

Cumbria County Council

# Dentholme

## Inspection summary

CQC carried out an inspection of this care service on 10 December 2018. This is a summary of what we found.

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 ●

This was an unannounced inspection that took place on 11 December 2018. The service was last inspected in May 2016 where there were no breaches in regulation seen and the home was rated as Good. We found at this inspection that the evidence continued to support the rating of good and there was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Dentholme 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.

The care home can accommodate up to thirty eight people across four units, each of which have separate adapted facilities. This home specialises in providing care to people living with dementia. There were eighteen people in residence when we visited. People living in the service are older adults. The home does not provide nursing care.

The home had a suitably qualified and experienced registered manager who had a background in social care and in management. 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 staff team understood how to protect vulnerable adults from harm and abuse. Staff had received suitable training about how to identify any issues and report them promptly. Risk management plans supported people well. Good arrangements were in place to ensure that new members of staff had been appropriately vetted and that they were the right kind of people to work with vulnerable adults. Accident and incident management was of a good standard.

The registered manager kept staffing rosters under review as people's needs changed. We judged that the service employed enough care staff by day and night to meet people's needs. There were suitable numbers of ancillary staff employed in the home.

Staff were appropriately inducted, trained and developed to give the best support possible. We met team members who understood people's needs and who had suitable training and experience in their roles.

Medicines were suitably managed in the service with people having reviews of their medicines on a regular basis. People in the home saw their GP and health specialists whenever necessary. The staff team had good working relationships with local GP surgeries and with community nursing services.

Good assessments of need were in place, and the staff team reviewed the delivery of care for effectiveness. They worked with health and social care professionals to ensure that assessment and review of support needed was suitable and up to date.

People told us they were satisfied with the food provided and we saw suitably prepared meals being served. Simple nutritional planning was in place and special diets catered for appropriately. The registered manager continued to look at arrangements around mealtimes to ensure people had the right kind of support.

We have made a recommendation about the arrangements around supporting people at mealtimes.

The provider had updated and refurbished the building to a good standard in the past. It had suitable adaptations and equipment in place. The house was warm, clean and comfortable on the day we visited.

People were aware of the plans to close the service in 2019 when a new residential home was ready to open. Plans were in place to reassess people's needs and wishes with the support of families and social workers.

The staff team were aware of their responsibilities under the Mental Capacity Act 2005. 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 who lived in the home told us that the staff were caring. We also observed kind and patient support being provided. Staff supported people in a respectful way. They made sure that confidentiality, privacy and dignity were maintained.

Risk assessments and care plans provided detailed guidance for staff in the home. One or two plans needed a little updating so that staff would continue to give care in a planned way.

We have made a recommendation about the need to update care plans prior to people moving to the new home.

Staff could access specialists if people needed communication tools like sign language or braille. There was some signage for people living with dementia.

Staff encouraged people to follow their own interests and hobbies. We saw evidence of regular activities and entertainments in the home.

The service had a comprehensive quality monitoring system in place. People and their families were asked their views in a number of different ways. Quality assurance was used to support future planning.

We had evidence to show that the registered manager and the operations manager were able to deal with concerns or complaints appropriately.

Records were well organised, easy to access and stored securely. Staff had started to archive files in preparation for the move to the new home.

**You can ask your care service for the full report, or find it on our website at [www.cqc.org.uk](http://www.cqc.org.uk) or by telephoning **03000 616161****