

Community Integrated Care

The Watch Factory

Inspection report

Albany Road
Prescot
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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 Watch Factory is an Extra Care Service. This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented, and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service. At the time of this inspection 26 people were using the service.

People's experience of using this service:

People were protected from abuse and the risk of harm. Staff had completed safeguarding and health and safety training and understood their responsibilities for keeping people safe. Risks people faced were identified and planned for and staff supported people appropriately to take positive risks. Medication was safely managed. People received their prescribed medicines at the right times. Safe recruitment procedures were followed and people received care and support from the right amount of suitably skilled and experienced staff.

People's needs were assessed with their full involvement. People told us they received the right care and support which they had agreed to. Staff received the training and support they needed for their role. People's right to make their own decisions was understood and respected.

People received care and support in a respectful way and their privacy, dignity and independence was promoted. Positive relationships had been formed between people who used the service and staff. People told us staff were kind, caring and compassionate.

People's needs were met and regularly reviewed. People told us staff knew them well and provided them with personalised care and support. People were given information about how to complain and they told us they would complain if they needed to. People received dignified end of life care.

Managers promoted a person-centred service and promoted an open and positive culture. There was good partnership with others to improve and promote the service. The quality, safety and effectiveness of the service was monitored through regular checks which took into account people's views and opinions.

Rating at last inspection:

This was the first inspection of the service since being registered with the Care Quality Commission (CQC) in March 2018.

Why we inspected:

This was a planned comprehensive inspection.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

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 was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

The Watch Factory

Detailed findings

Background to this inspection

The 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 checked 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.

Inspection team:

One adult social care inspector and an Expert by Experience conducted the inspection on the first day. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. Day two of the inspection was conducted by one adult social care inspector.

Service and service type:

The watch Factory is an Extra Care service. There were 26 people using the service at the time of the inspection.

The service had a manager registered with the Care Quality Commission (CQC). This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

The first day of the inspection was unannounced and the second day was announced.

What we did:

Before the inspection we reviewed the information we held about the service. This included the statutory notifications sent to us by the registered provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send to us by law. We also contacted the commissioners of the service to gain their views. The provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and any improvements they plan to make. We used all this information to plan our inspection.

We visited the service on 07 and 13 March 2019. We looked at care records belonging to three people, recruitment records for three staff and other records relating to the management and quality monitoring of the service. We spoke with 13 people who used the service, two family members, the registered manager, area manager and three staff.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- Risks people faced were assessed and measures put in place to minimise the risk of harm to people and others. Staff understood risks people faced and they managed them in a way that respected people's freedom.
- Staff were provided with training in how to keep people safe from the risk of harm. They understood their responsibilities for keeping people safe and reporting any concerns about a person's safety.
- People and staff had access to an emergency on-call system and were provided with details of other emergency services.
- Plans were in place to guide staff on how to safely support people in the event of an emergency.
- Staff were provided with an identification (ID) badge and people confirmed they were visible on staff when they entered their homes.
- Staff followed safe procedures when entering and leaving people's homes.

Staffing levels and recruitment

- Staff were safely recruited. Before a job offer was made applicants were subject to a series of pre-employment checks to assess their suitability for the role.
- People's needs were safely met by the right amount of suitably skilled and experienced staff.
- People told us the right amount of staff attended their homes and they were mostly on time.

Using medicines safely

- Staff with responsibilities for managing medication underwent training and regular competency checks.
- Staff had access to safe medication procedures and good practice guidance to help support their practice.
- Medication administration records (MARs) were appropriately completed.
- People told us they got their medicines on time. Their comments included, "Always get them on time, never miss."

Preventing and controlling infection

- Staff had completed training in the prevention and control of infection and they had access to current national guidance to help support their practice.
- Staff used personal protective equipment (PPE) to minimise the risk of the spread of infection.

Learning lessons when things go wrong

- There was a system in place for recording any accidents and incidents which occurred at the service and for learning lessons to help prevent the risk of these issues reoccurring.

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

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; and staff working with other agencies to provide consistent, effective, timely care

- People's needs and choices were assessed in line with legislation and best practice.
- People were fully involved in the assessment process and the development of their care plans. Appropriate input was obtained from other agencies.
- Outcomes for people and how they were to be met were agreed with them.
- People told us their care plans accurately reflected the care and support they had agreed to and that staff followed them correctly.

Staff support: induction, training, skills and experience

- Staff had the right skills and knowledge to effectively meet people's needs.
- New staff were inducted into their roles and all staff were provided with ongoing training relevant to people's needs.
- Staff skills and knowledge was assessed through regular knowledge checks and observations of their practise.
- People were confident in the ability of staff. Their comments included; "They [staff] do a great job."
- Staff received an appropriate level of support for their job role.

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

- People received the support they needed to eat and drink and maintain a healthy and balance diet.
- People's dietary needs and any assistance they needed was clearly set out in their care plan.
- People told us staff prepared their choice of meals and drinks and they got their meals at the right times.

