

# Runwood Homes Limited

# Leatherland Lodge

## Inspection report

Darenth Lane  
South Ockenden  
Essex  
RM15 5LS

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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

Leatherland Lodge provides accommodation and support for up to 46 people who may need assistance with personal care and may have care needs associated with living with dementia. The service has two floors and there is access to these via a passenger lift and a staircase. On the day of our inspection the service did not have any vacancies and the service does not provide nursing care.

The service had a registered manager in post and they had worked at the service for a number of years. 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.

At the last inspection the service was rated as Good. At this inspection the service remained Good.

The service was safe. Staff showed a good knowledge of safeguarding procedures and were clear about the actions they would take to protect people. People were kept safe and risk assessments had been completed to show how people were supported with every day risks. Recruitment checks had been carried out before staff started work to ensure that they were suitable to work in a care setting. There were sufficient numbers of staff on duty. People's medication was well managed and people received their medication as prescribed.

The service was effective. Staff had been offered training to help ensure they had the skills and knowledge required for their role as a care worker. They also received regular support and felt well supported by management.

People were supported to be able to eat and drink sufficient amounts to meet their needs and were provided with choice at each mealtime. We saw that appropriate assessments had been carried out where people living at the service were not able to make decisions for themselves; to help ensure their rights were protected. People were supported to maintain good healthcare and had access to a range of healthcare providers such as their GP, dentists, chiropodists and opticians. The service kept clear records about all healthcare visits.

The service was caring. People had agreed to their care and had been asked how they would like this to be provided. They were treated with dignity and respect and staff provided care in a kind, caring and sensitive manner. Meetings had been held for the people living at the service, relatives and for the staff. People felt listened to and that their views and opinions had been sought and the service had made appropriate improvements.

The service was responsive. Detailed assessments had been carried out and care plans were developed around people's needs and preferences. The service had a detailed complaints procedure in place which

was clearly displayed. This provided information on the process and the timespan for response.

The service was well-led. Staff, relatives, healthcare professionals and those living at the service spoke positively about the registered manager and felt the service was well managed. There were systems in place to regularly assess the quality of the service and that people were kept safe.

## 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 remains Good

### Is the service effective?

Good ●

The service remains Good

### Is the service caring?

Good ●

The service remains Good

### Is the service responsive?

Good ●

The service remains Good

### Is the service well-led?

Good ●

The service remains Good

# Leatherland Lodge

## **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.

The inspection was an unannounced comprehensive inspection and took place on the 08 and 14 March 2017. The inspection was undertaken by one inspector.

Before the inspection we reviewed the information we held about the service. This included notifications, which are documents submitted to us to advise of events that have happened in the service and the provider is required to tell us about. The provider also completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan what we were going to focus on during our inspection.

During our inspection we spoke with the registered manager, deputy manager, and six members of the care team. During the course of the day we spoke with six residents and three visitors for their views about the service and where possible we have added their comments within the report.

Not everyone who used the service were able to communicate verbally with us. Due to this we observed people, spoke with staff, reviewed records and looked at other information which helped us to assess how their care needs were being met. We spent time observing care in the communal areas and also the dining room.

As part of the inspection we reviewed four people's care records. This included their care plans and risk assessments. We looked at the files of two new staff members, which included their support records. We also looked at a sample of the service's policies, their audits, the staff rotas, complaint and compliment records, medication records and training.

# Is the service safe?

## Our findings

At this inspection we found the same level of protection from abuse and risks to people's safety as at the previous inspection, and the service's rating continues to be Good.

People living at the service and their visitors all reported that the home was a safe and caring place to be. One relative added, "We know we can leave [person's name] and have confidence that they will be safe."

The registered manager had a good understanding of how to safeguard people and was aware of the correct procedures to follow. Staff we spoke with knew what action to take if they had any concerns and how to protect people from abuse and avoidable harm. All care staff had completed training and were aware of their responsibilities. The service also had contact numbers within the foyer and also the staff room which advised staff on who they could contact if they needed advice or wished to report anything. The service had systems in place to help protect people from potential harm and included a whistle blowing procedure for staff.

