

J S. Care Limited

Mellieha

Inspection report

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Tel: 07961769938

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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

Mellieha is a care home providing personal care for up to 11 people with a learning disability and/or mental health needs. The home has increased in size since the last inspection and is now distinctly divided into two houses; the original house and a newly built house named Elmswell. There were 10 people in total living in the home at the time of the inspection. At our last inspection in 2015 we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing 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.

The Registered Provider was working within the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service were supported to live as ordinary life as any citizen.

People were safely cared for because systems and processes underpinned the individual support they needed. Risks were appropriately assessed and mitigated, with each person's full involvement where possible. People were safely and individually supported with their medicines and staff demonstrated good understanding and safe practice for this. Medicines were securely stored.

Staff understood how to safeguard people from harm, and there was a thorough system for recording and learning from accidents and incidents. Premises and equipment were regularly checked for safety.

Staff training and supervision was continuous and staff were very well supported in their role. 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 lead healthy lives and there were effective links with other professionals. People's dietary needs were well met and understood by staff.

Staff respected people's privacy and dignity and there were good opportunities for people to be independent. There was a very friendly, supportive atmosphere and people said they felt well cared for.

Care was person centred and people's individual needs were promoted and respected. Care records showed individual preferences and people chose their own preferred lifestyle.

The provider was very involved in people's care and support and they knew each person well. There was clear effective leadership and teamwork, with good communication at all levels. Audits were in place and regular feedback was sought about the quality of the service. Documentation was securely filed and wherever possible, easy-read formats were produced so people were very well included and informed.

Further information is in the detailed findings below

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 remains Good	Good ●
Is the service effective? The service remains Good	Good ●
Is the service caring? The service remains Good	Good ●
Is the service responsive? The service remains Good	Good ●
Is the service well-led? The service remains Good	Good ●

Mellieha

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 was planned to check 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.

This was a comprehensive inspection. The inspection took place on 7 November 2018 and was unannounced. There were two adult social care inspectors.

We gathered and reviewed information before the inspection such as the provider information return (PIR), notifications about the service and liaison with other agencies, such as the local authority and safeguarding team.

We spoke with four people who used the service, two members of care staff, the registered provider and one visiting professional. We looked at the premises and some people's rooms with their permission. We looked at three care plans, two staff files, training and supervision records and documentation to show how the service was run, such as maintenance records, policies, procedures and audits. Following the inspection we spoke with four people's relatives over the telephone.

Is the service safe?

Our findings

People told us they felt safe. One person said, "I feel very safe here and that's because of the staff." One relative we spoke with told us said "If [my family member] didn't feel safe, I'd know" and another relative said, "Totally safe, which gives me peace of mind."

Staff involved individuals in identifying their individual risks and agreed strategies for their safety. Staff understood the potential environmental hazards, such as the risk of fire and they knew the emergency procedures to follow. Safeguarding procedures were known and staff clearly understood how to keep people safe from harm. The safety of each person was discussed at team meetings so staff were clear about agreed strategies of support, such as with managing behaviour that challenged.

Recruitment procedures were followed and staffing levels were based upon people's individual needs. The registered provider told us staffing levels were reviewed and adjusted according to people's changing needs.

People were supported with their medicines on an individual basis. Medicines were stored securely. Records of medicines were maintained well and staff told us they were confident in the medicines management process.

The home was clean with regular cleaning regimes. People were supported to be involved in their own daily cleaning chores, such as tidying their rooms and doing their laundry. Individual safety features were in place in the premises to mitigate risks to each person. Where people's needs had changed, such as with declining health, the premises had been safely adapted.

Is the service effective?

Our findings

People and relatives told us they thought staff had the right skills to care for them. One relative said the service was exactly the right place for their family member because staff fully understood the support they needed. Staff had good opportunities to complete regular training and they had team and supervision meetings in support of their work and their own well-being. The provider emphasised the importance of supporting all aspects of staff's needs in order for them to be effective in their role.

