

Cognithan Limited

Woodside Court Supported Living

Inspection report

21 Lancaster Road
London
SE25 4BJ

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20 January 2016
17 February 2016

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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

Woodside Court Supported Living is registered to provide personal care for up to seventeen people with mental health needs.

This inspection took place on 20 January and 17 February 2016 and our first visit was unannounced. At our previous inspection in May 2014, we found the provider was meeting the regulations we inspected.

The service had a registered manager in post. 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.

There were systems and processes to protect people from the risk of harm and staff were aware of safeguarding procedures. Appropriate recruitment checks took place before staff started work.

People were supported to have their health needs met. Staff at Woodside Court Supported Living worked well with other healthcare professionals to help make sure individual health needs were met. People's medicines were managed safely and regular audits took place to make sure that people were having their medicines as prescribed.

Required statutory notifications were being submitted to CQC about certain incidents and events. Notifications are information about important events which the service is required to tell us about by law.

Staff received training which gave them the knowledge and skills to support people effectively. Staff had received training in the Mental Capacity Act (MCA) 2005. People were asked for their consent to the care and support they received.

There was a system in place for dealing with people's concerns and complaints. The registered manager understood their role and responsibilities and positive feedback was received from staff about their leadership. There were effective systems in place to help ensure the safety and quality of the service provided.

Further work should take place to make sure that the personal care provided was subject to separate contractual arrangements to those for the person's housing.

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. People received the support they required to keep them safe. Identified risks to people's safety and welfare were being managed appropriately.

There were enough staff to meet people's needs.

Medicines were managed safely.

Recruitment checks had been completed to help ensure people's safety.

Is the service effective?

Good ●

The service was effective. Staff had access to training to help them meet people's needs effectively.

The service complied with the requirements of the Mental Capacity Act (MCA) 2005.

Staff supported people to access healthcare services to help make sure their physical and mental health needs were met.

Is the service caring?

Good ●

The service was caring.

Individual privacy and dignity was respected.

Relationships between staff and people using the service were positive.

Is the service responsive?

Good ●

The service was responsive.

The service was responsive. Support plans were in place outlining people's care and support needs.

Staff were knowledgeable about people's support needs, their interests and preferences.

The service worked well with other agencies and services to make sure people received the care and support they required.

Is the service well-led?

The service was well led.

There was a registered manager in post who was organised, visible and approachable. Staff felt supported in their role and said they did not have any concerns about the service.

There were systems in place to monitor the quality of the service and make improvements where needed.

Good ●

Woodside Court Supported Living

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.

Prior to our visit we reviewed the information we held about the service. This included inspection history, any safeguarding or complaints and notifications that the provider had sent to CQC. Notifications are information about important events which the service is required to tell us about by law.

We visited the home on the 20 January and 17 February 2016. The first day of the inspection was unannounced.

This inspection was carried out by one inspector. Only one person using the service was willing to speak with us during our inspection visits. We spoke with the registered manager, business manager and two members of staff. Feedback was provided by two involved health professionals following our inspection visits.

We looked at records about people's care, including two files of people who used the service. We checked three staff files and the records kept for staff allocation, training and supervision. We looked around the premises and at records for the management of the service including health and safety records. We also checked how medicines were managed and the records relating to this.

Is the service safe?

Our findings

One person using the service told us that they felt safe living in the service and would talk to staff if they had any concerns.

People were protected from the risk of abuse because staff had received training to help them identify possible signs of abuse and knew what action they should take. Staff we spoke with told us they had confidence the registered manager would respond appropriately to any concerns. One staff member told us "I would go to my manager, I have to report it." Staff received safeguarding training as part of their initial induction and would then attend a mandatory training course around this important area. We noted that the organisation refreshed this mandatory training every three years. We discussed with the business manager whether this could be refreshed more frequently through discussion in team meetings or via online courses.

There were assessments in place which identified risks and the control measures in place to minimise these. A risk factors and warning signs profile was completed for each person and kept under review. Each document included a summary of the identified risks, for example, refusal of medicines and how these were to be addressed including actions for staff to take. Incidents and accidents were recorded and we saw that appropriate action had been taken. The registered manager gave us examples where the service had learnt from incidents, discussing them with staff in supervision and team meetings.

Medicines were managed safely at Woodside Court Supported Living. We saw medicines were stored securely and records showed that people were supported to take their medicines as prescribed. The administration charts we looked at were fully completed and there were written procedures for staff to reference and follow. Additional procedures had been set up so staff took responsibility for the regular auditing of medicines. These audits were carried out to help make sure medicines were being administered correctly and quantities of medicines were monitored to ensure they matched with records kept.

We saw regular checks took place to help keep people staying at Woodside Court Supported Living safe, for example, of the safety of the premises. There were records that showed equipment had been serviced. Fire alarms were checked by staff and external contractors to make sure they worked correctly.

Appropriate recruitment checks took place before staff started work. Personnel files seen for three members of staff contained evidence that criminal record checks had been carried out along with employment references, health and right to work checks and proof of identity.

Is the service effective?

Our findings

An external care professional told us, "The service provided to my client is good...the staff there support them well on a day to day basis. I am pleased with the level of support that they are currently receiving."

Training records showed that mandatory training was being provided at specified intervals. Staff said that they received the training they needed to support people effectively. A staff member told us that they were well supported by the organisation and received regular training in important areas such as safeguarding and medicines management. Some staff was attending infection control training on the first day we visited and we saw further training had been booked for staff to attend in February 2016 covering areas such as mental health awareness and the Mental Capacity Act 2005.