People's care plans included assessments of risks and how these could be reduced to help keep people safe. People were supported to take risks and were seen being encouraged to make choices and decisions during their daily lives. Systems were in place to record and monitor incidents and accidents and these had been regularly monitored and reviewed by the registered manager and provider.

The service was in the process of developing further awareness for staff around pressure care and prevention. Paperwork should have been completed daily to ensure people's pressure equipment was set at the correct pressure for each person's weight, but during a recent audit completed by management it was identified that documentation had not always been completed and some mattress settings were not correct. Due to this the registered manager had arranged further training for pressure care with the lead district nurse. The deputy manager had also arranged to speak with staff to ensure they were aware of the correct procedures to follow and how to complete documentation. On the day of the inspection only one person had a pressure sore which was being treated by the district nurses and no other concerns were raised. Since our inspection we have received written confirmation that all care staff have now completed refresher training on pressure care and audits have shown that these are now correct.

Regular checks had been completed to help ensure people lived in a safe environment. The service employed a maintenance person and the premises and equipment had been monitored and well maintained. All checks and inspections of equipment had been completed with records and certificates available to confirm this.

The registered manager had systems in place to monitor people's level of dependency and to identify the number of care staff needed to provide people's care. The registered manager recognised that assessing staffing levels was an ongoing process and during our inspection we noted that there were sufficient care staff available to meet people's individual needs. People were seen to be well supported and we saw good examples from care staff where people were provided and assisted with care promptly when they needed it.

The registered manager had also arranged for extra assistance from a local college and through volunteers visiting the service and assisting the activities co-ordinator or just spending one to one time with people. Those volunteers spoken with stated they had found this a good opportunity to work within a care setting and felt the experience was 'invaluable'.

The service followed correct recruitment practice and ensured checks had been completed on all new staff. We viewed the files of the last two recruited staff and these contained the required documentation. The service also had a probationary period in place and a disciplinary procedure, which could be used when there were concerns around staff practice which would help to keep people safe.

People had received their medicines safely and as prescribed. Medication had been administered, stored safely and recorded in line with the service's medication policy. Regular audits had been completed and staff had attended regular training and received six monthly competency checks. Records of medicines that had been destroyed or returned to the pharmacy when no longer required had been kept, which helped to ensure that all medicines could be safely accounted for. The lunch time medication round was observed and the person in charge followed good practice and no concerns or anomalies were noted.

## Is the service effective?

### Our findings

At this inspection we found staff had the same level of skills, experience and support to enable them to effectively meet people's needs as we found at the previous inspection. People continued to have freedom of choice and were supported, where appropriate, with their health and dietary needs. The service's rating continues to be Good.

Newly recruited staff had completed an induction and this included information about the running of the service and guidance and advice on how to meet people's needs. New care staff had completed the Care Certificate, which is a recognised qualification and induction into care. Staff who had recently completed their induction stated that they had found it useful and that it had provided them with the knowledge and skills they needed in their role as a carer.

Staff had received support through one to one sessions, meetings and appraisals and received supervision in line with company policy. Staff confirmed they met regularly with the care team managers and added that felt supported by the management and could ask for support and advice at any time.

There was a continual training programme available for all staff and training was closely monitored by the registered manager to ensure it was both up to date and relevant. Staff we spoke with confirmed they had received regular training and felt they had the knowledge and skills to carry out their role and responsibilities as a care worker. They had also been provided with specialist training relevant to the people they provided care and assistance to. The service had arranged for all staff within the company to complete the Gerontology Test (GERT). This is a specialised suite and equipment which helps people to understand what it would be like to live with a number of conditions such as dementia, Parkinson's and a visual impairment. It helps the person to understand how coordination, vision and general mobility can be affected when living with these conditions. Staff that had completed this training were very complimentary and felt it gave them hands on experience on what it is like to live with these conditions.

