

Sefton New Directions Limited

Sefton New Directions Limited - Poplars Resource Centre

Inspection report

2 Poplar Street
Southport
Merseyside
PR8 6DX

Tel: 01704535118

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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: Sefton New Directions Limited - The Poplars Resource Centre (The Poplars) is a residential care home which is registered to provide accommodation and personal care for nine people with physical and learning disabilities. Accommodation is provided across two single-storey buildings on the same site. The home provides short-stay, respite care to meet the needs of people in living in their own homes.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to nine people. Three people were using the service at the time of the inspection. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

People's experience of using this service:

The service provided short-term, respite care and support in accordance with best-practice. People who used the service and their relatives spoke very positively about their experience and the care provided by staff.

Staff treated people with kindness and respect and supported their dignity in a sensitive manner. People were encouraged and supported to maintain and improve their independence. They were actively involved in decision-making regarding their own care and developments within the service.

Staff knew people very well. They understood their needs and provided effective care to keep them safe. Risk was subject to regular review and was effectively managed. People received their medicines as prescribed from trained staff. The home was clean and generally well-maintained. Refurbishment plans were in place to further improve the environment.

Staff received regular training and support and were equipped to provide effective care. Additional training was available in relation to specialist health conditions. 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.

Care records captured important information regarding people's histories, families and preferences. This information was used to adjust the provision of care to meet each person's needs.

The registered manager, provider and staff promoted an open, positive culture with a focus on high-quality, person-centred care. The registered manager and provider made effective use of audits and other sources of information to review and improve practice. The home had forged links with other services and resources in the local community to support further development.

More information is provided in the full report.

Rating at last inspection: Good (report published 20 December 2016)

Why we inspected: This was a scheduled inspection based on the previous rating from the last 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.

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

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 remained safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service remained effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service remained caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service remained responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service remained well-led

Details are in our Well-Led findings below.

Good ●

Sefton New Directions Limited - Poplars Resource Centre

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was conducted by an adult social care inspector.

Service and service type:

The Poplars is a care home. People in care homes receive accommodation and nursing or personal care. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

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. The registered manager was not available on the day of the inspection.

Notice of inspection:

The inspection was unannounced.

Inspection site visit activity was completed in one day on the 10 June 2019.

What we did:

Prior to the inspection we reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about. We also sought feedback from the local authority. We assessed the information in the provider information return. This is key information providers are required to send us about their service, what they do well, and improvements they plan to make. We used this information to help us plan the inspection.

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. We took this into account when we inspected the service and made the judgements in this report.

During the inspection we spoke with two people living at The Poplars and four relatives. We also spoke with the registered service manager, an advanced care coordinator, a team leader and a support worker. We observed how care was provided at various points throughout the inspection.

In addition, we looked at two care records, two staff recruitment files, records relating to the administration of medicines, audits and other records associated with the management of the service.

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

- Each of the people that we spoke with told us they, or their relative was safe staying at The Poplars. One family member commented, "We're contented leaving [relative] here. We feel confident that [relative is] safe."
- Staff were aware of the need to report any concerns and were encouraged to do so. Staff were aware of the need to be vigilant and intervene early to reduce the risk of incidents.
- Systems for reporting concerns were robust and aligned to the requirements of the local authority and the Care Quality Commission. Our assessment of records indicated that the number of reportable incidents since the last inspection was low.

Assessing risk, safety monitoring and management

- Systems and processes were in place to reduce the risk of harm. Risk assessments were completed in relation to a range of health conditions and the environment.
- Assessments were detailed and reviewed before each stay. However, some records were difficult to assess because the descriptions of risk were different from the risk screen document. We discussed this with the registered manager.
- Risk was assessed as part of the management of the service and effective measures had been taken to reduce risk and maintain people's independence.

Staffing and recruitment

- Safe recruitment practices were used to ensure that new staff were suited to working with vulnerable people. Appropriate checks were completed before new staff started work.
- Most staff had worked at The Poplars for a long time and were deployed in sufficient numbers to provide safe care. Regular bank staff were used to ensure consistency when cover was required. A family member said, "There's 2:1 at all times. They look carefully at the staff rotas to make sure it's staff that know [relative]."

Using medicines safely

- Medicines were well managed and there was only one reported medicines' error in the previous 12 months.
- Staff completed training with an accredited provider before they administered medicines and had their competency assessed regularly.
- Records were completed correctly and subject to regular audits.

Preventing and controlling infection

- The environment was visibly clean and free from any unpleasant odours. There was a clear system in place for the maintenance of cleanliness and hygiene in private and communal spaces.
- Staff had completed appropriate training and were aware of the need to control the potential spread of

infection.

Learning lessons when things go wrong

- Staff understood the importance of reporting incidents and accidents. The documentation that we saw included sufficient detail to aid analysis and to identify patterns or trends.
- Significant incidents and accidents were entered onto an electronic system and subject to further review by senior managers.

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

- Staff were aware of the relevant standards and guidance and used this effectively to assess people's needs and plan their care.
- People were involved in discussions about their care and their outcomes were good. A relative told us, "They phone the week before [relative is] coming in to check if there's anything they need to know and if anything has changed." While another relative said, "If there's any changes I notify them. There was a radical change last year. [Name] was taken into hospital. Everyone is aware that fluids have to be monitored. [Relative is] a lot better."

Staff support: induction, training, skills and experience

- Staff were given an induction in accordance with recognised standards for care staff. Staff were also given regular additional training to improve their skills and knowledge. One member of staff said, "We've had rescue medication, PEG and epi-pen [training]."
- Staff told us that they felt well supported. One person told us, "The training and supervision are regular."
- Records indicated that staff received regular group and individual supervision.
- Staff were given opportunities to complete accredited training to support their career development.

