accidents or incidents and had processes in place to review these with staff. The registered manager fully investigated adverse events and completed an in-depth root cause analysis. Learning from the analysis would be shared with staff and learning points or changes needed to staff practice implemented. One example was that staff had been given updated guidance and instruction of seeking medical guidance when a person's physical condition changes. The registered manager kept clear records about actions taken and worked transparently with other organisations such as the local authority.

The registered manager also looked for themes of accidents and had completed an analysis of falls information at the home. As a consequence, they had presented this information to the registered provider who agreed to fund extra staff at night. As part of the analysis the registered manager displays the PROSPER 24 hour falls clock. This is a colourful and visual reminder to staff to show what times falls are most likely to occur and where. Each month the data from the prosper falls clock is discussed in handover meetings with staff to improve their awareness of 'at risk' times and to demonstrate to them where the higher support needs are. A relative told us, "[relative] rolled out of bed a couple of times, they notified us and put an alarm mat down, that was a couple of months ago and they put their bed down lower." This showed staff responded to mitigate people's risks. The deputy manager is a champion for PROSPER and they have implemented initiatives from the PROSPER training such as, checking people's footwear fits properly and if people use walking aids, these are fit for purpose and well maintained.

Staff had the information they needed to support people safely. Staff undertook risk assessments to keep people safe. The assessments covered preventing falls, moving and handling, nutrition and weight assessments, use of bedrails and prevention of pressure sores. The assessments were detailed and person centred providing all the information staff needed to support people safely. One person said, "I have a rail up on that side of my bed, I have a cover on it so I don't fall out of bed." Assessments detailed for example, how to position a person when supporting them with eating to prevent choking or how to reposition people

when in bed to relieve pressure areas. Where assessments identified certain equipment should be used such as pressure relieving mattresses or sensor mats we saw these were being used. A relative told us, "[relative name] had a couple of sore points, they reposition them and that reassures me. They cleared them up and now on their ankles they wear boots."

People were cared for in a safe environment. Infection control was closely monitored and processes were in place for staff to follow to ensure people were protected from infections. A relative told us, "Lovely home, always smells nice, staff are very friendly." Another relative told us that when they had been unable to visit their relative recently due to an infection outbreak at the service, staff had given them regular updates on their relative's well-being. The registered manager employed maintenance staff for the day to day up keep of the service. For more specialised work the registered manager employed the appropriate contractors. There was regular maintenance of equipment used and certificates were held, for example for electrical and water testing. There was a fire plan in place and each person had a fire evacuation plan completed. Regular fire evacuation drills were completed by the maintenance staff and registered manager and they reviewed staff response and actions during drills for any improvements needed. During the general daily checks staff checked equipment was working and to ensure the environment was safe for people. A relative told us, "The pump on the bed was beeping and one of the staff came in and told me they had reported it and it was resolved; she got it sorted that was reassuring."

There were sufficient staff to meet people's needs. We were frequently told by people and staff there were enough staff to meet people's needs. One person told us, "You pull the cord, the light comes on and they are practically there, you never wait long." The registered manager told us they currently used agency staff but they were actively recruiting to fill vacancies at the service. Staff told us they felt there was enough of them working each shift and that they could meet people's needs. Staffing numbers were calculated using a dependency tool and these were frequently reviewed to ensure there were enough staff each shift. The deputy manager told us, "We always book over our numbers for staff each day to cover any shortfalls or sickness." People told us staff were always available, one person said, "Even in the snow all the staff turned up and I told (registered manager name) they should be rewarded for coming in when we had all that snow. I would not want to be anywhere else." A relative told us, "Excellent staff, all the ones I interact with display genuine interest in [relative name] and care about those they look after."

The registered manager had an effective recruitment process in place, including dealing with applications and conducting employment interviews. Relevant checks were carried out before a new member of staff started working at the service. These included obtaining references, ensuring the applicant provided proof of their identity and undertaking a criminal record check with the Disclosure and Barring Service (DBS). We saw that as part of the interview process people living at the service had the opportunity to sit in on interviews and ask questions.

Medicines were managed and administered safely. People told us they got their medicine on time and when they needed it. One person said, "I asked for paracetamol and I did get it. I have a sore on my bottom and they put cream on it." Only trained and competent staff administered medication which was stored safely in accordance with the manufactures guidance. We saw that medication charts were clear containing all the information needed to support people with their medication safely and in a person-centred way. We also noted very good additional care plans were in place for medication to support people with diabetes and time specific medication. Regular audits of medication were completed and policies and procedures were up to date.

Is the service well-led?

Our findings

The provider and registered manager had been able to sustain and further develop their approach to providing quality care since our last inspection. The registered manager and deputy manager had developed an excellent rapport with both people and staff. They both demonstrated an in-depth knowledge of those who used the service and their support needs. Throughout the inspection it was apparent how passionate they were about the service and the importance they placed on people living there having a good experience. The senior leadership at the service was able to demonstrate how they worked and communicated with people, relative's other professionals and commissioners of care, to ensure people received the care they needed and should expect. Where there were concerns they managed those situations in an open and transparent way, clearly recording their actions and sharing any learning with staff at all levels.

