

Mansion House Retirement Home Limited

Down Hall Residential Home

Inspection report

Down Hall Road
Bradwell-on-Sea
Southminster
Essex
CM0 7QP

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10 July 2017

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

The inspection took place on 10 July and it was unannounced.

Down Hall Residential Home is registered to provide accommodation and personal care for up to 38 older people some of whom may be living with dementia. When we inspected there were 32 people living in the service.

At the last inspection, the service was rated 'Good' and at this inspection we found the service remains 'Good'.

There was a registered manager in post. 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.

People received a safe service and were protected from the risk of harm. There were enough staff that had been safely recruited to help keep people safe and meet their needs. Medicine management was good and people received their medicines as prescribed.

People were cared for by experienced, supported and well trained staff. The service supported people to have choice and control over their lives and in the least restrictive way possible. People received sufficient food and drink to meet their needs and preferences and their healthcare needs were met.

Staff knew the people they cared for well and were kind, caring and compassionate in their approach. People were encouraged and supported to remain as independent as possible. Staff ensured that people were treated with dignity and respect and their privacy was maintained at all times.

People were fully involved in the assessment and care planning process. Their care plans had been regularly reviewed to reflect their changing needs. People were encouraged and supported to participate in a range of activities to suit their individual interests. Complaints were dealt with appropriately and in a timely way.

People were positive about the quality of the service. The registered manager and staff were committed to providing people with good quality person centred care that met their needs and preferences. There were effective systems in place to monitor the quality of the service and to drive improvements. The service met all relevant fundamental standards.

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 effective?

The service remains Good.

Good ●

Is the service caring?

The service remains Good.

Good ●

Is the service responsive?

The service remains Good.

Good ●

Is the service well-led?

The service remains Good.

Good ●

Down Hall 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 checked 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 10 July 2017 and was unannounced. 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. Our expert by experience had this type of experience.

We reviewed information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. A Provider Information Return (PIR) was sent to us. This is a form that asks the provider to give key information about the service, what the service does well and improvements they plan to make. We used a range of information to plan what areas we were going to focus on during our inspection.

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.

We spoke with 13 people who used the service and four relatives, the registered manager, the deputy manager, and eight members of staff. We reviewed eight people's care files, four staff recruitment, training records and quality assurance information.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse, harm and risks to people's safety as at the previous inspection and the rating remains good.

People told us they felt safe living at the service. One person said, "I could not run it down, I feel safe and I think they all like me and I wear my pendant." Another person told us, "I am quite comfortable, have got no complaints and I don't feel frightened here." A family member said to us, "There are codes on the front door and it feels like a very safe environment." Another told us, "I have not had any qualms, my [relative] is safe and I have only had good feelings about it here."

Staff demonstrated a good understanding of how to protect people from the risk of harm. Staff were aware that they could report any safeguarding concerns to CQC and/or the local authority. There were clear policies, procedures and guidelines for staff to refer to when needed and safeguarding issues had been dealt with appropriately. When asked about their understanding, one staff member said, "We would know the signs by someone acting differently or noticing something on their body that made us worried and tell the manager straightaway."

Risks to people's health, safety and welfare were well managed. There were risk assessments and management plans in place to minimise any risks to people. We saw how staff supported people with their mobility when walking around the home, their diet and weight to prevent malnutrition and care for their legs and feet to prevent pressure ulcers. Staff described to us how they kept people safe.

People told us there were sufficient numbers of staff to meet their needs. One person said, "There is always someone there for me, the staff are fine." Another told us, "It is very nice here, pleasant atmosphere and very helpful friendly staff. They come in and chat to me in my room, and there are always plenty of people around." Staff told us, and the duty rotas confirmed that there were enough of them to care for people safely. The service had a robust recruitment process in place where all of the appropriate checks had been carried out before staff started work. A gap in a person's employment was found but the registered manager corrected this before the end of the inspection.

People told us that they received their medicine in good time and that staff didn't rush them. We observed a medicine round and saw this to be the case and people received their medicine as prescribed. We carried out a random check of the medicine system and found it was well managed. We looked at a range of medicine records and found the majority had been completely correctly. However, we found a small number of gaps with missing signatures in the medicine administration records. We spoke with the registered manager about this and they confirmed the reasons for these gaps and what action had been taken to ensure this did not happen again. A meeting had been held with senior staff to remind them of their responsibilities, supervision had been undertaken and the management team were undertaking random checks.