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

- Each of the people that we spoke with told us they, or their relative enjoyed the food at the service and had a good choice of meals and snacks. One relative commented, "Wow. You'd want to stay here just for the food. It's lovely."
- People were encouraged to eat together, but had the choice to have a different meal, or go for a meal in the community. The menu was discussed each week and people living at The Poplars and some people were supported to shop for ingredients and prepare meals.
- Some people were supported to prepare their own meals in accordance with their care plan. One person told us, "Sometimes I make cakes. I made crumble today from scratch."

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

- Staff and managers worked effectively with healthcare professionals to ensure that people received the care they needed. We saw evidence in care records that GP's and other healthcare professionals maintained their involvement when people accessed the service at The Poplars.
- Staff were aware of people's individual healthcare needs and were able to explain how they met these needs through the provision of care, support and activities.

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

- The Poplars is based in two residential buildings close to local facilities. Externally, there was nothing to indicate that it was a registered care home which helped to promote the concept of community living.
- Some of the people using the service at The Poplars had support needs relating to their physical disability. Some rooms had been specifically adapted to help staff provide safe, dignified care.

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. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Staff obtained consent for people's care and support. Staff understood the principles, of the MCA and people were supported wherever possible to make their own decisions.
- Where necessary, staff completed mental capacity assessments and the best interest decision making process was followed and documented.
- People were free to leave The Poplars if they chose.

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.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives spoke very positively about the caring nature of staff. They told us that they were always treated well by staff and were involved in decisions about their care. One person said, "The staff treat me nicely. [Staff name] is my friend." While a relative told us, "Just everything that they do [is very good]. I can tell that [relative is] getting properly looked after."
- We saw a number of examples where staff spoke to people with kindness and respect throughout the inspection.
- Staff were clear about their responsibilities in relation to equality and diversity and supported people appropriately. The service was in the process of improving its approach to equality and diversity by changing systems and paperwork. We were given one example which showed how respectful the service was in relation to a person's needs and preferences.

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

- People were encouraged to comment on the provision of care and were actively involved in the decision-making process through discussions with staff and regular meetings.
- Staff discussed decisions with people and offered choices throughout the inspection. Important decisions were recorded in care records and reviewed.
- Most people had a family member to act as an advocate. In some cases, staff had supported people to access an independent advocate.

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain and develop their independence. One person told us, "I like the bungalow more. I always try to come here. [I get to do] more walking."
- Staff supported people with their personal care needs in a discrete and sensitive manner. Staff told us how important this was to people and explained how they supported people's right to privacy at all times.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service 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

- We saw clear evidence that people's individual needs and preferences were consistently considered as part of the care planning process. We also saw that needs and preferences were reflected in the way care was provided. One person told us, "My fiancé comes to stay if I'm here for a few days."
- Staff knew people's personal histories and their likes and dislikes. They used this information to hold conversations and to suggest activities. Where people were reluctant to participate in activities, they were encouraged, but their decision was respected.
- Important information was made available in a range of accessible formats to help people understand and to promote their involvement. Staff were able to explain how different people made use of facial expressions, body language and behaviour as alternative forms of communication.

Improving care quality in response to complaints or concerns

- The service had not received any formal complaints in the previous 12 months.
- None of the people that we spoke with said that they had made a complaint recently. They each said that they would feel comfortable raising any issues with any member of staff.
- We were told how the anxiety of a person with complex behaviours was reduced because staff made changes to the way in which care was provided. A relative said, "They [staff] came up with the strategy of having the same room, same staff. They always support us."

End of life care and support

- At the time of the inspection, nobody at the service was receiving end of life care.
- We discussed one example where the wishes of a person and their family had led to an extended stay at The Poplars towards the end of their life. Staff continued to provide support when the person was admitted to hospital.

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.

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 managers and the staff that we spoke with demonstrated their commitment to providing high-quality, person-centred care. This commitment was reflected in records and in their interactions with people.
- Staff demonstrated an understanding of their responsibilities in relation to the people living at The Poplars and the need to act with honesty and integrity.
- Managers and staff were aware of the potential limitations of staying in a shared respite service and had taken effective measures to ensure that people received individualised care that met their needs. For example, people's preference to stay in one, or another of the two buildings was always considered along with the mix of people staying at any given time.

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

- Each of the people that we spoke with had a clearly defined role within the service and understood their role and responsibilities.
- Staff spoke with confidence regarding their role and influence over the development of the service and the culture.
- Notifications regarding important events had been submitted as required.
- The registered manager and provider completed regular safety and quality audits to measure performance and generate improvements.

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

- People living at the service were involved in discussions about concerns and improvements in different ways. They were invited to attend regular meetings and complete questionnaires, or they could choose to engage less formally by speaking to staff, the registered manager, or a representative of the provider. A relative said, "You get letters regularly and invites to things. They send you surveys."
- Staff were supported to express their views and contribute to the development of the service at team meetings and handovers. The staff that we spoke with said that they could approach the registered manager, or the provider at any time.

Continuous learning and improving care; Working in partnership with others

- The provider placed continuous learning and improvement at the heart of their practice. They made effective use of audits, reports and other forms of communication to monitor and improve the safety and

quality of care.

- The registered manager was active in local support and improvement groups.
- Lessons learnt from incidents and accidents in other services were shared with managers and staff to improve practice.
- Additional partnerships had been developed with other services in the area to enhance the experience of people living at The Poplars. The registered manager explained how some of these partnerships were with organisations that could be viewed as competitors. She explained that these partnerships were important to give people care that met their needs consistently.