People who lack mental capacity to consent to arrangements for necessary 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 staff were working within the principles of MCA and DoLS. We found the registered manager had a good understanding of MCA and DoLS and had made appropriate referrals. Staff we spoke with demonstrated an awareness of the MCA and DoLS and confirmed they had received training. This showed that staff had up to date information about protecting people's rights and freedoms. People's capacity to make day to day decisions had been assessed to help ensure they received appropriate support. The provider had introduced a new 'consent to care' form which was to be completed as part of the assessment process; but it was noted that the new form did not have space for the person to sign. This was pointed out to the registered manager who confirmed they would ensure that this was discussed with all new admissions and ensure it was signed where possible.

People were supported to have sufficient to eat and drink and maintain a balanced diet. Biscuits, fruit, juice



and sweets were available for people to help themselves. People's nutritional requirements had been assessed and their individual needs had been documented and this included their likes, dislikes, dietary or cultural needs. There were nutrition and weight charts in place to enable care staff to regularly monitor people and where risks had been identified or where people required assistance from a nutritionist or healthcare professional this had been gained.

We completed an observation of a lunchtime meal and found the food looked very appetising, was hot and people had been offered choice. There was a good selection on the four week menu and this included a full English cooked breakfast twice a week. Feedback on the food included, "The food is good and there is always enough to eat" and, "The food is brilliant. The cooks are brilliant. I have had two dinners and two afters. I always get a choice; they will always do an omelette if I want one." A relative added, "The food is very good. I think [person's name] has actually put on weight since they have been here." A trolley was taken round after the main meal with a selection of desserts for people to choose, this made it easier for those who needed visual assistance with choice. At lunchtime, all staff within the service helped with meals and assisted those who needed some prompting or extra help. The registered manager was in the process of working with all staff who helped with meals to ensure this was a positive experience for people and staff were aware of any risks or special assistance needed. The service also had regular visits and input from the provider's dementia team who observed meal times and ensured both staff and people who used the service got the support and equipment needed.

People had been supported to maintain good health and had access to healthcare services and received ongoing support. Referrals had been made to other healthcare professionals when needed and this showed that staff supported people to maintain their health whilst living at the service. One person advised that they had been very ill and were very impressed that the service had recognised this and contacted the ambulance so they could get the treatment they needed. They added, "It makes me feel very safe here and I get the health care I need."

## Is the service caring?

### Our findings

At this inspection we found people were as happy living at the service as they had been during our previous inspection. The service's rating continues to be Good.

People were seen to be relaxed with staff and were given the time and support they needed. Care was provided with kindness and compassion and people had regular contact from staff during our inspection to ensure they did not need anything and were comfortable. People were observed with care staff and they showed through their body language that they were happy and comfortable with the care being provided. Staff were seen responding to people's needs quickly and they were kind and caring in their approach. Feedback included, "I am happy with the care I receive" and, "All the staff are very approachable and I get the help and care I need."

The service had named staff who were identified as 'champions' in specific areas of care. These included pressure area care, end of life, infection control, dementia and diabetic care. This provided staff with extra support and information if they needed assistance with people's care and improved their understanding of these care needs.

We saw that people's privacy and dignity was respected. Care staff were polite and courteous and were observed knocking at doors before entering. Staff knew the people they were looking after very well and we heard them addressing people in an appropriate manner; clearly choosing the most appropriate form of address by either using their first name or with a more formal 'Mr or Mrs.' The service also had details of 'people's history' on their bedrooms doors which provided the reader with information about the person, what they liked to be called, details of family and general past history. These were very useful to the reader to introduce the person, provide topics for conversation and also make the person 'an individual with a previous life.'

The service also had 'Resident of the Week' system in place. This was where details of one resident was shared with people and relatives in the form of a display with photos and information about them. This was done with the person's consent and the present 'resident of the week' on display advised people of four poems this person had written and had published. The registered manager had printed off copies so that people could read these. This was changed to another person the following week. One relative added, "This is a great way to find out about the people who live here and what their lives were like before they came to Leatherland."

