

Care at Home (Wearside) Limited

# Care at Home-Seafarers Way

## Inspection report

Moor Terrace  
Hendon  
Sunderland  
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Tel: 01918148750

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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

Care at Home – Seafarers Way is an extra care service providing personal care. At the time of our inspection there were 31 older people using the service.

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 relatives told us the care provided was good and staff were kind. People also felt safe living at the service with the staff who supported them. People received their medicines appropriately.

Staff received regular supervision and training. Staff supported people with eating, drinking and attending health related appointments, where required.

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 plans were personalised and detailed. They clearly described the help people needed from care staff. Complaints were investigated and people and relatives could raise concerns confidently. Staff identified community groups which could enhance potentially people's quality of life.

People, relatives and staff were positive about the leadership of the service. They said the registered manager was approachable and dealt with issues well. Regular quality assurance checks took place which were used to identify improvements to the service. The service had an improvement plan and progress against this was monitored. There were a range of opportunities for people, relatives and staff to provide feedback. Feedback was generally positive.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

This service was registered with us on 23 August 2019 and this is the first inspection.

### Why we inspected

This was a planned inspection based on the length of time the service has been registered with CQC.

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next

inspect.

## 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.

# Care at Home-Seafarers Way

## **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 Health and Social Care Act 2008.

#### Inspection team

One inspector carried out this inspection.

#### Service and service type

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.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

Inspection activity started on 24 June 2022 and ended on 17 August 2022. We visited the service on 24 June 2022.

#### 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 all this information to plan our inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers 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 four people and four relatives using the service. We spoke with the managing director and registered manager. We also received feedback via email from three staff, as well as reviewing a range of documents.

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

- The provider had effective systems to help keep people safe. People and relatives confirmed the service was safe. One person commented, "Staff are alright. I feel very safe." One relative said, "I have peace of mind [family member] is there. They seem to be on top of things."
- The provider dealt with safeguarding matters appropriately. Concerns were referred to the local safeguarding team. These were then investigated, and recommendations implemented, to help keep people safe.
- Staff understood the safeguarding and whistle blowing procedures. They were confident about raising concerns and confirmed they would use the procedure, if needed. One staff member commented, "I feel confident I could approach management. I've not used the whistle blowing policies."
- Where required, potential risks had been identified and assessed. Measures were identified to help keep people safe.

### Staffing and recruitment

- People received their care on time and for the expected duration. People confirmed staff were reliable and turned up when expected. One person told us, "I have a buzzer in my room. Staff come quickly."
- Staff confirmed rotas were manageable and helped them provide care when people needed it. One staff member said, "I am on a set rota, so I always know what days I work."
- New staff were recruited safely.

### Using medicines safely

- Medicines were managed safely. Records showed people received their medicines when they were due.
- People's care plans described the support required to help them take their medicines. Senior staff checked staff followed the correct procedures when giving people medicines.

### Preventing and controlling infection

- The provider had systems to help prevent and control infections. They had IPC procedures which staff followed.
- Staff had completed IPC training and used the correct PPE.

### Learning lessons when things go wrong

- Incidents and accidents were logged and investigated. Records showed action had been taken to help keep people safe.
- Senior staff reviewed incidents and accidents regularly to check appropriate action had been taken. This was also used as an opportunity to look for trends, patterns and areas for improvement.

# 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 assessed when they moved into the service. This was used to determine their care and support needs and agree how staff should support them.
- The assessment included conversations about people's wider social, cultural and religious needs. This enabled staff to have a better understanding of each person.

Staff support: induction, training, skills and experience

- Staff received good support and accessed the training they needed for their role. Records confirmed training and supervision were up to date.
- Staff confirmed they were well supported. One staff member commented, "Since the new manager has been at Seafarers, I feel extremely supported."

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

- People were supported to have enough to eat and drink, in line with their preferences. One person said, "Staff help with getting my meals."
- Care plans described the support people needed with eating and drinking.

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

- Staff supported people to access healthcare services and attend appointments, where required.
- Care records included information about health and social care professionals involved in people's 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 MCA 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.



- The provider followed the requirements of the MCA. Staff supported people to make choices and decisions about their care.
- MCA assessments and best interest decisions were made where people were unable to consent to potential restrictions.

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

- People were well treated and supported. They gave positive feedback about the care provided at the service and confirmed staff were kind. One person told us, "I love it because they are a good set of staff. They are great."
- Care plans described the support people wanted with making choices and decisions.
- Relatives felt involved in decisions about people's care. They also praised an app they could access, to view information about the care provided at the service. One relative said, "The app is excellent, you can see exactly what care has been done."

Respecting and promoting people's privacy, dignity and independence;

- People and relatives confirmed staff treated them with respect. One relative told us, "Staff are lovely with [family member], really caring."
- People were supported to be as independent as possible. Some people accessed the community independently and another person managed their own medicines. People commented, "Nothing could be improved. I go out by myself into town" and "Staff help me with getting ready, things like that. I take my own tablets."

# 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; End of life care and support

- People's care had been planned in line with their needs and preferences. Care plans described how people's care was to be provided and gave details of any specific preferences they had. These were reviewed and updated to reflect people's changing needs.
- People could discuss their future care wishes with staff, which were documented in care plans.
- Staff had been proactive in identifying opportunities for people to attend community support groups to help improve their quality of life and promote social inclusion. This was over and above meeting people's personal care needs. One staff member commented, "I enjoy working at Seafarers as I love the idea of service users living in a supported living environment and we are able to promote their independence more in this setting and give the service users a purpose and feel included more in their community."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were assessed and documented in a specific communication care plan.

Improving care quality in response to complaints or concerns

- The provider had a formal approach to dealing with complaints. People felt confident they could speak with staff or the registered manager if they had concerns. One person told us, "If I had concerns, I would talk to any of the carers, any of them."
- The provider's complaint log showed previous complaints had been fully investigated. Action was taken to address people's concerns and learn lessons.

# 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

- The provider aimed to prioritise people's needs when planning care. One relative said, "It is very friendly, very family orientated. It is lovely." One staff member told us, "The care provided is person centred and meets the needs of the service users in Seafarers Way. Staff go over and above to support service users outside of planned care and support."
- Staff and relatives gave extremely positive feedback about the management of the service. One relative said, "[Registered manager] really is very approachable. I can just walk in and speak to him. I can talk to him." One staff member said, "I feel very supported. My manager is very approachable and supportive, and I feel like he cares."

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

- The service had a registered manager. They were proactive in submitting the required statutory notifications for significant events to the CQC.

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

- The provider regularly engaged with people, relatives and staff to gather feedback about the service. One staff member commented, "My manager and senior management always invite my ideas when they look at ways to improve the service and listens to my opinions. I get feedback if they are good and they will explain if they think it may not work."
- Staff meetings took place regularly, this provided additional opportunities for staff to share their views. The registered manager recently met with relatives. Relatives attending gave positive feedback about the care provided.

Continuous learning and improving care; Working in partnership with others

- The provider had a structured approach to assessing the quality of the service. Staff completed regular checks and audits across a range of areas, including medicines administration and care planning.
- The provider had developed a service improvement plan, which included actions to improve medicines management, care practice and care documents. This was a working document which was updated regularly.

- The provider worked with other health services to work towards promoting good outcomes for people.