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 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. We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- At the time of the inspection no person using the service had any restrictions placed on their liberty.

- Staff had a good understanding of the MCA. They knew not to deprive a person of their liberty unless it was legally authorised. Staff also knew the importance of gaining a person's consent before providing any care and support. They told us they would seek advice if they had any concerns about people's ability to understand decisions.

Supporting people to live healthier lives, access healthcare services and support

- Where people required support from healthcare professionals this was arranged.
- Care plans provided details of the support people needed with their healthcare needs or with accessing other healthcare professions.
- Staff understood people's healthcare needs and acted appropriately when they recognised changes in people's health. One person told us, "They [staff] understand all my health issues and give me lots of help."

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- People told us staff were respectful of their privacy, dignity and independence when providing care and support. Their comments included, "When I have a shower, the staff make sure I have my towels and everything," "Staff knock before coming into the bedroom," "I'm independent and get help from staff"

Ensuring people are well treated and supported; equality and diversity

- People told us they were well treated and supported, they told us staff were kind and treated them with kindness and compassion. Their comments included; "Very kind and lovely to me. I like my staff."
- People told us they were introduced to new staff and given a say in which staff provided their care and support.
- People told us they were mostly visited by the same staff who they had built positive and trusting relationships with. One person told us, "Whenever staff have been late there's always been a good reason and they call me to let me know." Another person told us, "I have regular staff who visit me."
- Staff were provided with training in equality and diversity and they understood the importance of treating people as equals and meeting their individual needs.

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

- People and family members told us they were provided with opportunities to express their views and felt confident in doing so.
- Reviews gave people the opportunity to check that their care plans were working for them and discuss and plan any changes they wished to make.
- Prior to meetings people were given an agenda and invited to include any topics they wished to discuss and they were provided with meeting minutes.
- People told us they felt fully engaged in meetings and felt that their views and opinions were listened to and actioned.
- People helped to develop their own one-page personal profile which provided staff with key points about their preferences, things of importance, likes and dislikes.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that services met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Each person held a copy of their care plan in their home. The plans provided staff with clear instructions about how people's needs were to be met, including those related to protected equality characteristics, their choices and preferences.
- People told us staff understood their needs and met them in a way they preferred.
- Care plans were regularly reviewed and updated in a timely way following any changes to people's needs or where people wanted to make changes to the way they were supported.
- Information was provided to people in a format they could access and easily understand.
- The service worked flexibly with people in meeting their needs. People told us they had no difficulties rearranging visit times should they need to.
- Staff completed a written record of the care and support they people with following each visit. The records showed people received the care and support which was responsive to their needs.

Improving care quality in response to complaints or concerns

- The registered provider had a complaints procedure which they shared with people and family members.
- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this.
- People and family members knew how to complain should they need to and were confident that any concerns or complaints would be listened to and quickly dealt with. Their comments included;
- There was a system in place for recording complaints and any action taken.

End of life care and support

- People were given the opportunity to plan their end of life care and their wishes following their death.
- Staff followed good practice and guidance when providing people with end of life care. This included working closely with other professionals to make sure people experienced a dignified, comfortable and pain free death.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

- There was an effective system in place to check on the quality and safety of the service.
- Improvements were identified through checks and through consultation with people and family members. Areas for improvements were actioned in a timely way to help improve the safety and quality of the service people received.
- There were systems in place for learning from accidents, incidents, concerns and complaints.
- The registered manager kept up to date with current good practices and changes to the law to update their knowledge and learning.

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

- The roles and responsibilities of managers and staff were clearly set out and understood.
- Staff performance, learning and development was monitored through observations and regular discussions with the registered manager.
- The registered manager and staff understood their responsibilities for ensuring risks were quickly identified and mitigated. Risks to people's health, safety and wellbeing was effectively managed through ongoing monitoring of the service.
- The registered manager knew their responsibilities in line with regulatory requirements. They knew to notify CQC of incidents and events as required.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There were processes in place to obtain the views and opinions of people, family members and staff about the service.
- Regular care plan reviews took place with people and relevant others to ensure their care plans continued to accurately reflect their needs and how they were to be met.
- People, family members and staff told us they felt engaged and involved in the service. They told us the registered manager actively encouraged their views and opinions and responded to them.
- Staff were valued and recognised for their hard work and achievements.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered manager was committed to providing people with person-centred, high-quality care by engaging with everyone using the service, their relatives, staff and other stakeholders.

- People and their relatives spoke positively about the management of the service. Their comments included; "This place is an organised and well managed place."
- People and family members described a person-centred service. They were complimentary about the standard of care and support provided and how personalised it was.

Working in partnership with others

- The registered manager worked closely with other agencies to ensure good outcomes for people. This included working with health and social care professionals and commissioners so that people received holistic care and support to meet their needs.