

Homes Together Limited

12 Robert Street

Inspection report

12 Robert Street
Harrogate
North Yorkshire
HG1 1HP

Date of inspection visit:
07 June 2022
13 June 2022

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Requires Improvement ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

12 Robert Street is a residential care home providing personal care to five people at the time of the inspection, this is the maximum amount of people the service can support. 12 Robert Street is a large terraced house within walking distance of the local amenities, there is a small garden area to the rear of the property for people to enjoy.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance the Care Quality Commission (CQC) follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Based on our review of all the key questions the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right Support

The service gave people care and support in a safe, clean, well equipped, environment that met their sensory and physical needs. Some areas of the service needed updating however the provider had an ongoing refurbishment plan in place for this. Staff understood how to support someone in line with the Mental Capacity Act however more clarity is needed around people's capacity and the safeguards in place. We have made a recommendation about this. The service made reasonable adjustments for people so they could be fully included in discussions about how they received support, including support to travel wherever they needed to go. A supportive relationship with a local taxi firm meant people could arrange their own transport and travel independently to their planned activities. People were supported by staff to pursue their interests and were given the opportunity to take part in 'taster' sessions for new activities within the local community. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome.

Right Care

People's care, treatment and support plans reflected their range of needs however some areas need expanding to give more insight to fully understand that person. For example, daily routines, which were important to people, had not been explained. Certain behaviours and communication traits were not fully detailed so new team members may miss cues of someone becoming agitated or distressed. The service has a consistent staff team who know the people well, so this did not impact the care people received. More detail was required around the monitoring and achievement of people's goals and aspirations: we made a recommendation around this.

People received kind and compassionate care. Staff protected and respected people's privacy and dignity, understanding and responding to their individual needs. One person told us, "They're [Staff] all very helpful

and caring and friendly. They're all like my friends."

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs.

Right culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff turnover was very low, which supported people to receive consistent care from staff who knew them well. Staff placed people's wishes, needs and rights at the heart of everything they did. People received good quality care, support and treatment because trained staff and specialists could meet their needs and wishes. Staff ensured risks of a closed culture were minimised so that people received support based on transparency, respect and inclusivity. We received positive feedback from people and their family members about the service. One person told us, "They're all good. I've never had a problem here, not here." And another person said, "Nothing could make it better here, it works."

Rating at the last inspection

The last rating for the service under the previous provider was good, published on 12 December 2020.

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

Why we inspected

We undertook this inspection to assess that the service is applying the principles of Right support, right care, right culture. A new provider took over this service, December 2020; this inspection was also to provide them with a rating.

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?

Requires Improvement ●

The service was not always 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.

12 Robert Street

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

Two Inspectors, a member of the CQC medicines team and an Expert by Experience carried out the inspection. 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

12 Robert Street is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us

annually 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 this information to plan our inspection.

During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided.

We spoke with four members of staff including the registered manager and support workers.

We reviewed a range of records. This included three people's care records and five 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.

Assessing risk, safety monitoring and management

- Audits and risk assessments were in place to help monitor the risk to people which covered all areas of the home, however, the risks to staff when accessing the cellar needs further assessment to ensure their safety is managed. Only staff accessed this area so there was minimal risk to the people who lived there.

We recommend the provider reassess the high-risk areas of the service and update their management accordingly.

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- People, including those unable to make decisions for themselves, had as much freedom, choice and control over their lives as possible because staff managed risks to minimise restrictions.

Staffing and recruitment

- Staff recruitment and induction training processes promoted safety. Staff knew how to consider people's individual needs, wishes and goals.
- The numbers and skills of staff matched the needs of people using the service. This may need to be reviewed as people's needs increase however staffing levels were appropriate at the time of the inspection.

Using medicines safely

- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.
- People could take their medicines in private when appropriate and safe.
- Staff reviewed each person's medicines regularly to monitor the effects on their health and wellbeing and provided advice to people and carers about their medicines.
- Family members were positive about how the staff managed people's medication. One relative told us, "They sort all her medication out and they keep me up to date, not overbearingly but just right."

Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff

supported people to follow them. The service had good arrangements for keep premises clean and hygienic.

- The service made sure that infection outbreaks could be effectively prevented or managed. It had plans to alert other agencies to concerns affecting people's health and wellbeing.
- The service's infection prevention and control policy were up to date.
- The service supported visits for people living in the home in line with current guidance.
- The service prevented visitors from catching and spreading infections.

Visiting in care homes

The service supported visits for people living in the home in line with current guidance. Visitors were not restricted in any way and safety was promoted while on site for example, personal protective equipment (PPE) was provided for visitors, health screening was in place and outdoor visits could be facilitated, weather permitting.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff were confident in their manager to handle any allegation of abuse appropriately and would not hesitate to report them.

Learning lessons when things go wrong

- Staff raised concerns and recorded accidents and incidents.
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.

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 requires improvement. This meant the effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs and care had been assessed in a person-centred way however, some areas of the care records needed further development to fully reflect that person. For example, behaviour support plans did not explain all the behaviours seen on the day of the inspection and the information to explain people's regular routines was missing.

We recommend the service review and update care records to fully reflect people's choices and needs.

- Appropriate policies and procedures were in place and accessible to all staff which reflected current best practice, guidance and legislation.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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.

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.

- We found that the manager and staff were aware of their obligations of working within the principles of the MCA however, more work could be done to ensure clear decision making when assessing a person's capacity and what safeguards are needed. This had not currently affected the people in the service however, a capacity review was recommended to the provider for one of the residents.

