Runwood Homes Limited

Longview

Inspection report

Little Gypps Road
Canvey Island
Essex
SS8 9HG

Tel: 01268682906
Website: www.runwoodhomes.co.uk

Date of inspection visit:
26 September 2019

Date of publication:
05 November 2019

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

About the service
Longview is a residential care home providing accommodation and personal care for up to 70 people aged 65 and over. At the time of the inspection 70 people were living at the service, this included people living with dementia.

People's experience of using this service and what we found
People we spoke with told us they felt happy and safe living at Longview.

Systems were in place to safeguard people from harm and risks were assessed appropriately. There were enough trained staff to meet people's needs and people's medicines were administered safely.

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.

Staff were knowledgeable and caring and treated people with dignity and respect. People and their relatives spoke positively about the care and support received.

People's care was personalised and people were supported to take part in a range of different activities which were meaningful to them. People knew how to raise concerns and told us they felt confident these would be addressed when raised. The service worked with other health professionals to meet people's needs.

People and relatives spoke highly of the manager and the positive culture created by the management team. Staff told us they felt supported by the manager. Quality monitoring processes were in place to assess and improve the service.
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 February 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?

Good

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good

The service was well led.

Details are in our well led findings below

Longview

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 two inspectors and one assistant inspector.

Service and service type
Longview is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 manager who was in the process of being registered with the Care Quality Commission. 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 inspection
We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 used all of this information to plan our inspection.

During the inspection
We spoke with nine people who used the service and seven relatives about their experience of the care provided. We spoke with eight members of staff including the manager, deputy manager, senior care

workers, care workers and the cook.
We reviewed a range of records. This included eight people's care records and four people's medication records. We looked at four staff files in relation to recruitment and staff supervision and a variety of records relating to the management of the service, including policies and procedures .

Good

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 told us they felt safe living in the home. One person said, "The carers make sure we are alright, it feels like a safe place."
- Relatives told us they felt reassured their family member was safe. One relative said, "I can go home knowing my [relative] is safe."
- Staff had received safeguarding training and knew what to do if they had any concerns. One member of staff told us, "I would follow the chain of command and report it to the deputy manager, manager, social services and CQC."

Assessing risk, safety monitoring and management

- People had risk assessments in place which were personalised to their needs. The assessments detailed how staff should support people in order to keep them safe and covered a number of areas including medical conditions, nutrition and mobility.
- Staff were trained in fire safety and people had personal evacuation plans in place for staff to follow.
- The registered manager completed regular health and safety audits on the environment and equipment.

Staffing and recruitment

- There were enough staff to meet people's needs. People and their relatives told us staff were available when needed. One person said, "The staff are beautiful - everything is always ready for us, they are organised". A relative told us, "The staff don't rush people, everything is done at a gentle pace."
- Staff recruitment processes were safe and all relevant documentation was in place.

Using medicines safely

- People's medicines were administered safely by trained staff.
- Staff's competency to administer medicines was re-assessed regularly.
- The registered manager completed regular audits of the medicines.
- People's medicines records reflected their individual needs with information that was important for staff to know when administering.

Preventing and controlling infection

- Staff had received infection control training and knew how to minimise the risk of infections.
- Staff wore protective clothing such as gloves and aprons when appropriate.
- Infection control audits were completed regularly.

Learning lessons when things go wrong

● The manager had investigated incidents and accidents fully and put measures in place to minimise the risk of a reoccurrence.

● Following on from incidents, the manager had discussed lessons learnt with the staff team and fed back to people and their relatives when required.

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's care plans showed their needs were assessed and reviewed regularly.
- Staff told us, when people's needs changed their care plans were updated. One member of staff said, "If someone comes back from hospital and their mobility has changed, the care plan is re-written for that change. We review the whole care plan and make sure it's relevant every month."
- Staff knew what people's needs were and could tell us how people liked to be supported.

Staff support: induction, training, skills and experience
- Staff received an induction and training relevant to their role. One member of staff told us, "The in-house training is brilliant". Another said, "It's good, there are little bits that get added in each year."
- Staff told us they felt supported and received regular supervisions.
- The manager monitored staff training to ensure it was up to date.

