

Hales Group Limited

St Edmunds Court

Inspection report

St Edmunds Walk
Hampton Vale
Peterborough
Cambridgeshire
PE7 8NA

Tel: 01733229416

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Ratings

Overall rating for this service	Good ●
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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

St Edmunds Court is a domiciliary care agency providing personal care to 18 older people in an extra care housing scheme based in the outskirts of Peterborough. The extra care housing scheme was one building that housed 51 flats within one building. The building also has its own restaurant and communal lounges and gardens that people could use.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

People were supported to have maximum choice and control of their lives and staff supported support them in the least restrictive way possible and in their best interests.

Staffing levels were looked at to make sure they were satisfactory to meet the needs of the people using the service. People felt safe due to their care being provided by staff.

Risk assessments identified possible risks to people's well-being and health needs. Information was available to guide staff on how to minimise these risks as far as practicable. Staff worked with guidance from external health and social care professionals across different organisations. This helped people's well-being.

Medicines were safely managed.

Staff knew the people they supported. To develop their skills and knowledge staff received regular training, spot checks, supervisions, and appraisals. People were supported to maintain their independence. There was an in-house restaurant run by an external company that people and their visitors could use should they wish to. In communal areas, drinks and snacks were available during certain times of the day.

Staff promoted and maintained people's privacy and dignity. People had developed good relationships with staff who understood their individual preferences and care needs.

People and their relatives told us staff were kind and caring. People's personal information was kept secure in the agency's office. People and their relatives were involved in discussions about their care. Compliments had been received about the care provided and any concerns raised were investigated and resolved where possible.

Staff felt supported by the new registered manager. As the registered manager was not always present due to being responsible for another location, staff told us they supported each other well.

There were regular visits from the senior management team to oversee the quality of the service provided. Audits were carried out to monitor the service and address any improvements required. The registered manager notified the CQC of incidents that they were legally obliged to.

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

Rating at last inspection

The last rating for this service was good (published 15 March 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

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.

St Edmunds Court

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal 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 bought or 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.

The service had a manager registered with the Care Quality Commission. 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and three relatives about their experience of the care provided. We spoke with six members of staff including the training and development manager, the registered manager, three senior care workers, and one care worker.

We reviewed a range of records. This included two people's care records and medication records. We looked at a variety of records relating to the management of the service, including compliments and complaints records.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe using the service because of having other people in the flats nearby and from the support from staff. One person said, "I feel totally safe here."
- Staff had been trained on how to safeguard people. A staff member told us, "I would report to my senior or CQC."
- During this inspection we identified a safeguarding allegation. The registered manager was informed, and the matter was reported, investigated and dealt with in line with the providers safeguarding policy.

Assessing risk, safety monitoring and management

- People had risk assessments in place based on their individual assessed needs. These gave staff information on how to recognise and monitor people's risks. Risk assessments were reviewed to make sure they continued to meet the person's current needs.
- Equipment and technology, such as lifelines and pendants were used to support people's well-being around risk. Lifelines helped people summon assistance when needed. A person confirmed, "I pressed my lifeline the other week when I fell in the garden and I couldn't get up... [staff] came out and found me and got me up."

Staffing and recruitment

- Potential new staff to the service had recruitment checks carried out to make sure they were suitable to work with the people they supported. A staff member confirmed, "I filled out an application form. I had an interview. [I had to provide proof of my] birth certificate, passport provisional [driving] licence and utilities bill for DBS [criminal records] check. I also had to provide references from my last employer."
- The number of staff needed at each care call visit was based on people's care and support needs. People raised no concerns with staff time keeping to their care call visits. A person said, "I get a visit every day apart from Sundays and that makes me feel safe."

Using medicines safely

- Staff confirmed that they had training to support people with their prescribed medicines and had their competency to do so checked by a more senior member of staff.
- People raised no concerns over how staff managed their medicines. One person said, "The [staff] do my eye drops for me and it is fine, no problem at all."

Preventing and controlling infection

- Staff had been trained in how to reduce the risk of cross contamination in line with infection control

policies. Personal protective equipment (PPE) such as disposable gloves and aprons were worn, and staff used these at each care call visit.

Learning lessons when things go wrong

- Hales Group Limited circulated memos to registered managers who in turn informed staff of any areas for improvement identified because of learning. This would help make sure that staff were following Hales Group Limited policies and procedures. For example, the registered manager confirmed to us that staff would be reminded of the Hales Group Limited policy and stance on staff not accepting gifts from people they supported.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Prior to people using the service an assessment was carried out to make sure staff had the necessary skills to be able to provide effective care and support.
- Hales Group Limited sent the registered managers of their services information on best practice information, legislation changes and guidance updates. This was so registered managers and staff were working to and had knowledge of up to date guidance.

Staff support: induction, training, skills and experience

- Staff when new to the service, completed an induction that included training and shadowing another more experienced staff member on shift. This was until the new staff member was competent and confident to deliver effective care and support to people.
- Staff members' care and support skills and knowledge was developed through a mandatory training programme and spot checks on their skills and standard of work. Staff also had supervisions and appraisals to review their progress and identify training needs.
- Staff could also develop their skills through undertaking further qualifications.