The service was clean and hygienic and the registered manager had carried out regular checks to ensure

that infection control practices were adhered to. One staff member told us, "Any smells they are jumped on and the carpet cleaner comes straight out."

Is the service effective?

Our findings

At this inspection we found staff had the same level of skills, experience and support as they did at the previous inspection and the rating remains good.

People were cared for by staff who said they were supported and valued. Staff told us, and the records confirmed that they had regular supervision and appraisals. One staff member said, "I feel well supported by the team here and I have my own time for supervision which I spend with the manager to go through my work." Another said, "There is a good support system and I think this shows in the way people are supported too."

People told us that the staff were well trained. One relative said, "They know what they are doing and I have every faith and trust in them." Staff said, and the records confirmed that they had received a wide range of training appropriate for their role which had been regularly updated. One staff member said, "The dementia training was excellent, made you think differently." The training programme showed us that sessions were planned throughout the year. The service undertook training with other providers to share resources and learning. Staff told us they were encouraged and supported to attain qualifications in care which ensured they were well trained.

People who lack mental capacity to consent to arrangements for care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA) 2005. The procedures for this in care homes and hospitals are 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 were being met. Staff had been trained in and demonstrated an understanding of the MCA and DoLS and we observed people supporting people in making everyday choices. The registered manager knew when and how to make appropriate DoLS applications to the local authority where appropriate.

People were supported to have sufficient to eat and drink and to maintain a balanced diet. The lunchtime experience was pleasant and people ate where they wanted, in the dining room, in the lounge or in their bedrooms. There was a nice atmosphere in the dining room and people chatted with each other whilst food was being served. People liked the food and told us, "I ask for a bacon sandwich and I have a glass of red wine a day for my health," and, "Food is lovely, usually hot and lots choice."

Staff were very knowledgeable about people's likes and dislikes when serving the meals, for example "[Name] is not eating that much meat so maybe more veg as it hurts their mouth." Where people required support to eat, staff sat with them and helped them enjoy their meal. Where required, people's dietary and fluid intake had been recorded and their weight monitored to ensure that had enough food and drink to keep them healthy.

People told us, and the records confirmed that staff supported them to attend routine health appointments to help them maintain their health. A health professional told us, "They [staff] always listen to my

instructions about treatment and I trust them to follow it up."

Is the service caring?

Our findings

At this inspection we found that people were still cared for by kind, caring and compassionate staff and the rating remains Good.

People told us they were treated with dignity, respect and kindness by all staff and we saw kind and compassionate care being delivered throughout our visit. One relative said, "They [staff] are very caring staff, they are spoken to and called by their first name, professional but friendly." One person told us, "I find it good, the staff are very caring people and you just feel at ease with them." Another person said, "The girls talk to me, would do anything for me, they gave me a big party, it was lovely. I am very happy here." Staff provided people with a supportive and caring place to live.

We observed people engaged with staff in a natural, comfortable and easy way. Staff provided gentle support when people were anxious, had a creative way of distracting and engaging with people as individuals and provided stimulating conversation with people throughout the day. One staff member said, "I like it here, it's very homely and we try and sit with people when we can. We socialise with them, the managers say it is fine to sit with people and we try and reassure them." Another said, "When I speak with [name] she knows what I am saying. I know when they are happy and sad. They love to walk and I know I can divert them with a sweet or a magazine or a hug."

Staff promoted people's independence and encouraged and supported them to retain this as much as possible. One staff member said, "If they want to wash up they can, it all goes to the kitchen to be sterilised but some people love being in the kitchen so they can carry on doing the things they used to do." We saw people being appropriately supported to move around the service during our visit, as well as to access the gardens and to sit on the front porch enjoying the views.

People told us they were actively involved in making decisions about their care and support. One person said, "I get up at 7.30, which is when I want to get up and I go to bed when I want, I can be in my room if I want." Another said, "I choose my own clothes to put on, manage to wash myself and come down here for the company and I choose what I want to do." Information in people's care plans was written in a caring and sensitive way and with their involvement. People's choices and preferences were individual and they were treated as such by the staff who knew them well.