Supporting people to eat and drink enough to maintain a balanced diet
- People and relatives told us there was enough to eat and drink. One person said, "I definitely get enough to eat and drink". A relative said, "They're always coming round with drinks and things."
- People told us they had choices in what they ate and were generally satisfied with the quality of the food. One person told us, "The food is great." Another person said, "It's not too bad, there's two choices but I'm a bit fussy." A relative told us, "They will always say "Do you want something else?" but it's difficult when they're trying to cater for so many different people."
- Staff knew how to support people who required a special diet, we observed staff supporting people appropriately whilst eating lunch.
- The service had introduced a hydration trolley to ensure drinks and snacks were being offered to people on a regular basis throughout the day.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support
- People were supported to access health services when needed. We saw evidence in people's care plans of visits from district nurses and speech and language therapists.
- The service had created it's own 'doctor's surgery' within the home to enable people to speak to the visiting GP confidentially and to provide a space where health information could be accessed.
- People told us they were supported to attend health appointments. One person said, "We can see the chiropodist, and we had our eyes tested recently."

● The service worked closely with the dementia community support team. One professional working within the dementia support team told us, "Over the last 4 months involvement has increased and we are working collaboratively to promote positive outcomes for residents. Longview will contact our team if they feel a resident's family would benefit from support from us. They will also make contact regarding assistance to support staff with difficult situations. Together we find effective resolutions and help with professional referrals."

Adapting service, design, decoration to meet people's needs
● The service had been recently redecorated and people's bedrooms were personalised to meet their individual needs and preferences.
● A small shop had recently been opened within the home for people to visit. People had asked for the shop and doctors surgery to be created and some of the people living in the service were now working in the shop.
● The service had recently gained accreditation for being a dementia friendly care home. The manager had plans to adapt the environment further to make it more dementia friendly.
● The garden space could be accessed by everyone and had been designed and created with the help of people living at the service. It was brightly coloured and contained raised planting areas, a fish pond and seating areas.

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.

● Staff received training in MCA and DoLS and were able to tell us what it meant. One member of staff said, "It's about making an informed decision. The act is there to protect those who do and don't have capacity and any DoLS must be the least restrictive option."
● People were asked for their consent prior to receiving care and support.
● People's capacity to consent was assessed and where needed, a DoLS had been applied for. The service made decisions in people's best interests.

Good

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 now remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were happy living in the service. One person said, "I fell on my feet here, its second to none. I like all the staff and they like me." Another person said, "This is the best home I've lived in. The staff are lovely, I couldn't say a bad word."
- Relatives were happy with the care their family members received. One relative told us, "The staff are very helpful, they understand mum's needs and how to look after her." Another relative said, "The care is 100%, I couldn't fault the care in here."
- People's care plans were personalised and staff were knowledgeable about people's needs.

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

- People and relatives were involved in making decisions about care. One relative told us, "We have a family meeting monthly, we can say what we need and things get sorted." Another relative told us about the recently opened shop, "We've had some good ideas in the meetings, like the shop. We came up with the idea and it was implemented straight away."
- We saw staff asking people what they would like to do and how they would like to be supported.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. One relative said, "They treat [person] with respect, they respond to how she is presenting." A person told us, "I get a shower when I want, the staff treat me with dignity."
- Staff were aware of the importance of respecting people's choices. One member of staff told us, "Sometimes women don't like to be supported by men and men don't like to be supported by women, you respect their wishes." Another member of staff said, "Ask people what they want, and listen to what they want. Give them time to respond."

Good

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

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 needs were met through good organisation and delivery.

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

- People had a full assessment of their needs before they came to live at the home. Care plans were personalised and included information about their likes and dislikes, life history and how they would like to be supported.
- Care plans were regularly reviewed. Staff spoke with people and their relatives when updating information.

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.

- People's care plans detailed people's communication needs
- People were supported by staff who knew how they communicated. One relative told us, "They [staff] get through, they take the care to find out what she wants."
- The manager ensured people and staff had access to disability assessments and equipment to support them with their work and daily lives.

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

- The wellbeing lead told us they involved people in planning activities that were meaningful to them.
- People and relatives told us about a number of recent social events and activities which had been arranged by the service. One person said, "I went to a dinner and dance, we had a magician come round, I wore a 3 piece suit, I looked really dapper." A relative told us, "[Family member] loved the miniature ponies, I've seen them in here twice."
- Staff were proud of the activities that were taking place. One member of staff told us, "They're quite varied now, there's always something happening." Another said, "We held a ball for the residents who like to dress up and have their make up done. We had a red carpet, and they went out with their date for prosecco and a three course meal at the day centre. It was a success and we'll do it again"
- People were supported to maintain regular contact with families. People told us their relatives visited regularly.

