

RRC (GB) Ltd

Restoration Residential Care Home

Inspection report

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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

About the service

Restoration Residential Care Home is a residential care home providing personal care to up to four people in one adapted building. The service provides support to people with mental health needs. At the time of our inspection there were four people using the service.

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

People were safe at the service. Staff knew how to safeguard people from abuse. Staff managed risks to people's safety and wellbeing and understood what action to take to help keep people safe. The service was clean and hygienic. Staff followed current infection control and hygiene practice to reduce the risk of infection. The provider carried out regular health and safety checks of the premises and equipment to make sure these were safe. Medicines were managed safely. People were supported to take their medicines as prescribed.

There were enough staff to support people and meet their needs. The provider carried out recruitment and criminal records checks to make sure staff were suitable to support people. Staff were provided training to help them meet people's needs. Staff were well supported and encouraged to learn and improve in their role. Staff enjoyed their work and supporting people using the service.

People were involved in planning their care and could state their choices for how this was provided. People's records reflected their needs and preferences. Staff knew people well and understood how their needs should be met. The provider checked with people at regular intervals that the care and support they received was continuing to meet their needs and sought their views about how the service could be continuously improved.

Staff supported people to manage their healthcare and medical conditions and made sure people could access support from healthcare professionals when needed. Staff encouraged people to eat and drink enough to meet their needs and to maintain a healthy diet.

People were satisfied with the care and support they received from staff. Staff were kind and treated people well. They respected people's right to privacy and to be treated with dignity. People were encouraged to be as independent as they could be with daily living tasks. 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 were supported to undertake activities that reflected their interests and preferences. Relatives and friends were free to visit people without any unnecessary restrictions. The service had been designed and decorated to meet people's needs and people had a choice of comfortable spaces to spend time in.

The service was managed well. The registered manager was experienced, understood how people's needs

should be met and had oversight of the service. They undertook checks at regular intervals, to monitor, review and improve the quality and safety of the service.

There were systems in place to investigate accidents, incidents and complaints and people to be involved and informed of the outcome. The provider worked proactively with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 6 January 2021). We did not look at all the key questions at the last inspection and as such an outstanding breach of regulation from a previous inspection (published 24 March 2020) remained. The provider had completed an action plan to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulation.

Why we inspected

This inspection was prompted by a review of the information we held about this service and to follow up on action we told the provider to take at a previous inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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?

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 ●

Restoration Residential Care 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 (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 team consisted of one inspector.

Service and service type

Restoration Residential Care Home 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. Restoration Residential Care Home 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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 three people using the service and asked them for their feedback about the service and the care and support they received. We also observed interactions between people and staff to understand people's experiences. We spoke with the registered manager and a care support worker. We reviewed a range of records. This included two people's care records, medicines administration records (MARs), two staff recruitment files, staff training and supervision information and other 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. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe at the service. One person said, "I like living here. I don't want to live anywhere else. I feel safer here." Another person told us, "I like it here. I feel safe."
- Information was clearly displayed at the service for people and staff about how to report concerns about abuse and how these would be dealt with.
- Staff received relevant training to help them safeguard people from abuse. They knew how and when to report concerns to the appropriate person or authority.
- The registered manager understood their responsibility to liaise with the local authority and other relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- Staff supported people to stay safe at the service. People's records contained current information about identified risks to their safety and wellbeing and the measures staff should take to manage these risks and keep people safe.
- Staff understood risks to people and gave us examples of the action they took to support people to stay safe.
- Senior staff undertook regular health and safety checks of the premises and dealt with any issues arising from these. Safety systems and equipment used at the service were maintained and serviced at regular intervals to make sure these remained in good order and safe for use.
- Staff had received training to deal with emergency situations if these should arise at the service.

Staffing and recruitment

- There were enough staff to support people. Staff were present and provided appropriate support and assistance to people when this was needed.
- The provider had an 'on call' system which meant a senior manager was always available to provide advice and support to staff on duty at evenings and weekends, if this was needed.
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure only those suitable were employed to support people. This included checks with the Disclosure and Barring Service (DBS) who provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines safely and as prescribed. One person said, "They (staff) make sure I take

my medicines."