We saw that the provider was in the process of implementing the Care Certificate as part of their induction and mandatory training. They are a set of standards that have been developed for support workers to demonstrate that they have gained the knowledge, skills and attitudes needed to provide good quality and compassionate care and support. It covers 15 topics that are common to all health and social care settings and became effective from 1 April 2015.

Staff we spoke with told us they received regular one to one supervision with their line manager. A staff member said, "We have one every two to three months." In addition to the formal quarterly one to one supervisions, staff said they could approach the registered manager informally to discuss any issues they had. Staff also said they found the organisational senior management team to be supportive. One staff member said, "This company cares for the staff."

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. Consent forms were used to obtain agreement for staff to hold and administer medicines where required, arrange emergency medical care and monitor people's safety whilst on the premises. We saw people were able to come and go as they pleased and this was confirmed by one person we spoke to. Access to the property was monitored by staff to ensure people's safety and people were able to have their own bedroom keys.

Staff supported people to access the healthcare services they needed. The support plans included actions as to how staff supported people's health needs. For example, one person was supported by staff to attend a health appointment on the first day we visited.

People receiving support at Woodside Court Supported Living were provided with a cooked meal each day. People were able to give their views as to the menus provided either in a weekly planning meeting or more informally to staff on shift. One person told us the food was "Ok."

Is the service caring?

Our findings

One person told us they liked their keyworker and felt able to talk to them.

Staff were observed to spend time talking with people using the service and observed interactions were friendly and respectful. People looked relaxed and comfortable with the staff during our visit and they could choose what to do, where to spend their time and who with. Most people spent time in their rooms and some people went out independently throughout the day. A communal lounge and dining room were provided as well as kitchen and laundry facilities. A covered smoking area was situated in the garden for people to use.

Staff were positive about the support provided to people. One staff member said, "fantastic service." Another staff member told us, "It's going well; there has been a lot of improvement."

Staff recognised the importance of upholding people's privacy and dignity. They were observed to knock on doors and make sure they had permission before entering people's rooms. The registered manager spoke of the importance of ensuring staff gave people choice and had respect for their privacy and dignity. These core values were communicated to staff through training and on an on-going basis at handovers, team meetings and staff supervision sessions.

Monthly community meetings were held with people using the service to obtain their views however attendance was usually low. The registered manager told us that it was an on-going challenge to get people using the service to participate in the day to day running of the service and events. Staff tended to consult people on a one to one basis to get their views either informally or at key worker sessions. Minutes of the monthly meetings included discussion about food, maintenance and the house rules in place.

Is the service responsive?

Our findings

The registered manager and staff gave us examples of how they responded to changes in people's needs and behaviours that required a response. This was an area they felt was a particular strength of the service provided. An external professional commented on this in their feedback saying that the staff at Woodside Court Supported Living supported their client well on a day to day basis.

Following referral, people were assessed to determine if the service could meet their needs. The assessment included an assessment of the person's needs, risks to themselves and others and identification of any additional support that would be required.

We saw people had up to date support plans addressing areas such as their mental and physical health. This included the support required for the person and the agreed goals set with them. We saw that people using the service were made aware of their support plan and had signed to say they agreed with it. A new support plan format which was more detailed with a more structured goal setting process was due to be introduced for staff to use when working with people.

Handovers and daily notes helped to make sure that staff had access to the most up to date information about the people they supported. The daily handover was used to discuss each person in turn and share information between staff. Staff understood their roles and responsibilities and written guidance was displayed in the office to make sure this was the case.

Staff acted as key workers for people and met with them regularly. The registered manager stated that staff aimed to meet with each person twice a month and care files seen included notes of these regular one to one sessions. Written guidance regarding the responsibilities of each key worker was available which included updating support plans, risk assessments and monitoring required health checks.

People accessed activities including further education classes along with activities of daily living such as doing their own shopping and laundry. A small number of people cooked for themselves. One person told us they were able to access the local amenities freely.

Information about the complaints procedure was displayed in the home. This set out the process which would be followed by the provider and included contact details of the provider, local authorities and the Care Quality Commission. The records kept of any concerns received by the service were reviewed with none recorded in the last 12 months.

Is the service well-led?

Our findings

An experienced registered manager was in post who had overall responsibility for the service. They were supported by a deputy manager, a business manager and other senior organisational managers. The staff we spoke with said the registered manager was available when they needed him and they were able to contact organisational managers for support out of hours. One staff member said the registered manager had high standards and did not tolerate care that felt short of these.

External health professionals were positive about the service provided and felt the registered manager and his staff worked well in partnership with them.

Woodside Court Supported Living is registered to provide personal care for up to seventeen people living with mental health needs. Supported living housing are where people live in their own home and receive care and support to promote their independence. These type of services enable people who need personal care to live as independently as possible in accommodation that is genuinely 'their own'.

We were, however, unable to see evidence that the personal care was being provided under separate contractual arrangements to those for the person's housing. This was discussed with registered manager on the second day of inspection. If a service provides accommodation together with personal care, the provider should be registered with CQC for a different regulated activity 'Accommodation for persons who require nursing or personal care'.

Staff said the team worked well together and they felt supported by management and their colleagues. Regular staff meetings also took place that enabled staff to discuss issues in more detail and keep up to date with current practice. Minutes from previous team meetings included discussion around areas such as key working, training and menu planning with people using the service.

The home had systems to regularly check the quality of the service provided and make sure any necessary improvements were made. For example, weekly checks were carried out on the medicines to make sure staff were following the correct procedures and people were receiving their medicines as prescribed. The building was regularly checked to make sure that it was safe and well-maintained.

Organisational audits also took place to help ensure compliance with set quality standards. An action plan was put in place and we saw that this was supplied to the registered manager to make sure action had been taken where necessary.