

# Runwood Homes Limited

## Park View

### Inspection report

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Park View is a residential care home providing personal care to up to 87 people. The service provides support to older people, some of whom may be living with dementia. At the time of our inspection there were 82 people living in the service.

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

Risks to people's safety were assessed. People's risk assessment documentation was not always detailed; however, people were supported by a consistent staff team who knew them well and understood their needs. There were enough staff available to provide support and people told us staff were prompt to respond when they required help. Staff were safely recruited, with the relevant employment checks completed prior to them starting work.

People were protected from the risk of abuse. Staff had received safeguarding training and knew how to raise any concerns around people's safety or wellbeing. Processes were in place to manage people's medicines safely and staff had received medicines training. Staff had access to appropriate personal protective equipment [PPE] and had receiving training in infection prevention and control.

The provider had processes in place for monitoring the safety and quality of the service and sought regular feedback from people, relatives, and staff in order to identify and address any areas of improvement. The provider had built positive working partnerships with other healthcare professionals in order to meet people's changing needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People and relatives spoke positively about the culture and leadership of the service and the care people received from staff. Staff felt supported and valued in their roles. The management team were committed to continuously improving people's care and creating a warm and welcoming environment where people achieved good outcomes.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Rating at last inspection

The last rating for this service was good (published 03 March 2018).

### Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Park View on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Park View

## 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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by 2 inspectors, a regulatory coordinator and 2 Experts by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Park View is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Park View is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spoke with 9 people and 14 relatives about their experience of the care provided. We also 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 7 members of staff including the registered manager, unit manager, senior carers, and care staff. We received feedback from 5 healthcare professionals who have regular contact with the service.

We reviewed a range of records. This included 9 people's care plans, multiple medicines records, 3 staff files in relation to recruitment and staff supervision and a variety of records relating to the management of the service.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people's safety were assessed and recorded; however, guidance was not always sufficiently detailed. The provider told us they were aware of the need for a greater level of detail and personalisation in people's care plan and risk assessment records and were in the process of completing a full review and update of documentation.
- Despite a lack of detail in some documentation, staff knew people well and were able to tell us about any risks to their safety and how to support them to minimise these. Comments from relatives included, "They totally understand [person]", "They do know [person] very well, they picked up when they weren't their normal self and they dealt with it, they are on the ball" and "Definitely without question, they know what [person] wants and needs."
- People told us they felt safe and relatives said they had no concerns about people's safety. People said, "I feel safe all the time as there are carers about, I have a very good relationship with the carers, them just being there makes me feel safe" and "I am looked after 100% and I am safe."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from the risk of abuse. Staff had received safeguarding training and the provider had a safeguarding policy in place for staff to follow.
- Staff knew how to recognise signs of abuse and how to report any concerns. One member of staff told us, "If I saw anything of concern, I would raise it with the managers straightaway. I know they would respond quickly."
- The provider kept a record of accidents, incidents, and safeguarding concerns. During the inspection we identified some accident reports which lacked detail and this meant it was not always clear whether the appropriate actions had been taken. The registered manager responded immediately to our feedback, arranging additional support and training for staff around the completion of reports and updating their tracker to evidence the action taken more clearly.
- The registered manager analysed accidents and incidents to identify any trends and completed a lessons learnt document which was shared with staff to minimise the risk of a reoccurrence.

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

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

#### Staffing and recruitment

- There were enough staff available to meet people's needs. People were supported by a consistent staff team who understood how they liked to be supported.
- People spoke positively about the care they received and the availability and helpfulness of staff. Comments included, "There are more staff, and they are wonderful. It's a wonderful care home with kind attentive staff, if the bell is rung, they are there at once" and "If we need a member of staff to speak to there is always someone around."
- During the inspection we found staff were visible throughout the communal areas of the service, responding promptly to people's requests.
- The provider had completed the appropriate employment checks prior to staff starting work to ensure they were safely recruited.

#### Using medicines safely

- People received their medicines as prescribed. Staff had received medicines training and the provider had assessed their competency to administer medicines safely.
- People's medicines were reviewed regularly with the GP to ensure they were still appropriately meeting people's health needs.
- People had medicines administration records [MARs] in place for staff to complete when administering medicines. Some of the handwritten entries on the MARs were not clear. However, the provider completed daily, weekly and monthly medicines checks to monitor the accuracy of the documentation and address any concerns.
- During the inspection, we completed a number of stock balance checks on the medicines and found all were correct and accurately recorded.
- Protocols were in place for people's 'as required' [PRN] medicines to provide staff with guidance about when and how these medicines should be given. This guidance had not always been dated to show when it was last reviewed. Following our feedback, the provider confirmed the protocols were now reviewed and dated.

#### Preventing and controlling infection

- The provider had an up to date infection prevention and control policy in place and staff were supported to undertake relevant training in understanding infection prevention and control.
- The service was well maintained and generally clean. During the inspection we identified some areas where more extensive cleaning was required to ensure facilities were free from stains. The registered manager responded to our feedback immediately, arranging additional cleaning and updating the cleaning schedules to incorporate more thorough checks.
- Staff had access to appropriate levels of personal protective equipment [PPE] and knew how to use it correctly.

#### Visiting in care homes

- The provider ensured people were supported to receive regular visits from friends and relatives without restrictions.

# 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 our last inspection we rated this key question outstanding. At this inspection the rating has changed to good. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and their relatives spoke positively about the welcoming culture of the service and the approachability and openness of the management team. Comments included, "The manager and assistant manager are superb and always have time for everyone", "The managers are lovely and are always on call and the staff are so nice, you can speak to them. Communication is excellent", "The managers aren't hidden away, they are walking around all day talking to people" and "They are 100% approachable."
- The provider worked in collaboration with people and those important to them to support people to achieve good outcomes. People's achievements and good news stories were shared and celebrated within the service and the wider organisation.
- The provider had implemented a staff recognition scheme to acknowledge and celebrate good practice. Staff told us they felt supported, listened to, and valued. Comment included, "[Registered manager] is very hands on and will always offer to help. I feel very supported" and "The manager is very supportive, always asking if everyone is ok and my colleagues are very supportive too. This is a nice place to work and I would 100% recommend it to someone I loved. I would be happy for them to live here."
- The registered manager had an open door policy and encouraged informal conversations and interactions alongside more formal feedback via a range of surveys, meetings, emails and phone calls. People, relatives, and staff told us they felt consulted and involved in the service.

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

- The provider had processes in place to monitor the safety and quality of people's care.
- The management team completed a range of audits in key areas of people's support such as medicines management, health monitoring and care planning. The registered manager was able to evidence how their audits had identified concerns and what actions they had taken in response to address these concerns.
- There was a clear management structure in place in the service. The management team were visible and accessible and people, relatives and staff knew who to contact with any queries or concerns.
- The provider understood their responsibility to be open and honest with people when things went wrong in accordance with the duty of candour.

Working in partnership with others; Continuous learning and improving care

- The provider worked in partnership with a number of different health and social care professionals. We received positive feedback from health professionals about how well the provider worked with them to support people's changing needs. Comments included, "Park View have always been very responsive in communicating with us and [registered manager] is very approachable" and "The home has a very welcoming feel at all times I have visited. The staff seem happy and positive and it is very noticeable they work as a team. They are well led by the management team."
- The provider regularly audited their own compliance to identify areas for learning and development. The registered manager was committed to continuously driving improvements in the service, responding promptly to inspection feedback, and implementing a service development plan to identify areas for improvement, share learning and monitor progress.