- People's records contained information about their medicines and how staff should support them to take them in a timely and appropriate way. People consistently received the medicines prescribed to them. Medicines had been stored safely and appropriately.
- Senior staff audited medicines stock and records at regular intervals and checked staff's competency to make sure they were managing and administering medicines safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- Staff had completed food hygiene training and followed correct procedures for preparing and storing food.

Visiting in care homes

- The provider made sure visiting arrangements at this service were in line with government guidance.

Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- Staff understood when and how to report and record accidents and incidents to senior staff.
- The registered manager investigated accidents and incidents and made sure action was taken to reduce the risk of these reoccurring. Learning from investigations was shared with staff, to help them improve the quality and safety of the support provided.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The provider made sure people's care and support needs could be met by the service. They undertook assessments of people's needs prior to them using the service to make sure these could be met and delivered in line with current practice, guidance and the law.
- People and others involved in their care, participated in these assessments. The provider obtained information about people's life and medical history, healthcare conditions, their care needs and the outcomes they wished to achieve with support from the service. They used all this information to plan and deliver care and support people required.
- People had been able to state their choices about how and when support was provided and this information had been included in their care and support plan.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet people's needs. Staff were required to update their training and attend refresher courses to help them continuously apply best practice.
- Staff received support in the form of supervision and appraisal at regular intervals to support them in their role and to identify any further training or learning needs they had.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported by staff to eat and drink enough to meet their needs.
- Staff supported people to plan menus that reflected their individual preferences. Staff understood people's specific dietary needs and preferences and took this into account when planning and preparing meals.
- We saw people were supported by staff to make choices about what they wanted to eat. Staff encouraged people to make healthy food and drink choices where this was appropriate.
- Staff checked people were eating and drinking enough to meet their needs. When they had concerns about this, they sought support from the relevant healthcare professionals and acted on any recommendations they made.

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People were supported to stay well. People's records contained current information about the support they needed to manage their health and medical conditions.
- Staff understood people's conditions and how they needed to be supported with these. They worked with

healthcare professionals involved in people's care and followed their recommendations to help people achieve positive outcomes in relation to their physical and mental health needs.

- People had regular reviews with the mental health professionals involved in their care. Outcomes from these meetings were reviewed by the provider for any changes needed to the support people required.
- The provider made sure people's medicines were reviewed at regular intervals by their GP and the specialist healthcare professionals involved in their care to check these remained appropriate and safe for people.

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

- The design, decoration and layout of the service was meeting people's needs. People's bedrooms had been individualised and reflected their hobbies and interests.
- There were comfortable spaces where people could spend time when not in their room including the communal lounge, the dining room, kitchen and the garden.

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

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider undertook assessments of people's capacity to make and consent to decisions about specific aspects of their care and support. There were processes in place where if people lacked capacity to make specific decisions the provider would involve others involved in people's care and healthcare professionals to ensure decisions would be made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were regularly reviewed to check that they were still appropriate.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our inspection in November 2019 we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity; respecting and promoting people's privacy, dignity and independence

At our inspection in November 2019 we found the service did not always treat people well and respect their privacy. The systems in place to ensure staff were working to protect people from potential discrimination were inadequate. This was a breach of regulation 10 (Dignity and respect) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 10.

- People were now looked after well by staff. One person told us, "[Registered manager] looks after me very well and we get on very well together." Another person said, "My relationship is fine with the staff and I like them...they're kind and nice." Another person told us, "I feel part of a family."
- We spent time observing people interacting with staff. People were relaxed and comfortable with staff and did not hesitate to ask for their support when they needed this, which staff were quick to provide.
- Conversations between people and staff were warm and friendly. Staff were respectful when talking to people, listened to what people had to say and responded in an appropriate way.
- Staff were kind and caring when supporting people and did not rush them. People could take as long as they wanted when undertaking tasks or doing activities.
- People's right to privacy was respected. People could spend time alone in their rooms and staff did not enter people's rooms without seeking their permission first. One person said, "The staff are good and nice. I get time to myself when I want it."
- Staff prompted people to do as much as they could and wanted to do for themselves. A staff member told us how they had been encouraging one person to become more independent when being supported with their personal care needs and the person could now do some aspects of this safely.
- People's specific wishes in relation to how their social, cultural and spiritual needs should be met were recorded in their care records so staff had access to information about how people should be supported with these. A staff member told us how one person enjoyed listening to music and watching television shows that reflected their cultural heritage and ethnic background, so they made sure these were on for the person to enjoy whenever they wanted.
- Staff received equality and diversity training as part of their role. This helped staff understand what discriminatory behaviours and practices might look like to help them make sure people were always treated

fairly.

