

A & D Rhoden

The Hylands Retirement Home

Inspection report

23-26 The Crescent
Filey
North Yorkshire
YO14 9JR

Tel: 01723515213
Website: www.hylandsfiley.co.uk

Date of inspection visit:
01 November 2018
05 November 2018

Date of publication:
13 December 2018

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

Rating at last inspection: Requires improvement (published 2 May 2018).

About the service: The service is a residential care home providing personal care to 46 older people and people living with dementia. Thirty-eight people lived in the service when we inspected.

Why we inspected: This was a scheduled inspection based on the previous rating. The overall rating has improved to good.

People's experience of using this service: Improvements had been made since the last inspection in February 2018 around infection prevention and control. The provider was now meeting legal requirements. All areas were clean and tidy; we saw that work to improve the facilities had been completed. The rooms we looked at were nicely decorated in colours of people's choosing. One person told us, "I love it here and my room was decorated before I came in. I think it is super."

People told us they felt safe and well supported. The provider followed robust recruitment checks, and sufficient staff were employed to ensure people's needs were met. People's medicines were managed safely. People told us, "Definitely enough staff to meet people's needs" and "Everybody is pleasant and gets you what you want."

In the last year the provider had achieved an award from Dementia Care Matters for the development of the service. To achieve 'Dementia Care Matters Butterfly Model of Care Quality of Life Accreditation' the provider had remodelled the environment on the ground floor into three individual areas based on people's dementia care needs. Staff had received training and development around management of dementia and demonstrated a good understanding of dementia care. They worked with people's individual strengths to ensure their independence, wishes and choices were promoted. This had a positive impact on people and meant people were much more settled and at ease. Staff had time to do activities, discussions and get to know people and relatives.

Staff knew about people's individual care needs and care plans were person-centred and detailed. People described staff as "Excellent, caring and knowledgeable." We were told staff treated people who used the service with compassion, dignity and respect. One person said, "Well I think the atmosphere is pretty good - the way the home is divided up. Although one or two people living with dementia do walk around, the staff are there to offer help if they need it."

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People told us the service was well managed and organised. The management team assessed and monitored the quality of care provided to people. People and staff were asked for their views and their

suggestions were used to continuously improve the service.

More information is in the full report.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 ●

The Hylands Retirement 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 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.

Inspection team: One inspector carried out the inspection on both days and was assisted by a second inspector and an expert-by-experience on day one of inspection. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of service. The expert-by-experience on this inspection had expertise in dementia care.

Service and service type: The service is a 'care home'. People in care homes receive accommodation and nursing or personal care. 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 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 the inspection we reviewed information available to us about this service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection we spoke with the provider, registered manager, two deputy managers and seven staff

members. We also spoke with six people and three relatives and spent time observing the environment and the dining experience.

We looked at four people's care records including medication administration records (MARs) and a selection of documentation about the management and running of the service. This included recruitment information for three members of staff, staff training records, policies and procedures, complaints and staff rotas.

Is the service safe?

Our findings

People were safe and protected from avoidable harm. Legal requirements were met.

Preventing and controlling infection

- At the last inspection we found a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was about infection prevention and control (IPC) practices and the environment.
- At this inspection the provider was no longer in breach of Regulation 12. It was obvious going around the service, that there had been a great deal of time and money invested resulting in a significant improvement.
- The service was well-maintained, clean and tidy throughout. Staff followed infection prevention and control procedures to ensure people were protected from the risk of infections spreading.
- The Community Infection Prevention and Control Nurse Specialist revisited the service in October 2018 and reported they were satisfied with the progress made.

Using medicines safely

- We saw medicines were managed safely. The registered manager agreed to explore some minor anomalies with medicines stock for two people.
- The care staff said they had received training in the handling of medicines. This was confirmed by our checks of the staff training files.

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

- Systems were in place to identify and reduce the risks to people who used the service. People's care plans included risk assessments. These were individualised and provided staff with a clear description of any risks and guidance on the support people needed. Staff understood to promote people's independence and freedom, yet minimise the risks.
- Accidents and incidents were recorded and responded to appropriately to ensure outcomes could be achieved and lessons learned. The registered manager had oversight of these and the provider monitored them for any trends or patterns.
- Evidence was available to show that when something had gone wrong the registered manager responded appropriately and used any incidents as a learning opportunity.
- People who used the service said they felt safe, confident and happy when being supported by staff. They said, "Oh yes. I was poorly before I came in here and I now have help" and "Oh yes - I am safe. I am liable to fall over. Here there is always someone about to offer me support and assistance."
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were protected in the event of a fire.

Safeguarding systems and processes

- Policies in relation to safeguarding and whistleblowing reflected local procedures and relevant contact information.
- Staff demonstrated a good awareness of safeguarding procedures and knew who to inform if they witnessed or had an allegation of abuse reported to them. The registered manager was aware of their

responsibility to liaise with the local authority if safeguarding concerns were raised and previous incidents had been managed well.

