

W J Yapp Bequest

Derbyshire House Residential Care

Inspection summary

CQC carried out an inspection of this care service on 08 January 2019. This is a summary of what we found.

Overall rating for this service

Outstanding ☆

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Outstanding ☆

Is the service well-led?

Outstanding ☆

We inspected Derbyshire House Residential Care on 8 January 2019. This was the provider's first rated inspection since its new registration in 2017. The service is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Derbyshire House Residential Care is registered to provide personal care and accommodation for up to 31 adults, including people living with dementia. On the day of our inspection there were 31 people using the service.

A registered manager was in place and was available during the inspection. 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.

The service clearly demonstrated the characteristics of providing excellent care in how it was responsive to people's needs and in the leadership of the service. People were at the heart of the service and staff were clearly committed and compassionate, striving to provide excellent care at all times. The registered manager had developed innovative ways of involving people in how the

service developed and was a part of the local community.

People received care that respected their privacy and dignity. Staff were knowledgeable about people's needs, routines and preferences and encouraged independence. Staff were also aware about people's social history and pastimes, and the significance and importance of this in how people spent their time. Staff were compassionate and highly committed to their work and went above and beyond in providing good quality care.

Information about independent advocacy services was available. The service also employed an independent person referred to as a 'worry catcher' who visited people to act as an independent advocate. This role had extended to include a staff member employed within the service.

Staff had information to support them to understand people's needs, preferences and diverse needs. People received excellent opportunities to participate in a variety of social and recreational activities and opportunities. These included activities important to people and supported interests and hobbies. The service had many animals that lived at Derbyshire House Residential Care and people enjoyed their company and got great comfort and joy from their presence. People received opportunities to participate in their local community. The registered manager had also developed positive links with organisations and encouraged and welcomed their contribution and involvement in the development of the service.

People received excellent end of life care where they were fully supported in how they received care and support at the end of their life. People's wishes were respected and met, staff showed great compassion and respect in how they provided care at the end of a person's life. The service followed the Gold Standard Framework in end of life care and had been recognised by external healthcare professionals for their continued commitment in providing excellent end of life care. The service also had a commitment in providing excellent care to people living with dementia. Great thought and care had been given to providing a stimulating living environment that enabled people to reminisce. Staff had completed specific training in dementia care by a well-recognised training organisation and had fully embraced the culture and approach in how care was delivered.

The provider's complaints policy and procedure had been made available to people who used the service, relatives and visitors. People, relatives, staff and professionals were positive about the service provided and how the registered manager led the service. People received opportunities to feedback their experience of the service and the provider acted to make changes to feedback received. The provider had systems and processes in place that monitored quality and safety, senior leaders visited the service to enable them to have oversight of the service provided.

People were protected from abuse and avoidable harm as far as possible, because staff used the provider's safeguarding policies and procedures to inform their practice. Staff had also completed safeguarding refresher training, to update their knowledge and were clear about their role and responsibilities. Risks associated with people's individual needs, including the environment were assessed, planned for and regularly reviewed. Where accidents and incidents had occurred, the registered manager completed a significant events analysis, to ensure lessons were learned and shared with staff to mitigate further risks.

In response to a clinical commissioning group (CCG) infection control audit in 2018, improvements had been made to the management of the prevention and control of infections. This also included how the service maintained cleaning and hygiene standards. The environment and equipment was found to be clean and staff followed best practice guidance, in the prevention and control of infections.

People were supported by sufficient numbers of staff that were deployed appropriately, to meet their individual needs. This included consideration of staff skill mix and experience. A dependency tool was used to determine the staffing levels required and this was regularly reviewed to ensure staffing levels were flexible and responsive. Additional staff were always provided to support people when they were at the end stage of their life. The provider had robust safe staff recruitment procedures to ensure as far as possible, staff employed were safe to provide care.

People received their prescribed medicines safely. Information used to provide staff with guidance of people's medicines prescribed to be taken 'as required' lacked specific detail. However, the registered manager took immediate action to address this. Staff responsible for administering medicines had received ongoing training and competency assessments, to ensure they continued to manage people's medicines safely.

Recognised assessment tools were used to assess people's needs and reflected current legislation. People's diverse needs were assessed to ensure they did not experience any form of discrimination.

People were cared for by well trained and competent staff. Staff received an induction and ongoing training and support to ensure their knowledge, skills and competency were safe and effective. Staff had undertaken additional training provided by external healthcare professionals who supported people living at the service. Staff were very knowledgeable about people's health conditions, they monitored people's needs and worked effectively with external professionals following any recommendations made to people's care.

People's nutritional and hydration needs were known and understood by staff. People received a choice of meals and drinks. Where people required support with eating and drinking, staff provided this in a positive and caring manner. People's meal time experience was a relaxed and social occasion.

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 involved as fully as possible in their care. Monthly meetings were held with people to review their needs and the care provided.

You can ask your care service for the full report, or find it on our website at www.cqc.org.uk or by telephoning 03000 616161