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

- People had been supported to express their views and be involved in making decisions about the care and support they received. People's care plans reflected their individual preferences.
- Staff obtained people's feedback at regular intervals to make sure the care and support they received was continuing to meet their needs.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people's needs were met through good organisation and delivery.

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

- People had choice and control about how they received care and support from staff.
- People's records informed staff about how their care and support should be provided. This included information about their likes and dislikes, their preferred routines and how they wished to spend their day.
- Staff understood people's needs and told us how they provided care and support to people in the way they preferred.
- Staff recorded the care and support they provided to people which helped the provider make sure people received the care and support planned and agreed.
- The provider prepared regular reports for all involved in people's care, which set out people's progress in terms of their physical and mental health and wellbeing. This helped staff and those involved in people's care, check that the care and support provided was helping people achieve positive outcomes in relation to their physical and mental health and wellbeing.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.
- The provider had made key information available to people in easy to read formats. For example, information had been provided to people about safeguarding, how to make a complaint and the risks associated with COVID-19 and how these could be reduced.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to take part in activities and pursue interests that were important to them.
- People were encouraged to state their preferences and choices about the activities they did and the provider made sure people could do these. This included group outings, for example to a local farm and to go bowling and individual outings to the shops, coffee shop and meals at local cafes and restaurants.
- When people were at home staff supported people to undertake activities to support their wellbeing such as arts and crafts, games and sports such as tennis in the garden.

- People received support to maintain relationships with the people that mattered to them. People's friends and family were free to visit with no unnecessary restrictions.

Improving care quality in response to complaints or concerns

- There were arrangements in place to deal with people's concerns and formal complaints. People had been provided information about what to do if they wished to make a complaint and how this would be dealt with by the provider.
- The registered manager confirmed the service had not received any formal complaints since our last inspection.

End of life care and support

- People were asked about their wishes for the support they wanted to receive at the end of their life. Where people had stated their wishes, this was recorded on their records. This helped to ensure that staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.

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 requires improvement. 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.

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

- Since our last inspection, the provider had continued to maintain and sustain improvements at the service.
- The provider had maintained an effective system of audits and checks to monitor and review the safety and quality of the service. These helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- The registered manager had the skills, knowledge and experience to perform their role, a clear understanding of people's needs and oversight of the service.
- People's feedback during the inspection confirmed staff delivered good quality support consistently.
- Staff were focused on meeting people's needs and helping them to achieve positive outcomes in relation to their care and support. A staff member said, "I love interacting with people. I like the residents and they like me I think. I read everyone's files to get to know them and their needs...I feel like I've made a difference."
- The registered manager understood and demonstrated compliance with regulatory and legislative requirements.
- The registered manager gave honest information and suitable support, and applied duty of candour where appropriate.

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

- The registered manager instilled a culture of care at the service that valued and promoted people's individuality, protected their rights and enabled them to develop and flourish.
- The registered manager worked directly with people and led by example. People knew the them well and engaged with them happily. The registered manager was kind and respectful with people. They took a genuine interest in what people and staff had to say.
- Staff felt respected, supported and valued which supported a positive and improvement-driven culture. Staff felt able to raise concerns without fear of what might happen as a result.
- People's feedback and views about the service was sought by the provider. This was used to plan how the service could be improved for them. For example, based on recent feedback from people, activities had been planned based on people's preferences for these.

- Staff were provided opportunities to give their feedback about how the service could be improved and help people achieve positive outcomes.

Working in partnership with others

- The provider worked effectively with a range of healthcare professionals involved in people's care and support. They acted on their recommendations and advice to plan and deliver care and support that met people's needs and helped them achieve positive outcomes in relation to their safety and wellbeing.