

Nestlings Care Ltd

The Annex

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

The Annex is a residential care home providing personal care for up to 2 young people between the age of 16 and 24 years old. At the time of the inspection 2 people resided at the home.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

People lived in a safe environment and received their medication safely. We identified some areas of further development around homely remedies and emergency evacuation plans.

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.

Safe recruitment processes were followed. Staff received on-going training and development to support them in their roles.

People were encouraged to have choice and support was personalised to their wishes. People were encouraged to be as independent as possible in their home and out in the community.

People were encouraged to undertake voluntary work, employment, vocational courses in line with their wishes and to explore new social, leisure and recreational interests. A range of activities were in place to support people's personal and social development.

Right Care:

People were positive about the care and support they received. People were treated with dignity and respect by staff knowledgeable about the person and their support needs.

People were supported to be as independent as possible in the home. Staff knew people well, respectful of them as an individual.

Staff spoke passionately regarding the people they supported and working for the provider.

Right Culture:

People were encouraged to have choice and control of their lives. Staff supported people to be as independent as possible in their homes and out in the community.

The registered manager, senior staff and staff demonstrated a personal-centred culture which focused on meeting people's individual needs.

The registered manager was committed to developing people skills and opportunities to support future independence.

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

Rating at last inspection

This service was registered with us on 06 January 2022 and this is the first inspection.

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.

Recommendations

We have made recommendation that the provider reviews its medication policy, and the registered manager reviews the emergency evacuation procedures at the home.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The Annex

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

This inspection was undertaken by 2 inspectors.

Service and service type

The Annex 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. The Annex 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

We gave the service 1 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We reviewed information we had received about the service. 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 2 people who used the service and 2 relatives about their experience of the care provided. We observed interactions between staff and people living at The Annex. We spoke with 10 members of staff in various roles.

We reviewed 2 people's care records and other records relating to people's care and support. We looked at 4 staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed, including policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Aspects of the environment needed addressing to ensure risks to people were fully mitigated. This related to a worn carpet and ensuring safe evacuation systems in the event of a fire. By day 2 of the inspection, all these issues had been addressed and risks had been mitigated. A replacement carpet had been ordered.

Although prompt actions were taken to ensure any risks to people were sufficiently mitigated, we recommend the registered manager continues to review emergency evacuation systems to ensure that people can exit the building as promptly as possible..

- People needs were appropriately assessed. Care plans and risk assessments were in place which provided guidance for staff on how best to support and protect people from harm.
- Robust plans were in place to support people when expressing emotional distress. The Annex utilised the provider's 'in-house mental health team' which included specialist mental health nurses and occupational therapists to develop care plans with on-going review. This provided strategies for staff to follow to minimise risk to people and keep them safe from harm.

Using medicines safely

- The provider's medication policy did not include information relating to home remedies medication to ensure staff understood their responsibilities in this area. Guidance was available for staff to follow in individual support plans which ensured people received their medicines safely.

We recommend the provider considers best practice guidance and reviews their medicines policy to include home remedy procedures.

- Prescribed medicines were managed safely in line with national guidance. Medicines used regularly were stored in locked cabinets. Medicine administration records were completed accurately.
- Medicines were administered by staff who had been trained and assessed as competent. Medicines records were audited and regularly checked by senior staff.

Staffing and recruitment

- Staffing levels were safe, however we received mixed views from relatives over staffing. Comments included, "There is a high turnover of staff, new staff come, and it creates some inconsistency" and, "There has been some ups and down, staff do a good job."
- We discussed this feedback with the registered manager who shared that recruitment has been on-going and told us they would review the current induction process.

- Safe recruitment procedures were in place and pre-employment checks were conducted before appointing new staff. This included obtaining proof of identity, references and a Disclosure and Barring Service (DBS) certificate. DBS checks help employers make safer recruitment decisions and include a criminal record check.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Systems were in place to protect people from abuse. Allegations of abuse, accidents and incidents were recorded appropriately and reported to other agencies.
- Staff understood their responsibilities to report abuse and felt confident that the management team would act on concerns. A staff member shared, "The management team really open and responsive."

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.

Visiting in care homes

There was no restriction of visiting arrangements at the time of the inspection in line with the guidance in place at the time.

Learning lessons when things go wrong

- System were in place to review accidents and incidents.
- Following an incident, debriefing sessions were held with staff. Further meetings were held to reflect on practice to consider lessons learned. A Staff member told us, "It's very supportive and then we look at it together, what we can learn to try and avoid the incidents happening in the future."

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- People's needs were fully assessed with on-going review. The registered manager told us, "Weekly, monthly and 6 weekly reviews with internal and external professionals takes place." This was reflected in documents which evidenced people's involvement.
- Care plans were personalised with key information about the person and how best to support. This included information about 'Please do', 'Please don't' and 'Things I like, things I don't like'.
- Care plans reflected a good understanding of people's needs, including relevant assessments of people's communication support and sensory needs.

Staff support: induction, training, skills and experience

- Staff completed an induction programme when they joined the service. This was a combination of shadowing experienced staff, with online and face to face training over a 6-month period.
- Staff spoke approvingly about their induction into the role. Comments included "You get the time to get an understanding of the young people, build that relationship" and, "Training was really good, I think it was a high standard."
- Staff received support in the form of continual supervision and opportunities to reflect on practice. A Staff told us, "It's an opportunity again to have your say, give an opinion and feedback about your role."