Staffing levels

- The dependency levels of people who used the service were used to ensure there were sufficient staff on duty over the 24-hour period. There were enough to enable people to take part in social activities and to attend medical appointments. People told us they received care in a timely way.
- Staff told us, "Things are better now, we have more staff and increased stability/consistency."
- We saw staff were recruited safely and appropriate checks were carried out to protect people from the employment of unsuitable staff.

Is the service effective?

Our findings

People's outcomes were consistently good, and people's feedback confirmed this.

Staff skills, knowledge and experience

- A comprehensive staff induction and training programme was in place.
- Supervision is a process, usually a meeting, by which an organisation provides guidance and support to its staff. Staff were supported through regular supervision and annual appraisals.
- People told us staff had the right skills to look after them. They said, "I would say in the main - yes. They seem to know exactly what they are doing" and "Yes. I think most of them have the right skills."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff providing consistent, effective, timely care

- Assessments of people's needs were completed and care and support regularly reviewed.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life.
- Over the last 12 months the provider had spent considerable time and money in changing the environment and developing staff to meet best practice guidance for dementia care. This had resulted in the provider being awarded 'Dementia Care Matters Butterfly Model of Care Quality of Life Accreditation' in recognition of their hard work and improved practice.
- Staff told us the new way of dividing the service into three distinct areas called 'houses' was working well. They said, "It really is a good place to work for, after the changes. It is so much calmer in the service since we started the Butterfly Project."

Healthcare Support

- People had good access to health care professionals. Records of visits were kept and people had hospital passports in place, to provide key information should they need to go into hospital.
- Care files contained information about each person's health needs and the support they required to remain as independent as possible.

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

We checked whether the service was working within the principles of the MCA, whether any restrictions on

people's liberty had been authorised and whether any conditions on such authorisations were being met.

- We found authorisations were appropriate and monitored by the registered manager.
- Staff ensured people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests. People told us could make individual choices and decisions about their daily lives.

Supporting people to eat and drink enough with choice in a balanced diet

- People's nutritional needs were met and choice was provided. Information on people's dietary needs and preferences was obtained on admission. Staff offered people appropriate support with eating and drinking and different options of meals until they found one they liked.
- As part of the Butterfly project, meal times had been changed so that instead of staff plating up meals people were able or supported to dish up their own meals from tureens. This helped people make choices and try different foods. A menu board was visible and people had access to picture menus.
- People said they enjoyed the meals on offer. They told us, "I find the food very good. They have asked if we want to make any suggestions" and "We get lots of drinks and snacks. We have choice of biscuits and things. And I really think if someone wanted anything and asked they would get it."

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

- The provider, took us around the building to show what work had been completed since our last inspection and what was on-going. Changes included the development of three 'houses' each with their own lounge and dining room. People could carry out tasks such as washing up and cleaning tables and could prepare snacks and drinks with staff supervision. This had made people feel more included in these daily tasks and retained their independence skills.
- The downstairs lounge areas were decorated for Halloween and there were additional decorations including poppies and memorabilia about the two World Wars. Throughout the building there were items such as sewing machines, irons and ironing boards that people would recognise and become talking points for them.
- Family photos of people living and working in the home were on tables, which prompted discussions between people of weddings and children.
- Staff made use of technology such as 'Alexa' to encourage spontaneous choice of music. We observed one person enjoying their lunch to the sound of bird song, whilst another person sang along to one of their favourite tunes which staff had found on-line.
- Work was going on to create a new garden area which would be secure and offer people a nice space to enjoy warmer weather. The provider said this would be ready by Spring 2019.

Is the service caring?

Our findings

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People appeared comfortable and well looked after and staff demonstrated a friendly approach which showed consideration for their individual needs.
- Staff communicated with people in a caring and compassionate way. They gave time for people to respond. People appeared well looked after and well groomed.
- Staff worked with relatives to create memory boxes full of mementos. The items in the boxes gave people comfort from something familiar and created opportunities for conversations with staff and others.
- Staff listened to people and provided sensitive support to ensure their needs were promoted.
- The Butterfly project lead told us how one person had been very withdrawn and how the new Butterfly approach had, "Helped one person to be more confident and relaxed, in a way that enabled their personality to shine through."
- Staff spent time getting to know people's preferences and used this knowledge to care for them in the way they liked. One person told us, "Staff are very supportive, very good. They understand me."
- People's bedrooms were clean, tidy and personalised and all had space within which staff could deliver care.
- Personal information about people was securely stored and staff understood the need for confidentiality.

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

- Staff treated people on an equal basis and we saw that equality and diversity information such as gender, race, religion, nationality and sexual orientation were recorded in the care files.
- People confirmed staff were always very polite and included them when making decisions about how they wanted their care provided. People told us, "Staff involve me in decisions about my care" and "My family look after things for me and staff let them know how I am."
- For people who wished to have additional support whilst making decisions about their care, information on how to access an advocacy service was available from the registered manager. An advocate is an independent person who supports someone so that their views are heard and their rights are upheld.