We recommend the provider consider current best practice guidance for working within the principles of the MCA and update their practice accordingly.

Staff support: induction, training, skills and experience

- People benefitted from reasonable adjustments to their care to meet their needs, and their human rights were respected. This was because staff put their learning into practice.
- Updated training and refresher courses helped staff continuously apply best practice.
- The service checked staff's competency to ensure they understood and applied training and best practice.
- Staff received support in the form of continual supervision, appraisal and recognition of good practice.

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

- People received support to eat and drink enough to maintain a balanced diet.
- People were involved in choosing their food, shopping, and planning their meals. Staff gave people the choice to be involved with the meal preparation and supported them to do so.
- Mealtimes were flexible to meet people's needs and to avoid them rushing meals.
- People could have a drink or snack at any time, and they were given guidance from staff about healthy eating.
- Meal choices were varied, and menus could be developed to consider cultural preferences and beliefs.

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

- People's care and support was provided in a safe and clean environment which met people's sensory and physical needs. Some areas of the home needed refurbishment due to the age of the property. The provider had a plan in place for this and people voiced their opinions about what design and decoration they would like.
- People personalised their rooms and were proud of their home. One person told us, "My favourite thing is my room. I spend a lot of time in my room when I'm not out. It's so nice. It's got my favourite colour, orange."
- The design, layout and furnishings in a person's home supported their individual needs.

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

- People had health passports which were used by health and social care professionals to support them in the way they needed.
- People were supported to attend annual health checks, screening and primary care services.
- People were referred to health care professionals to support their wellbeing and help them to live health lives.

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 saw people as their equal and created a warm and inclusive atmosphere.
- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to.
- Staff were patient and used appropriate styles of interaction with people.
- People felt valued by staff who showed genuine interest in their well-being and quality of life.
- Positive feedback was received from people and their families. One person commented that, "All the staff are nice, I like all of them. They're caring." A relative told us, "They're so helpful and caring, I cannot find a single thing about the staff that bothers me."

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

- People were given time to listen, process information and respond to staff and other professionals.
- Staff supported people to express their views using their preferred method of communication.
- Staff took the time to understand people's individual communication styles and develop a rapport with them.
- People were empowered to make decisions about the service when appropriate and felt confident to feedback on their care and support. One person said, "If I had a problem, they [staff] would listen to me."

Respecting and promoting people's privacy, dignity and independence

- People had the opportunity to try new experiences, develop new skills and gain independence. Activities had been provided in the local community with 'taster sessions' for people to attend and people were encouraged to complete daily tasks independently.
- Staff knew when people needed their space and privacy and respected this.

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

- The care records did not focus on people's quality of life, goals or aspirations for the future so these had not been monitored. However, staff were knowledgeable about people and worked with them to meet their needs and preferences.

We recommend the provider review how they record, assess and monitor people's individual goals, aspirations and outcomes.

- People learnt everyday living skills and developed new interests by being supported by staff who knew them well.
- People were supported to understand their rights and explore meaningful relationships.
- People were supported with their sexual orientation without feeling discriminated against.
- Staff spoke knowledgeably about tailoring the level of support to individual's needs.

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.

- Staff were meeting the communication needs of the people.
- Staff ensured people had access to information in formats they could understand.
- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something.

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

- People were supported to participate in their chosen social and leisure interests on a regular basis.
- People who were living away from their local area were able to stay in regular contact with friends and family via the telephone and social media.
- Staff were committed to encouraging people to undertake voluntary work, employment and vocational courses in line with their wishes and to explore new social, leisure and recreational interests. People could plan and independently travel to their preferred activities via a local taxi firm and staff helped facilitate meetings with friends.

Improving care quality in response to complaints or concerns

- People, and those important to them, could raise concerns and complaints easily and staff supported them to do so.
- The service treated all concerns and complaints seriously, investigated them and learned lessons from the results, sharing the learning with the whole team and the wider service.
- People had confidence in the manager to investigate and resolve any concerns raised. One relative told us, "The Manager is very approachable, if there's a problem I could call."

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 registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish.
- Management were visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say.
- Managers worked directly with people and led by example.
- Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture.
- Managers promoted equality and diversity in all aspects of the running of the service.
- Staff felt able to raise concerns with managers without fear of what might happen as a result.

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 understood their responsibility around the duty of candour and showed commitment to openness and honesty.
- The service apologised to people, and those important to them, when things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- The provider invested in staff by providing them with quality training to meet the needs of all individuals using the service.
- Senior staff understood and demonstrated compliance with regulatory and legislative requirements.

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

- The provider sought feedback from people and those important to them and used the feedback to

develop the service.

- People told us that the registered manager was approachable and that they would not hesitate to call them if they had anything to discuss.
- Regular meetings with the people and staff were taking place and recorded. This gave people the opportunity to raise any concerns and to also give their opinion on any improvements they would like to see within the service. Actions were recorded and followed up by the registered manager.

Continuous learning and improving care

- The provider invested sufficiently in the service, embracing change and delivering improvements.
- A system was in place to review staff practice which highlighted any shortfalls. Staff learned from this and were offered support to improve care.

Working in partnership with others

- The service worked well in partnership with other health and social care organisations, which helped to give people using the service a voice.
- The provider was involved in provider engagement groups organised by the Local Authority which aimed to help improve care services in the local area.