Improving care quality in response to complaints or concerns

- The service had a complaints process in place and the registered manager had acted upon any concerns

raised.
● People and relatives told us they would raise any concerns with the manager. One person told us, "I would tell the main manager." A relative told us, "When concerns are raised, we always get feedback."

End of life care and support
● People's care plans contained information about their end of life wishes.
● Where people were receiving end of life care, the registered manager had worked closely with other health professionals to ensure people's needs were being met.
● Staff knew people well and could tell us how the people receiving end of life care liked to be supported.

Good

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.

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

- People and relatives spoke highly of the culture in the service. A relative told us, "The management team are doing a great job, they're working together and making a great team." One person said, "I think the new manager is amazing, one in a million."
- Staff felt supported by the manager. One member of staff told us "The manager is brilliant. She's got everyone working as a team." Another said, "I feel morale has really been boosted."
- The manager told us they wanted people to be able to raise concerns. They said, "I have spoken to relatives and let them know the door is always open, I don't want people walking out of here not feeling they can talk to us or tell us about problems."
- The manager understood duty of candour. Incidents were fully investigated, keeping people and their relatives involved and informed. Written apologies and explanations had been issued and where necessary, the Local Authority had been informed of safeguarding concerns.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Staff understood their responsibilities and felt supported in their role by the management team. One member of staff told us, "You can go to [manager] if you've got a problem and they sort it out immediately". Another member of staff said, "[Manager] is very approachable and always has the time to talk."
- The management team had put in place effective quality monitoring processes, this ensured the manager had good oversight of the service.
- The manager had submitted statutory notifications to CQC promptly. These included notifications where DoLS had been granted.
- The service had correctly displayed their inspection rating within the service and on their website.
- There was an appropriate statement of purpose available for everyone to read. This clearly set out the aims and objectives as well as the ethos of the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were supported to voice their opinions on the service through regular residents' meetings. People and relatives told us staff listened to them and supported them when they wanted to make changes.
- Staff were able to give their feedback on the service through regular team meetings, surveys and

supervisions.
● Quality monitoring survey's took place every six months. The last surveys had taken place in July, August and September 2019. People had been asked about catering, activities and their experience of living at the service. Feedback was positive; peoples suggestions and opinions had been listened to and acted on. People said they would like to have crumpets and bubble and squeak added to the menu which had been noted for the new menu.
● People's equality characteristics were considered when care planning. People's gender preferences were discussed and recorded in their care plans. The service promoted an open culture which allowed people and staff to express themselves how they wished.
● The service received many compliments from relatives and people who had used the service. Comments included, "'What a wonderful facility with happy residents and fully attentive staff. It could be mistaken for a 70 bed 5 star hotel." And, "Appreciate the truly excellent job you are doing and personally I found it a pleasure to open the new residents shop - I do hope that your staff will show you the photos."

Continuous learning and improving care
● The management team worked closely together to develop the service. They completed regular audits and put actions in place to improve standards.
● The manager told us they monitored what was happening in the service on a daily basis. They said, "We have flash meetings, handovers, a daily walk around, speak to all staff, see all residents. Talk about people who have had a fall, or gone in to hospital."

Working in partnership with others
● The service was part of the 'Red bag scheme' which had been set up by the Local Authority and the Clinical Commissioning Group with the local NHS Trust. Red bags contain all the information a person needs when going into hospital as well as clothes and personal belongings. The use of red bags has been shown to reduce hospital stays and stop people losing their personal belongings.
● The service was building links with the community. The wellbeing lead told us local nurseries, schools, and church choirs were encouraged to come into the service and people were supported to go out to their local shops and cafes.
● The manager told us the service was introducing a 'pen pals' scheme with the local school where people could befriend a younger person and exchange letters.
● The service sought guidance and training from other health organisations to drive improvements and increase staff knowledge. The manager told us they had recently contacted a mobile dental team and arranged for them to come into the service to support people with their oral health needs and to provide training for the staff team.