

Methodist Homes Ryelands

Inspection report

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Date of inspection visit:
08 November 2022

Date of publication:
06 December 2022

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

Ryelands is a residential care home providing personal care to up to 50 people. The service provides support to older people, some of whom are living with dementia. At the time of our inspection there were 47 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 and keep them safe from identified risks to their safety and wellbeing. There were enough staff to support people and meet their needs. Recruitment and criminal records checks were carried out on staff to make sure they were suitable to support people. Health and safety checks were carried out of the premises and equipment to make sure they were safe. The premises was clean, tidy and hygienic. Staff followed infection control and hygiene practice to reduce the risk of infections.

People were involved in planning and making decisions about their care and support. People could state their preferences for how their care and support was provided. Staff received relevant training and supervision to help them meet people's needs. Staff were well supported and encouraged to put people's needs and wishes at the heart of everything they did.

People were supported to stay healthy and well. Staff helped people to eat and drink enough to meet their needs. They made sure people took their prescribed medicines in a timely and appropriate way. Medicines were managed safely. Staff supported people to manage their healthcare and medical conditions. They made sure people could access support from healthcare professionals when needed. The service worked with other healthcare professionals to ensure a joined-up approach to the care and support people received.

People were treated well at the service. People's feedback indicated staff delivered good quality support. Staff supported people in a dignified way which maintained people's privacy and independence. 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 were supported to participate in activities and events at the service. People told us, although they enjoyed these, they would like to do more. The provider was already taking action at the time of this inspection to improve this aspect of the service for people. Relatives and friends were free to visit people without any unnecessary restrictions. There were a range of comfortable spaces around the premises for people to spend time in. The provider planned to refurbish and redecorate the service in the coming year and people's views had been sought about how these plans should reflect their needs and preferences.

The service was managed well. The registered manager was experienced and had a clear understanding of how people's needs should be met. They undertook audits and checks at regular intervals, to monitor,

review and improve the quality and safety of the service. The provider undertook their own checks of the service at regular intervals to make sure the service was meeting required standards.

There were systems in place to obtain feedback from people, staff and others about how the service could be improved. Accidents, incidents and complaints were fully investigated and people were informed of the outcome.

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

Rating at last inspection

The last rating for this service was good (published 21 December 2017).

Why we inspected

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

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 ●

Ryelands

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

Two inspectors and an Expert by Experience carried out this inspection. 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

Ryelands 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. Ryelands 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 they were registered. We sought feedback from the local authority and professionals who work with the service. 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 10 people using the service, 4 relatives and a visiting chaplain. We asked them for their views about the safety and quality of care and support provided to people at the service. We observed interactions between people and staff to understand people's experiences. We spoke with the senior staff team which included the registered manager, deputy manager and 2 area managers. We also spoke with 2 care support workers, the office administrator, the laundry assistant, the maintenance person and the chef. We reviewed a range of records. This included 5 people's care records, records relating to medicines management, 3 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. 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 feel safe. The staff are always close by." Another person told us, "I feel safe here. It is because the building is secure and the number of staff." Another person said, "I do feel safe. There are always plenty of staff about."
- Staff received training to help them safeguard people from abuse. They knew what signs to look for that may indicate abuse and how and when to report their concerns to the appropriate person or authority.
- The registered manager understood their responsibility to liaise with the local authority and other relevant agencies when a safeguarding concern was reported to them.

Assessing risk, safety monitoring and management

- Staff supported people to stay safe at the service. The provider had assessed risks to people's safety and wellbeing and had plans in place for staff to manage these risks.
- People were informed about the risks to their safety and wellbeing and the action staff would take to manage these risks to keep them safe. One person said, "They are very good at explaining everything." A relative told us, "I have had detailed conversations with staff about risks with [family member]."
- Staff were vigilant when people were moving around the service or undertaking activities and made sure people remained safe. One person said, "I use a walker and they always supervise me walking." A relative told us, "[Family member] is mobile and everyone pays attention to what she is doing and they keep the areas secure so they can be confident of where she is."
- The provider made sure there were health and safety checks of the premises at appropriate intervals. Safety systems and equipment were maintained and serviced at regular intervals to make sure these remained in good order and safe for use.
- During our inspection, due to heavy rain, we saw water coming through a ceiling in a corridor on the first floor of the home which was a potential hazard to people. Senior staff were already aware of this and emergency maintenance and repairs were undertaken whilst we were on site to stop the leak and make the area safe for people.
- 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 and meet their needs. One person said, "They do seem to have enough staff." Another person told us, "Yes, there are lots of staff." Another person said, "Yes, I think they have taken on more staff." A relative told us, "They went through a bad patch but it seems really good now."
- Staff were present and provided support and assistance when this was needed. One person said, "They are always there when you need them." A relative told us, "There is always someone within call."

- The registered manager reviewed staffing levels at regular intervals to make sure there were enough suitably skilled staff to meet people's needs.
- The provider operated safe recruitment practices. They carried out checks on staff that applied to work at the service to make sure only those suitable were employed to support people.