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

- The extra care housing scheme had a restaurant people could use that was run by another external organisation.
- No one spoken with needed support from staff with their food and fluid intake. Drinks and snacks were also made available to people in the communal areas of the extra care housing scheme.

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

- People had access to external health professionals such as district nurses, occupational therapists, GPs and dieticians when needed. This supported people to live healthier lives.

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 when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

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 registered manager told us that no one using the service currently lacked the mental capacity to make decisions.
- People told us staff asked their permission before assisting them.
- Staff had training on the MCA and could demonstrate their understanding of this. A staff member said, "[It's about] choices, everyone can make a choice. We support [people's] choices and give prompts verbally, give visual prompts re food choices and clothes [to help people choose]."

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People and their relatives had positive comments about the care provided by staff. One person told us, "I do think the carers are excellent, so kind and caring, they will always help you." A relative said, "We all have a good and trusting relationship with the staff here...the staff inspire confidence and security."
- Staff knew the people they supported and assisted people in line with their individual wishes and in accordance with their individual care plans and risk assessments.

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

- People were asked to express their views, wishes and agree on how they would like staff to support them.
- People told us that they were involved in making decisions about their care and support needs. One person said, "They seem to talk about my care once a month. They record it in a book and I feel fully involved." Another person told us, "We do have regular discussions about my care and they write it all down."

Respecting and promoting people's privacy, dignity and independence

- People's personal information was kept confidential in the service's office. The support people received from staff helped them to maintain their independence and stay in their own homes.
- People had no concerns over how their personal care support was carried out. One person told us, "The staff do respect my dignity and they always keep me private when they help me get washed. They make sure the doors are shut and people can't just walk in. They use towels to cover me and ask me if I want to wash any parts of me myself."
- Staff, in the extra care housing scheme care were observed knocking on doors before entering to maintain people's privacy and dignity.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff were prompted in people's care records to respect people's individual choices and how people wished to be supported by them.
- A person confirmed, "[My family member] talks to the staff about my needs, I rely on him. [Staff] write everything down in a book."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager told us that information was available to people in different formats such as large print if needed.

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

- In the extra care housing scheme there were some activities that took place. The registered manager told us that recently the activities co-ordinator had resigned. To replace the role the registered manager said that they were in discussions with the local authority around funding.
- People had mixed opinions about the activities that took place. One person said, "There are plenty of things here, books, CD's, DVD's puzzles." However, another person told us, "I really miss the activities lady. She was really good. We did loads of things with her."

Improving care quality in response to complaints or concerns

- Compliments had been received by the service since the last inspection.
- Complaints received were investigated thoroughly. We saw staff involved with the complaint, had additional supervisions to discuss any issues raised and the concerns resolved with the complainant wherever possible.
- A person told us, "I have no complaints about the staff, they are all very good."

End of life care and support

- Staff were trained to support people in conjunction with external health professionals when a person came to the end of their life. This was so the person had as dignified and pain free death as possible.
- People's care records had limited information them about people's end of life wishes. The registered

manager had identified that these records needed more detail to make sure people's wishes were known. They told us they would make these improvements.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The registered manager encouraged feedback on the service provided and acted on the information they received to improve the service. Records showed people completed surveys to feedback their views and reviews of peoples care and support needs took place. A relative told us, as the registered manager was based at two sites, "All the staff are approachable, and we feel happy to talk to any of them about anything."
- Staff said they felt supported and listened to by the registered manager. However, as the registered manager looked after two sites they were not always present at this service. A staff member said, "The [registered] manager is supportive, we just don't see him that much... We normally can get hold of someone even if it is someone higher than [named registered manager]. I [also] feel supported by my colleagues." Staff told us there was an expectation for them to deliver a good standard of care to people.
- The provider organisation gave an award to nominated staff members for their work. This was in recognition of staffs work for the organisation. The reward stated, 'Congratulations on achieving excellence in community care for six consecutive months.'

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 notified CQC of incidents that they were legally obliged to.
- The previous CQC inspection rating was displayed.
- Records gave examples of learning when things had needed improvement and how they had tried to learn from it to reduce the risk of recurrence. This included actions taken during the inspection because of learning from the alleged safeguarding incident.

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

- The registered manager was clear about their responsibilities and gave us examples of how they were supported by their line managers to deliver a good standard service to people.
- Staff at all levels understood the importance of their roles and responsibilities and what was expected of them. Staff were encouraged to give feedback and raise suggestions or concerns at staff meetings, during supervisions or when needed. A staff member said, "All the staff are there for each other. [The registered manager] is okay. We can contact him [and he will] normally make himself available. Staff meetings are useful."

Continuous learning and improving care

- There was organisational oversight of the service with regular visits from the senior management team to oversee the quality of the service provided.
- Audits were carried out to monitor the quality of the service provided. Where improvements were found to be needed actions were taken to resolve these.

Working in partnership with others

- The registered manager worked in partnership with representatives from key organisations.
- This included visits from the local authority commissioning team.