Detailed assessments of people's needs were carried out and regularly reviewed. People were supported to maintain healthy lifestyles and there was evidence of close working with other relevant health professionals, such as GP, dietician, mental health team. Staff were skilled at recognising potential triggers for people's poor mental health and they reassuringly reminded people about their individual coping strategies. People made individual choices about what they wished to eat and drink and we saw one person had their own cook book.

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 Act 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 with appropriate legal authority. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met. The provider had a clear understanding of the legislation and was working appropriately to ensure people's rights were maintained.

The provider told us they were working to improve the decor in the newly built part of the premises in order to make it more inviting and less stark. They said this was being carefully considered in conjunction with the people who lived there, whilst ensuring any features were appropriate and safe for people.

Is the service caring?

Our findings

People said they felt well cared for at the home and the relatives we spoke with confirmed this view. One person said, "I do like it here, the staff are so good." One relative told us there was a consistent staff team who 'went the extra mile' to ensure their family member was cared for.

Staff we spoke with said they thoroughly enjoyed caring for people at Mellieha and they felt cared for and valued as part of the team. The provider fully promoted support for staff well-being, recognising this as a critical factor in staff delivering high quality care.

We saw many people's rooms were personalised according to their interests and preferences. Communal areas within the main building were suitably furnished and the registered provider was working to ensure the new Elmswell unit had a more welcoming feel.

Staff demonstrated a respectful rapport with people and they knew each person's needs well. Staff were proactive when people needed reassurance and used positive language to promote well being. People were involved in all aspects of their care and support and staff gave good explanations and information about matters affecting them.

People's views were regularly discussed within regular individual meetings and people told us they directed their own care and support.

Is the service responsive?

Our findings

People were involved in planning their day around what they wanted to do individually, such as go to the shops or out to other local places. Staff we spoke with clearly understood the need for individuals to lead their own choice of lifestyle and made every effort to support them to do so. Staff had a very enabling approach to supporting each person, with a personalised programme of support responsive to their needs.

The registered provider told us each person's care was based around their preferences and they facilitated what people wanted to do. People were encouraged to maintain links with their family members and friends, such as through regular visits and telephone calls. We saw some people chose to go out for a meal during the inspection.

People told us they knew about their care plans and gave us permission to look at these. We found these were person centred; care planning was done with each person, and as such their preferred routines, interests and preferences for care were detailed. There was relevant health information for staff to know how to support each person. Regular reviews of people's care took place on an individual basis.

The management team told us how they were working to further develop more meaningful 'easy read' accessible information to help people understand important matters. We saw good evidence of this in risk assessments and care plans and the provider was positive about how they could make the inspection report accessible to people.

Relatives we spoke with said their family members' care was provided according to their individual needs. They spoke very highly about the staff support and said they were assured staff understood their family members very well. One relative said, "They know what they're doing." Another relative said, "[My family member] has done so well here, much better than expected" and another relative said, "I couldn't wish for anything better."

The complaints procedure was available within the home. People and the relatives we spoke with said they would be confident to raise any concerns with the staff and registered provider. Relatives told us they were highly satisfied with the care and they would have no hesitation in approaching any member of staff to discuss any matters.

Is the service well-led?

Our findings

The registered provider was also the registered manager. 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.

There was clear leadership of the service and the well structured management team promoted a positive culture of open communication. Staff understood the ethos of the service as well as their roles and what they were accountable for. Staff told us they were proud to work for the service.

People, relatives and staff were complimentary about how the service was run. One relative said they were partners with the service in support for their family member. The registered provider had a good overview of the needs of the service and how to ensure the quality of care was maintained in line with the regulations. The provider was familiar with the 'Registering the Right Support' guidance.

The registered provider carried out quality audits and sought regular feedback about the service from people, relatives, staff and visiting professionals. Regular maintenance checks were in place for equipment and premises. Staff meetings ensured staff knew what management support was available at all times.

Documentation was clearly filed and securely stored and staff were mindful of confidentiality. We saw the registered provider was fully involved in the care of each person and was visible and present throughout the inspection. The provider empowered the management team and staff to meet the needs of individuals, whilst maintaining a clear oversight of the service. The provider information return accurately reflected the findings of the inspection and there was clear provider insight into the strengths of the service and areas to develop.