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.

Using medicines safely

- People received their medicines safely and as prescribed. One person said, "Sometimes I have pain and they notice and bring me painkillers."
- Staff could only administer medicines to people if they had received the relevant training to do so. Senior staff checked their competency to make sure they were managing and administering medicines safely.
- Medicines had been stored safely and appropriately. Our checks of stocks and records showed people consistently received the medicines prescribed to them.
- Where people received their medicines 'as required', there was guidance for staff about how and when to administer these so that people received these at the appropriate time.
- Medicines stocks and records were checked and audited at regular intervals. When issues had been identified with staff's practice, action was taken to provide appropriate support to staff to address this.

Learning lessons when things go wrong

- The provider managed accidents and incidents at the service well. There were systems in place for staff to report and record accidents and incidents.
- 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. 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 had systems in place to make sure people's care and support needs could be delivered by the service. Assessments were carried out with people, and others involved in their care, prior to them using the service. This helped the provider obtain the information they needed to plan and deliver the care and support people required.
- Assessments took account of people's medical history, current healthcare conditions, their care needs and the outcomes they wished to achieve from the support provided.
- Information from assessments had been used to develop care plans for people which set out the support they needed. People had been able to state their choices about how and when their care and support was provided.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet people's needs. One person said, "They seem well trained to me and they do always ask if it is ok before doing anything." Another person told us, "I think they are well trained."
- Staff updated their training and attended refresher courses to help them continuously apply best practice when providing care and support to people.
- 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. One person said, "The food is lovely here and there is a choice and good portions." A relative told us, "My [family member] has put on weight since she has been here, which is a good thing. She obviously likes the food and drink and receives the encouragement she needs to eat and drink."
- We observed the lunchtime service and saw people were supported by staff to make choices about what they wanted to eat. Staff were attentive to people's needs, providing appropriate support and encouragement to people to eat their meals. We noted the service was slower in one part of the home. The reason for this was explained to people so they knew why there was a delay.
- We discussed the lunchtime service with the deputy manager who said they would look at ways this could be speeded up so people didn't have to wait too long for their meal.
- Staff understood people's dietary needs and any specialist needs due to their healthcare conditions and took this into account when planning and preparing meals.
- Staff monitored people were eating and drinking enough. When they had concerns about this, support

was sought from the relevant healthcare professionals and staff acted on any recommendations they made.

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

- People were supported to manage their healthcare conditions and needs. Their records contained information for staff on how they should do this. Staff understood people's conditions and how they needed to be supported with these. One person said, "They are always quick to see if there is a problem and they sort me out."
- People's healthcare conditions and needs were discussed and reviewed by senior staff on a weekly basis to help them identify any further support people might need, to help them stay well. Staff made sure people were supported to access healthcare services and healthcare specialists involved in their care when required.
- The service was well supported by healthcare professionals to make sure people received consistent and timely care with their healthcare needs. Senior staff had regular contact with the GP practices supporting people at the service and raised any concerns they had about people's health and wellbeing promptly. The service also had access to the local authority care home support team who provided clinical advice and support to staff when needed. A staff member said, "The care home support team are really helpful and hands on in the service."

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

- The design, decoration and layout of the home was meeting people's needs. One person said, "The home is lovely, very clean and comfortable."
- People's bedrooms had been individualised and furnished to their choice.
- There were a range of comfortable spaces where people could spend time in, including communal lounges, dining rooms, the library, the conservatory and the garden in warmer months.
- There was signage around the premises to help people identify and locate areas such as the lounges, dining room or toilet.
- The registered manager told us a refurbishment programme for the service was planned for March 2023. This would include refurbishment and redecoration of communal areas including lounges, dining rooms, bathrooms, the kitchen and the garden. New furniture would also be purchased for the service. People and relatives had been asked for their feedback about the planned changes to ensure their needs and preferences would be reflected in the planned redesign and redecoration of the home.

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 last inspection we rated this key question good. The rating for this key question has remained 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

- People were looked after well by staff. One person said, "The staff are lovely. You couldn't wish for better." Another person told us, "They are really nice. I think they care about us." A relative said, "The staff here are wonderful. They know the residents inside out and know how each one should be treated." Another relative told us, "They are lovely to my [family member] and she is responding, getting to know and like them."
- We spent time observing people interacting with staff. People were relaxed and comfortable with staff. Staff knew people well. They greeted people warmly and asked how people were and what their plans were for the day. Conversations between people and staff were friendly and cheerful.
- Staff were kind and patient when supporting people. People were not rushed and could take as long as they wanted, eating their meals, doing activities, talking to others and when moving around the home.
- 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 understood how people should be supported with these. A Methodist chaplain visited the service 3 times a week to provide pastoral care and support to people. The chaplain told us some people at the service practiced different faiths so they helped people find appropriate spiritual support if they wanted this.
- Staff received equality and diversity training as part of their role. This helped staff 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.
- People's care records reflected the choices and decisions they had made about how their care and support was provided. One person said, "We have had discussions about my needs and they do try to do what I want, the way I want it."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity. Staff were respectful, listened to people and responded to people's requests in an appropriate way. One person said, "They are wonderful, they always know the answers to my questions."
- Staff made sure people were clean and dressed appropriately for the time of the year.
- People's right to privacy was respected. Staff made sure people could spend time alone in their rooms and did not enter people's rooms without seeking their permission first.
- Personal care was carried out in the privacy of people's rooms or in bathrooms and staff sought people's consent before carrying out any care. One person said, "They seem to know what they are doing and they

always check before acting." Another person told us, "They always ask if they can go ahead."

