

Housing 21

Housing 21 - Fry Court

Inspection report

Newton Road
Great Ayton
Middlesbrough
TS9 6BQ

Website: www.housing21.org.uk

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09 November 2021
11 November 2021

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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

Housing 21 – Fry Court is an extra care housing scheme providing personal care to people aged 65 and over. People using the service lived in their own flats/apartments in one large complex. At the time of the inspection the service was supporting 38 people with personal care.

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 and their relatives told us they were happy with the care and support they received from Housing 21 – Fry Court. One person said, "They are brilliant and do a remarkable job, I really can't fault them, they are very organised."

People received their care from a consistent staff team, with whom they had built trusting relationships. Everyone told us staff were caring and patient.

The management team ensured people received safe care with systems and processes in place which helped to minimise risks. Staff reported any safeguarding matters. The management team investigated any concerns and resolved these matters. All incidents were analysed to learn any lessons and embed into staff practices.

People were supported by staff who had the skills and experience to help them to maintain and develop their independence. Staff treated people as individuals and respected their privacy and lifestyle choices.

Medicines systems were organised and people were receiving their medicines when they should. The provider was following national guidance for the receipt, storage, administration and disposal of medicines.

People were involved in decisions about the care they received and staff knew how to communicate with each person to help them to make choices.

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.

The management team were open and approachable which enabled people to share their views and raise concerns. People told us if they were worried about anything they would be comfortable to talk with staff or the management team.

The structure in the service ensured people and staff had access to, and support from, a competent

management team. The provider monitored quality, sought people's views, and planned ongoing improvements.

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 19 June 2020 and this is the first inspection.

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?

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 ●

Housing 21 - Fry 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 completed by one inspector and one 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

Housing 21 - Fry Court 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 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

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

Inspection activity started on 9 November 2021 and ended on 11 November 2021. We visited the office location on 9 November 2021.

What we did before the inspection

We reviewed information we had received about the service since. We sought feedback from the local authority and professionals who work with the service. We took this into account when we inspected the

service and made the judgements in this report.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with five people who used the service and seven relatives about their experience of the care provided. We spoke with the registered manager, assistant housing manager and assistant care managers. We sought and gained feedback from eight support workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Staffing and recruitment;

- People and their relatives told us they felt safe with the services provided. One relative said, "The staff are so attentive and careful looking after [person], they are very happy and safe."
- Staff understood their responsibilities to report any safeguarding concerns to the management team and were confident action would be taken to keep people safe.
- The management team worked with other relevant authorities to make sure people were protected from abuse and avoidable harm.
- A robust recruitment process was in place which helped to minimise risks to people. All staff were checked before they began work for the service to ensure they had the appropriate skills and character to work with people.
- There were sufficient staff to meet people's needs. Staff worked flexibly and were supported to respond to changes in people's needs when required. One person said, "There are lots of carers, they never rush and they stay for the whole visit. If they've finished with care they stay and chat."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff were provided with clear guidance of actions they should take to manage and support people with health conditions such as epilepsy.
- Staff received training which ensured the safe use of equipment. This included the use of specialist equipment to support people to live in their home safely.
- Where accidents and incidents occurred, the management team looked at these, learned lessons from them and ensured any changes were shared with the whole staff team.
- The provider had contingency plans in place to support people in emergency situations for example, adverse weather conditions.

Using medicines safely; Preventing and controlling infection

- Medicines were managed safely. People had no concerns. One person said, "Staff have been excellent with medicines, they do all the re-ordering, we have never had a problem, very efficient."
- People received support from staff who had received specific medicines administration training.
- Records showed when medicines were received, administered, prompted or refused. These were monitored by the management team to ensure the effectiveness of people's prescribed medicines and to take action when required.
- People were protected from the risk of infection because staff had received training about infection control and followed safe practices. Staff had access to personal protective equipment (PPE), such as disposable masks, gloves and aprons. One relative told us, "The pandemic has been managed really well. Staff all wear proper PPE and they kept the main doors locked so outsiders couldn't just walk in and out without them"

knowing."

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 before they moved to the service. This helped to ensure suitable staff were available to provide personalised care to meet people's needs and choices.
- People's care and support plans clearly set out their needs and preferences for how they wished to be supported along with the life goals they wished to achieve.
- People received care and support in accordance with their assessed needs because the management team and staff clearly understood the importance of care records and made sure they were kept up to date.

Staff support: induction, training, skills and experience

- People were supported by staff who had the rights skills and knowledge to safely support them. One person said, "I did a lot of my recovery at home because of the carers. They supported me but also helped me to regain my independence. They would stand back and say, 'do what you can' and then when I couldn't do anymore they would help me. I am now out of a wheelchair and walking with a frame."
- New staff completed an induction programme when they began work and had opportunities to shadow more experienced staff.
- Staff said the management team were approachable and they were always able to contact someone if they required advice or support. One said, "We are a great team and there is always a manager on call if we need any help or guidance."
- Staff were supported through regular supervision and appraisal.

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

- When people required support with their meals, staff provided this safely and considered people's choices with the meals they were given and the level of support required.
- Staff worked with other health professionals to make sure people received food and drinks according to their needs. Care records were updated following assessments by a speech and language therapist (SALT) to reflect any recommendations needed to minimise risks for people.
- Care records showed staff monitored people's health and reported any concerns.