People, relatives and staff were complimentary of the management team, one person said, "The manager is very kind, nice, he comes quite often and talks. My daughter lives in France and when she came, he came and introduced himself to her." A relative told us, "I love it, staff interact really well, they are always polite and seem to really enjoy working here, great atmosphere." Another relative said, "Main change (since last inspection) is management, it has not affect things, they run the same as before, they just continue."

Champions were still in place leading on aspects of people's care such as dementia awareness, health and safety and infection control. As the service has developed so have new champion roles such as leading on falls prevention and ensuring people's walking aids are in good working order. As a result, maintenance work had been completed to minimise risks from general wear and tear on walking frames. This meant people had their equipment in good working order to support them and help prevent slips and/or falls. Another initiative had been to add fluorescent tape to some walking aids so that people could locate them more easily during the night. Staff were monitoring this to see if this also helped reduce falls.

The service continued to work with PROSPER, a council lead training initiative promoting safer provision of care for elderly residents. As part of this staff continued to attend training on, pressure area care, nutrition and hydration and the prevention of urinary tract infections. We saw staff had implemented this learning. For example, statistics showed the level of urine infections had dropped from eight a month in December 2016 to none in February 2018. The deputy manager had a visual display for staff to plot which helped the data to be collected and shared easily. This was also used to see if their initiatives such as the rehydration trolley were working. The rehydration trolley is an initiative to encourage people to have regular drinks. The trolley is attractive looking and contains a large selection of all different types of drinks to meet everyone's requirements. We saw that the rehydration trolley remained popular and in regular use throughout the inspection, we also noted that staff were very good at topping up people's drinks and responding to their requests for more tea or coffee. Each year the PROSPER initiative holds an awards ceremony to recognise the work carried out in residential care and nursing homes across the sector in Essex. The deputy manager won the award 'Champion of Champions', to recognise the work they had done to reduce urinary tract infections, falls and prevent pressure sores at the service.

One member of staff told us, "I think it is a very good care home to work for, we have a good team and good communication." They also said, "The [deputy name and manager's name] are great they are approachable. They can be in the middle of doing something on the computer and you go to them for help, straight away they will roll up their sleeves and help out. I have the utmost respect for them." A health care professional told us, "We are happy with the staff, it is a good home, staff know people well and are able to give us all the information we need." Another health professional told us, "This is one of the better homes in the area; I have not noticed any massive changes since the last inspection. The staff have a caring attitude and if anything goes wrong they are all devastated by it."

Staff were very positive about working at the service and were passionate about providing good care for people. Staff repeatedly told us they felt well supported by the management team and had regular meetings, supervision and training. One member of staff said, "The manager is very approachable, I can go to him and chat, everyone gets on." Another member of staff said, "It is the most rewarding job I can think off. You are their family, especially the people who do not have anybody. If I have any concerns there is always someone to help me."

The registered manager told us they frequently worked alongside staff to support them and to ensure a learning culture was evident within the service. Training was well supported and the registered manager had linked in with other professional's such as community nurse teams to support people more effectively. This training had helped staff recognise how they could intervene quickly to seek further healthcare advice. This also included links with a local hospice to provide end of life training for staff, so that people received the care and support they wanted at the right time. As a result of this they had started enrolling staff to complete the Gold Standards Framework for end of life care. This is a national recognised training which the senior managers felt could be effectively used to further support people and their loved ones during this difficult time.

The registered manager has continued their drive to continually improve the service by working with other healthcare professionals and drawing on their resources, training, knowledge and experience. This includes working with a dementia crisis team to work on a pilot looking at ways of reducing falls for people living with dementia. As part of this they will be specifically researching the reduction and use of antipsychotics medication. They will also be reviewing general falls data and reviewing paperwork and systems in place to mitigate the risk of falls. The registered manager has involved staff at the service to lead on this pilot so they are included and could see the value of this work. Projects like this demonstrated how the management were always exploring new ways to improve the care provided.

The registered manager kept themselves up to date with developments in the care sector and attended forums and further training to develop their own skills. They were enrolled into completing the 'My Home Life' training. This training encourages registered managers to share ideas and initiatives with each other to improve the experience of people using services.

The service had arrangements in place for people who used the service, their representatives and staff to provide their views about the care and support they received. Annual quality assurance questionnaires had been sent to people and their relatives to gather their views and opinions about the quality of the service. We saw that questionnaires had been analysed and any feedback that was negative had an action plan in place with a date for this to be completed by. For example, some people felt they did not have enough information before they came to live at the service, in response people now received a service user guide before they move in or on arrival. We saw there was also a suggestion box for people, relatives and staff to use. There were regular meetings held for people, relatives and staff. We observed a meeting held with people and found this to be a very inclusive and lively debate to discuss their care needs and how the

service was run. We saw that actions were taken from each meeting, acted on and then fed back to people. We reviewed complaints and saw that where complaints were raised these were taken seriously and were fully investigated and where appropriate actions were put into place by the registered manager. In addition, the service had received a number of compliments.

The service has been recognised for their achievements and had received an award from PROSPER as previously mentioned. The registered manager has also received the 'ROSE' award; this is recognition from the registered provider for the good work they have done on maintaining standards.