- Staff prompted people to do as much as they could and wanted to do for themselves. People's records contained information about their level of independence in the key tasks of daily living and the support required from staff where people could not manage these by themselves. Staff only helped when people could not manage and complete tasks safely and without their support.

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. 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 wanted to receive care and support from staff.
- People's records informed staff how people's 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 how these should be met. A relative said, "I am totally involved in [family member's] care and the staff here really know and understand [family member]. Another relative told us, "They are quite exceptional in their understanding of my [family member's] needs."
- 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.
- People's care and support needs were reviewed at regular intervals to check this was continuing to meet their needs.

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.
- Information at the service could be adapted to meet people's specific communication needs. For example, information could be made available in large print if this was required.

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 encouraged and supported to take part in activities and events at the service.
- There was a weekly programme of activities such as quizzes, light exercises and arts and crafts. There were specialist clubs for arts and crafts and knitting that met on a regular basis. The service had regular visitors including, musical entertainers, a yoga teacher and a music therapist. There was also an interactive play and story time session facilitated by an external organisation where preschool children visited with people and together they participated in interactive story telling sessions.
- People's feedback indicated, although they enjoyed the majority of activities, they would like a wider range of activities to take part in at the service. They also wanted more outings in the community.

- We discussed people's feedback with the registered manager. They told us they were already aware of the need to improve the range of activities further and had recently recruited a new activities coordinator to facilitate this. They said outings would recommence soon as the service's dedicated minibus would soon be operational again to enable this.
- People's friends and family were free to visit with no unnecessary restrictions.
- When friends and family were unable to visit, staff made sure people could still maintain contact with them through, for example, video and telephone calls.

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. One person said, "I have had no reason to complain but I know how." Another person told us, "I would certainly complain if I needed to. But I have nothing to complain about."
- When people had raised concerns and complaints we saw these were dealt with appropriately by the service.

End of life care and support

- People were supported to state their wishes for the support they wanted to receive at the end of their life. This was recorded in their records. This helped to make sure staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.
- Where this was appropriate, 'do not attempt resuscitation' orders (DNARs) were in place and records showed people and those important to them had been consulted.

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 good. The rating for this key question has remained 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

- The registered manager promoted a culture at the service that valued people's individuality, protected their rights and enabled them to develop and flourish. They encouraged and supported staff to put people's needs and wishes at the heart of everything they did.
- The registered manager and senior staff team were available and accessible to people, visitors and staff. People told us they felt comfortable speaking to the registered manager and senior staff if they had any questions or concerns.
- Staff told us they were well supported by the registered manager and they could approach them with any issues they had.
- People's feedback and views about how the service could be improved were sought. For example, people's feedback about the menu had been sought to help the provider improve the mealtime experience for people.
- Staff were provided opportunities through supervision and staff meetings to give their feedback about how the service could be improved and help people achieve positive outcomes.

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

- People said the service was managed well. One person said, "I think it is well managed. Things happen when they are supposed to and we know who to talk to if we want something." Another person told us, "First class! Nothing gets by [registered manager]. I have real confidence in the management." A relative said, "Very well managed. A well-oiled machine."
- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs.
- They had oversight of the service. They used governance systems to monitor and review the safety and quality of the service and took action when needed to address any gaps or shortfalls at the service. This helped to ensure people were safe and experienced good quality care and support.
- The provider undertook their own checks of the service at regular intervals to make sure the service was meeting required standards.
- People's feedback confirmed staff delivered good quality support consistently. One person said, "Very

good. Everything happens when it should." Another person told us, "I think it is very good." A relative had written in recently to the service to say, "Thank you all for your unwavering care for [family member]. It has made all the difference to us to know that he has been in a comfortable home with good care and staff who value him as a person."

- Staff were focused on meeting people's needs and helping them to achieve positive outcomes in relation to their care and support.
- 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.

Working in partnership with others

- The service worked in partnership with a range of healthcare professionals involved in people's care and support.
- The service acted on their recommendations and advice to plan and deliver care and support that met people's needs and help them achieve positive outcomes. The registered manager spoke positively about the local authority care home support team and described their support, particularly during the height of the COVID-19 pandemic, as 'very good' and a 'lifeline' for the service during this difficult period.