Respecting and promoting people's privacy, dignity and independence

- People said they were treated with compassion, dignity and respect. They told us staff addressed them by their preferred name, gave them eye contact when conversing with them and were always polite and respectful when in their company.
- Staff listened to people and provided sensitive support to ensure their needs were promoted.

Is the service responsive?

Our findings

People's needs were met through good organisation and delivery.

Personalised care

- An assessment was carried out prior to admission, to identify each person's support needs. Care plans were developed outlining how these needs were to be met. Involving people in this assessment helped to ensure support was planned to meet people's individual care preferences.
- Since our last inspection in February 2018 risk assessments and care plans had been reviewed and new formats developed to make sure people stayed safe and well. We saw care plans and risk assessments contained relevant information and were up-to-date.
- Staff were knowledgeable about the people who used the service and displayed a good understanding of their preferences and interests, as well as their health and support needs, which enabled them to provide personalised care. People and their representatives were involved in reviews of care. This made sure care plans were current and reflected people's preferences as their needs changed.
- Staff understood people's needs and found creative ways of supporting them to have a good quality of life. People told us they attended meetings when they occurred and enjoyed the social activities arranged for them by the service.
- People enjoyed attending a monthly in-house church service and where requested staff would assist them to local services.
- We saw people taking part in quizzes and discussions about their past lives. They had interactive items such as hats, coats, scarves and an ironing board in the lounge areas, which people were using. There was a drink making facility for people and relatives and a bookcase full of books accessible for people to read and put back. All the houses had large clocks on the wall some with dates on them to help orientate people to time and place. Social events were planned to allow access to a range of activities delivered by both staff and external groups such as the local school children and a 'Fishermans' choir'.

Improving care quality in response to complaints or concerns

- The registered manager was aware of the need to make information for people available in formats they could understand. They said this was 'a work in progress'.
- There was a complaints procedure and information was provided to help people understand the care and support available to them. Complaints were dealt with appropriately by the registered manager when received.

End of life care and support

- Each care file contained a section for people's wishes and choices regarding end of life care. These gave staff details of who to contact in an emergency and what people wanted regarding their care and support.
- One person was receiving 'end of life' care and support. They were comfortable, settled in their bed and receiving appropriate care. They had received input from their GP and other healthcare professionals as needed.
- One family had written to staff following the death of their relative. They said, "There are not enough words to express our gratitude to you all for the care mum received from you all; we thank you from the bottom of

our hearts."

Is the service well-led?

Our findings

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership by the provider of person-centred, high quality care.

- The service benefited from having a provider and registered manager who were committed to providing good quality care to people who used their service.
- People told us, "Yes, I know who the registered manager is and we see them every day" and "The provider and registered manager come around and talk to us. They say 'Hello' every morning and sit with you for a chat."
- Staff said, "The owners are very friendly and they treat you like you're part of their family"
- The registered manager and staff at the service understood their roles and responsibilities. The provider had allocated a lead role for the Butterfly Project to promote improvements after the last inspection. The impact was positive and people were in receipt of more person-centred support.
- Since the last inspection in February 2018 improvements had been made to the environment and infection prevention and control practices. Work had been undertaken to develop and rewrite risk assessments and care plans to ensure people's needs were identified and any known risks reduced where possible.
- Staff told us they felt listened to and that the registered manager was approachable. They understood the provider's vision for the service and told us they worked as a team to deliver high standards.
- The provider and registered manager demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service, relatives and health care professionals.
- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service, for example there had been changes in activities with more visits from community groups.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The service had a welcoming and friendly atmosphere. Staff morale was high and the atmosphere was warm, happy and supportive.
- The culture of the service was open, honest, caring and fully focused on people's individual needs.
- Our observations were that it was well run and people who used the service were treated with respect and in a professional manner.
- Regular checks were carried out by staff and the registered manager to ensure people were safe and happy with the service they received.

•

Engaging and involving people using the service, the public and staff

- Feedback from people who used the service, relatives, health care professionals and staff was obtained using satisfaction questionnaires, meetings and staff supervision sessions. This information was analysed by the registered manager and where necessary action was taken to make changes or improvements to the service.
- Staff told us, "We have frequent staff meetings to discuss things and raise issues when needed" and "We

know we are not perfect, but are trying all the time to improve and move in the right direction."

Continuous learning and improving care

- The registered manager demonstrated an open and positive approach to learning and development. Improvements had been made following our previous inspection to ensure regulatory requirements were met.
- The hard work and improvements to dementia care made by the provider, registered manager and team had been recognised by the award of 'Dementia Care Matters Butterfly Model of Care Quality of Life Accreditation'.

Working in partnership with others

- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.