People were encouraged to be part of their care and the care staff were observed providing support and encouragement when needed. Each person living at the service was clean, tidy, dressed appropriately for the weather and looked comfortable. One visitor showed us three photos of their relative sitting in their chair looking very relaxed and at home. They added, "Does this look like a bad home? I think this says it all, they are so happy." Another added, "I am really impressed. I have been sitting here watching and the staff are very good. It is a lovely home." Regular relative and resident meetings had taken place which provided people with an opportunity to feedback on the service and also be kept up to date on future events and any

changes.

Where possible people were supported to express their views about their care and support. All the people at the service had relatives involved in their care and regular contact and visits were made. Each person had a document that was called 'About Me' and included details of the key worker, what time the person liked to get up and go to bed, how much assistance the person needed with personal care and what they could do for themselves to help keep their independence. Staff added that they found these really useful as they could provide the care people needed and it enabled them to provide person centred care. The registered manager and care staff added that they did their best to ensure relatives were involved in any reviews and decisions on care, and if someone did not have access to family or friends who could support them, the service would arrange for an advocacy service to offer independent advice, support and guidance to individuals. A relative spoken with stated, "They always get in touch with us if there is an issue. We generally feel [person's name] is safe here and they get the support and care they need."

## Is the service responsive?

### Our findings

At this inspection we found people continued to receive care that was responsive to their needs. The rating of the service continues to be Good.

We found care staff assisted people with their care and were observed being responsive to people's needs. Staff were aware of how each person wanted their care to be provided and each person was seen to be treated as an individual and received care relevant to their needs. They knew people very well and were able to respond to them when they needed support, comfort or care. Examples of this were seen when people became upset or showed anxiety and staff were noticed to spend time reducing people's fears and helping them to relax. Many people chose to sit within the foyer area of the service and during the inspection we could hear people and staff laughing and having general conversation and banter. It was clear people were happy at the service and got on very well with the staff. One person added, "I am happy with the care, they are really good."

People's needs had been fully assessed before they moved to the home. The assessment forms were easy to read and quickly helped to identify each person's needs and assisted the service to identify whether they could provide the care required. Systems were in place to encourage people to be involved in the care planning process where possible. The care plans we reviewed contained a variety of information about each individual person, including their physical, psychological, social and emotional needs. Any care needs due to the person's diversity had also been recorded and when speaking with staff they were aware of people's dietary, cultural or mobility needs.

The service supported people to follow their interests and hobbies and access the local community through day trips and events. The service had its own activities co-ordinator who organised activities in the morning, afternoon and evening. The service had a poster which provided details of what activities, outings or special events would be occurring within each month. During March they had celebrated world book day, tidying the garden, a mini bus trip, St Patrick's day, Comic Relief, Mother's day and a residents meeting had taken place on the 27th to help plan for the next month's activities. Other activities included musical bingo, armchair aerobics, flower arranging, happy hour, arts and craft and movie afternoon. They also arranged regular church services for those who wished to attend.

On the day of our inspection they had a 'food tasting afternoon' which consisted of people trying different cheeses and crackers and giving feedback. People were seen asking for seconds and were very positive about the experience. There were also many photographs around the service of showing parties, entertainment and general outings that people had taken part in. The atmosphere within the service was friendly and laughter and chatting could be heard throughout the day. People we spoke with told us they could join in with the organised activities if they wished, but some preferred to watch the television or stay in their room, which showed that people's individual choices and preferences were respected.

Since the last inspection many of the corridors and communal areas had been redecorated. Areas around the home had their own themes and there were many stimulating pictures and images which assisted those

people living with dementia. This included an area with a London theme, Catherine Cookson Marilyn Monroe and, Charlie Chaplin areas and a library space with a chair and table to be used for some 'quiet time.' There were also areas around the service where people could be interactive and included dusters, brooms, peg bags with pegs. They were in the process of introducing a 'writing area' with pens and stationary for people to use. People had access to keys for their bedroom doors to be locked and had been provided with their own 'door knocker'. People's bedroom door had been painted a colour of their choice, which assisted people in orientation.