People told us they were supported and encouraged to maintain relationships with their families and friends. One person said, "There are always visitors here and you get to know other people's families as they always say hello to you." One person said, "I like writing to my brother." We saw that visitors were welcome at any time and people confirmed this. Where people did not have family members to support them to have a voice, they had access to advocacy services. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.

Is the service responsive?

Our findings

At this inspection we found that people still received personalised, responsive care that met their individual needs and the rating remains good.

People's needs had been fully assessed before they moved into the service and their care plans had been devised from the assessment process. Care plans had been regularly reviewed and updated to reflect people's changing needs. They described people's likes and dislikes and provided information about their background to help staff to care for people in a way that they preferred. One staff member told us, "This is a nice home, very clean, very nice place to work, nice for people, we help them to be independent, they wash their face and hands themselves and it helps them keep fit in mind and body." Another staff member said, "Choice and dignity are a big deal here."

People told us that they were happy with their care plans and they felt that staff met their needs appropriately. One person said, "I chose to come here and I have not regretted it one bit." One family member told us, "[Name] has made so much progress since being at Down Hall, the care, the support and above all the company that has made it so special for them to thrive." One family member said, "Communication has been good, they phoned me once to reassure me [name] was alright and if I ask for information they are always really forthcoming."

People were seen to be enjoying a range of leisure activities on offer. One family member told us, "[Relative] comes down and sits in the lounge, does carpet bowls, big dominoes, engages in the singing group and goes out with staff to the shops and on the bus to the next village for a pub lunch." One person said, "There is enough to do, it suits me." Another person said, "I go to the Gent's club and we have a drink, like a beer or cider and some bites to eat and have a chat about things, its good."

We saw that objects with specific textures were available for people with dementia such as a wooden puzzle and dementia friendly cushions and muffs. People spent time occupied with staff who were on hand to talk with them about things which they were familiar with.

People were supported to practice their faith and clergy visited the service monthly to ensure that people's religious needs were met if they were not able to go out. "[Name of staff member] takes me for a walk to the church. They push me in a wheelchair. It's lovely being able to go out on a Sunday."

People told us that the deputy and the registered manager took their concerns seriously and resolved matters quickly. One person said, "I find the staff very nice and easy to talk to and I am happy here and have got no complaints." There was a good complaints process in place and people and their relatives told us they had not had cause to use it but knew they could go to either manager at any point. The registered manager told us they had no outstanding complaints but that any complaint, either in writing or verbal, was fully investigated or responded to.

Is the service well-led?

Our findings

At this inspection we found that the service still provided people with a well led good quality service and the rating remains good. One person told us, "I can't walk and need caring. I have got beautiful surroundings and they [staff] help me live my life here." One family member said, "Well run, you would think it was a hotel not a home, they are always repainting and refurbishing, grounds are nice, and it's regarded well by the village."

There was a registered manager in post. The registered manager promoted an open, positive person-centred culture. Staff shared their vision to provide people with high quality person centred care. They said, "It is lovely, we are one big family," and, "The manager is very good, very helpful and will help when we are short and we need another pair of hands they come and help, you cannot fault them."

People, their relatives and staff told us they could raise issues with the managers at any time. Staff told us, and the records confirmed that they had taken part in regular meetings where they had the opportunity to raise any issues such as training, care practices and health and safety. Staff told us, "I always feel supported by the managers and I can always ask the district nurses if there is something I don't know", and, "Staff can say anything to the seniors, we meet once a month."

People said they were encouraged to give their views and opinions and the records showed that discussions had taken place where the food, the care and activities were discussed. People had also been asked for ideas about how they felt that the service could be improved. One person said, "Whatever is going on they encourage me, I go to the residents meetings, it's important to have your say."

The quality monitoring system was effective. The registered manager carried out a monthly audit to check on a range of areas such as the environment, staffing, infection control, medicines and health and safety. A health and social care professional told us that the service was well led and that staff provided people with good quality care. One health professional told us, "Down Hall is brilliant, so caring and the best home in the area."

The registered manager carried out annual quality assurance surveys where feedback had been sought from people who use the service, their relatives and staff. The March 2017 survey was positive and people who used the service, their relatives and staff worked together with the registered manager to make sure improvements were made. One staff member said, "It is a happy home, the managers appreciate what you do and there is good staff morale."

People's personal records were stored safely when not in use but were readily accessible to staff, when needed. The service was inclusive, welcoming and provided people with good quality care.