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

- The provider worked in partnership with other organisations to ensure they delivered joined-up care and support for people.
- People had regular access to healthcare services when they needed it. One relative told us, "As soon as the carers spotted a problem with [person's] eye they mentioned it to us straight away, they are very very aware

of any health problems."

- Staff worked with other healthcare professionals to make sure people's health needs were met and they had the equipment they required to promote their safety and independence. One person said, "They have dealt with all the [COVID-19] jabs. The managers sort out all the health appointments."

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.

- Most people could make decisions for themselves and staff respected their choices.
- Where people lacked the mental capacity to make specific decisions, staff worked with others to make sure decisions made were in the person's best interests. This included healthcare professionals and people's relatives.
- Staff worked in a way which respected people's wishes. People were supported to take positive risks which enhanced their independence.
- Care records clearly set out how staff should support people to make choices.

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

- Staff were respectful and treated people with kindness. One person said, "The care is exemplary, they are very competent, very friendly and approachable. They really are lovely, so caring and kind."
- The management team monitored staff practices to ensure they were kind and caring.
- Staff received training in equality and diversity. People's cultural and spiritual needs were respected.
- The service had received many compliments about the care and support they provided.

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

- People and their relatives were involved in all decisions about their care and support. One relative said, "We did a care plan but since then we have had a lot of discussions and we have chopped and changed things to suit [person's] needs. For example [person] now goes out for a walk each day with a carer for an hour – [person] loves to walk and so this is great for them."
- Staff used appropriate communication methods to support people to be involved in their care planning and reviews. This included the use of pictorial information.

Respecting and promoting people's privacy, dignity and independence

- People received care and support from a consistent staff team which helped people to remain independent. Care records reflected the steps staff should take to encourage people to be independent.
- Staff respected people's rights to have their privacy and dignity promoted. One relative said, "Staff protect [person's] dignity. [Person] was so frightened because of some incontinence issues and kept apologising but the carers just said that it didn't matter, they were there to help and they mustn't worry about it. They are so good."

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; 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 acted on their knowledge of people and their personal preferences and needs. One person said, "I know all the staff here and they all know me, it's lovely."
- Care was planned around people's preferred routines and staff were flexible to accommodate people's wishes. One relative said, "The carers are really good. The ones who support [person] are very adaptable and work really well. [Person] tells me, 'everything has worked out perfectly'."
- People were supported to access a wide range of activities which helped them to feel a valued member of their community and prevented isolation. People said, "We do go to activities. The vicar comes once a month for a service and we do go to some evening things like a pie and peas supper" and, "We went to the music night and lots of people were there and got up to dance it was very good."
- Care records showed people were fully involved in planning their care and changes were made when needs or wishes changed. One person said, "Staff are really flexible, they even changed the call times when the clocks changed because we felt this would suit us better."

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 service identified people's information and communication needs by assessing them. Staff understood the Accessible Information Standard. People's communication needs were identified, recorded in care records and acted upon.

Improving care quality in response to complaints or concerns

- People felt able to share any concerns with the management team and felt their concerns would be listened to. People said, "We have no complaints and if we did we would go straight to [management team] and I am completely confident that it would be dealt with" and "We have no complaints but if we did I would speak to the [management team]. They are all really good and I am 99% sure anything would be sorted out."
- The management team encouraged an open culture where people and their relative's felt able to raise issues.

End of life care and support

- Staff were aware of good practice and guidance in end of life care, and respected people's religious beliefs

and preferences. Family communication records showed how staff had supported a person to remain at home during their last days and that staff had worked 'around the clock' to support [person] and ensure their wishes were upheld.

- When required, people would be supported to make decisions about their preferences for end of life care. Professionals would be involved as appropriate to ensure people were comfortable and pain free.

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; 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

- People received personalised care. Staff were committed to providing care which was individual to the person and their needs.
- The management team had a good knowledge of the staff team and promoted their values through meetings, supervisions and formal staff appraisals.
- The management team understood their responsibilities under the duty of candour and were open and honest about any lessons that were needed to be learned following incidents.

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

- The management team carried out observational visits to monitor quality and individual staff performance. This helped to ensure people received a consistent level of support.
- Communication within the service was good. One relative said, "The [management team] are amazing, really good. We send an email with our weekly arrangements and receive a reply immediately. They are very well organised".
- People benefited from a management team who were committed to on-going improvements. There were regular management meetings where service improvements were discussed and planned.
- The provider regularly monitored the quality of the services.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The management team spent time with people who lived at the service. This allowed them to gain people's views and involve people in any changes or improvements being made to the service. One person said, "The [management team] are excellent, they have a very wide knowledge and are completely dedicated. They take a personal interest in everyone and go above and beyond to sort things out."
- People shared their views through feedback surveys which showed a high level of satisfaction with the services.

Working in partnership with others

- The management team had developed and maintained good links with healthcare professionals and the local community which people benefitted from.

- The staff worked in partnership with people and relatives. One relative said, "Although I live far away, I feel very involved. They care about [person] and they also care about me."