The service had effective systems in place for people to use if they had a concern or were not happy with the service provided to them. People had been provided with information on how to make a complaint and this was also displayed within the service. The service had set forms to record details of the any complaints they received and this included how these were investigated and also the outcome. A complaint log was in place so management could identify any trends or reoccurring issues and complaints had been monitored as part of the monthly audit. The management team were seen to be approachable and they listened to people's experiences, concerns or complaints. Care staff stated that they felt able to raise any concerns they had. Relatives spoken with said they would be able to speak with management team if they had any concerns, but added that they were happy with the service and that they had no concerns. One relative added "If I have ever had any concerns I have spoken with them and they have dealt with it."

Compliments the service had received included, "A massive thanks for all you do for mum. What a wonderful job you do" and, "This is our thanks to you. You all do a job that is tiring, but you always have a smile on your faces."

## Is the service well-led?

### Our findings

At this inspection we found the service was as well-led as we had found during the previous inspection. The service's rating continues to be Good.

The registered manager of the service had been in post for a number of years and knew the people and service very well. People told us that the registered manager's door was 'Always open' and both they and the deputy manager were very approachable. There are clear lines of accountability and both the registered manager and staff understood their responsibilities and who they were accountable to. Regular visits from upper management had been made for support and ensuring the company's policies and procedures had been followed.

People received good quality care and the service had a number of systems in place to help monitor the standard of care received. The registered manager was committed to delivering a high standard of care and carried out regular checks and audits such as health and safety, medication and fire systems to ensure people's health and welfare. Where issues had been identified the registered manager had an action and development plan in place to ensure these were rectified within an acceptable timespan.

Staff told us they felt supported and enjoyed working at the service. Regular supervision and staff meetings had been organised and staff morale was very good. Some staff spoken with had worked at the service for a number of years and were very positive about the management of the home. Staff spoken with stated that there was 'good team work' within the service and many chose to do extra hours as they 'enjoyed their job.' The management team had systems in place to help ensure staff were kept up to date with information about the service and the people who lived there and this included staff handover meetings.

Staff were aware of their responsibilities and there was clear accountability within the staffing structure. This meant that people living at the service benefitted from a cohesive staff team, who worked together to deliver good care. The service had clear aims and objectives and also a 'service user's charter', which included dignity, independence and choice. The ethos of the service was made clear to people through the service's aims and objectives and staff had a good understanding of the standards and values that people should expect. One relative stated, "I have always found all the staff genuinely caring towards my [family member] and all the residents. They have the welfare of the residents as their priority at all times. These are my observations when visiting the home. I believe that the ethos cascades from the manager and this plays a big part in the residents care."

People who lived at the service and their representatives had a range of regular opportunities to provide their views about the care and quality of the service. The registered manager was seen speaking with people and relatives during the inspection and advised they had regular interaction. The registered manager knew people very well and had a good understanding of their care needs and them as an individual.

Regular quality assurance questionnaires had been sent to relatives and people who used the service to gather their views and opinions. Information from these was collated and an action plan produced where

issues had been raised. Meetings had occurred with people who lived at the service and their relatives which showed they had been included in feedback on the service. Comments from relatives included, "They have been very good. We have been given all the information we need and [person's name] has settled in very well," "I have no worries at all, especially the manager, she is brilliant" and, "The staff here are lovely, they are always trying to improve things."

The service used an independent web site for care services where relatives and visitors can add comments and rate the service. Leatherland Lodge had received 8 reviews and scored a rating of 4.5 out of 5. Positive comments around activities, accommodation, management, care/support, food/drink and being treated with dignity were noted. Comments people had made included, "Overall the home is very friendly and well run and very comfortable for the residents" and, "I have been very satisfied with the care and attention which my father has received whilst at the home. The staff are very caring to the people in their care. They are very friendly, helpful and efficient. The home is clean, light and homely and managed very well. They encourage residents to get involved in any activities planned". Another comment included, "Since being relocated to Leatherland Lodge in July of this year, we have noticed a dramatic change in my mother's well-being and all-round general demeanour for the best. The quality of care has in my opinion improved and my mum seems to have settled into her new environment quite effortlessly. The staff have all been wonderful on so many levels and do continue to provide all round care for mum day in and day out. This is an excellent establishment and would highly recommend it all."