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

- People were supported to eat and drink enough within the home. During the inspection staff we observed staff promoting people's independence in this area.

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

- People's bedrooms were personalised, and people's individual preferences were reflected in the design and decoration of the home.
- The Annex sought to strike a balance between the requirements of a registered care service and providing a home-like environment for people.

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

- The provider worked with other agencies to support positive outcomes for people. Records confirmed regular meetings took place to review people's physical and emotional well-being.
- People were supported to access appropriate healthcare services when required. Evidence of appointments and actions taken when people were recorded in their care plans.

- Professionals spoke positively regarding the support given to people at The Annex. Comments included, "[Person] is happy living there, everything is how it should be."

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.

- Appropriate DoLS authorisations were in place for people living at the home.
- The conditions attached to people's DoLS were being followed and staff knew what these were.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- People told us they were happy with their support. Comments included, "Staff know me well and help me."
- A relative spoke in a complimentary way about the positive impact the provider had made on a person who used the service. We were told, "They come in, helped and you know they saved [Person's] life."
- The Annex treated each person with kindness and respect. Staff did not discriminate against people based on any of their protected characteristics, which included their race, religion, gender, disability or sexuality.
- During the inspection, we observed that people looked comfortable with the support given to them. Staff understood their needs and how to support them, which reflected on information reviewed in people's care plans.
- People's independence was encouraged at the home. We observed people wanting to help staff in the kitchen to tidy up and clean dishes. This was seen to have a positive impact on people.
- Care plans guided staff on how to promote independence and privacy as much as possible. This included how a person wished to receive their care.

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

- Care plans demonstrated on-going reviews with people. This included capturing the person's views on their current support and setting future goals.
- The Annex utilised the provider's occupational therapy team to design therapeutic plans for people. This involved developing a range of activities and identifying educational opportunities with people. An occupational therapist told us, "There is focus to produce a planner to develop skills, independence and self-esteem."
- Reviews were completed with people to reflect on current support and future goals. This included opportunities for relatives to join reviews and meetings online to give feedback over support.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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's care plans contained person-centred information about their lives. Plans also included 'One page profile', 'Keep me safe' and 'Things I like, things I don't like'.
- Bedrooms were decorated to the person's wishes and preferences. People's rooms were decorated with personal items and items of interest to them.
- Support focused on people's quality of life outcomes and people's outcomes were regularly monitored and adapted. During the inspection people discussed future goals, this included a range of activities with the aim of reducing reliance on staff in the future.

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 had individual communication plans which detailed effective and preferred methods of communication, including the approach to use for different situations which met Accessible Information Standards.

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

- Staff were committed to encouraging people to undertake voluntary work, employment, vocational courses in line with their wishes and to explore new social, leisure and recreational interests. A weekly schedule planner was in place developed individually with each person.
- We received mixed feedback from relatives over people engagement in planned events. We were told, "They need to encourage [Person] more to follow the planner and get out," and, "They do a lot with [Person], going out in the community. It's a brilliant therapeutic environment."

Improving care quality in response to complaints or concerns

- There was a complaints policy in place which people, relatives, and staff had access to.
- People, relatives, and staff informed us they felt confident they would be listened to if they had a concern. One relative shared, "I feel fully involved."

End of life care and support

- At the time of the inspection no person was in receipt of end-of-life care and support. The registered manager shared that training was available for staff if this was required, alongside assessment for care planning.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- There was a positive person-centred culture and people felt engaged and listened to.
- People were involved in planning their care, with the focus on developing independence. One person told us, "Staff are supporting me using public transport [independently] and [managing] medication."
- The provider sought the views of people who lived at The Annex, relatives and staff through questionnaires and face to face meetings.
- A 'parent's group' took place each month accessible to families across the provider's different locations. A relative told us, "I've recently asked if I would be a rep for the group, it's about supporting each other."
- Staff described a positive working culture. Comments included, "It's been brilliant really, enjoying it. The management have been really welcoming," and, "I do feel really supported, I feel I can speak up if I need to."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There was a provider led governance system underpinning assurance in the service. This included an audit programme completed by senior staff and support staff. The registered manager and home manager had oversight to ensure no actions were missed.
- A system was in place to monitor training and competencies in the service. The registered manager was aware of their responsibilities around managing this, ensure that staff training was completed in line with induction and training was refreshed.
- Staff received regular supervision. This included reviewing training needs, responsibilities and reflecting on events that have taken place at the annex. One staff member shared, "It's an opportunity to have your say and discuss your role."

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

- The registered manager understood their requirements of the duty of candour. There was a clear system in place for reporting and recording events which occurred in the service.
- Throughout the inspection the registered manager, senior staff and staff were open and transparent to feedback given, addressing any queries throughout.

Continuous learning and improving care

- There was a culture of continuous learning and improvement. Staff spoke positively regarding feedback to management if something went wrong.
- Regular meetings to review events that occur in the service took place. A staff member told us, "There's good information shared" and, "We do a lot of reflecting on how things have gone, what's being put in place."

Working in partnership with others

- The service worked well in partnership with advocacy and other health and social care organisations, which helped to give people using the service a voice and improve their wellbeing.