

Delam Care Limited

Poplars

Inspection report

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Tel: 01782209410

Date of inspection visit:
07 November 2016

Date of publication:
22 November 2016

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

This inspection took place on 7 November 2016 and was unannounced. At our last inspection in August 2014 we found that the service met the legal requirements and provided an overall good service.

Poplars provides residential support and accommodation for up to six people who have a learning disability and or a mental health diagnosis. At the time of this inspection six people used the service.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Systems were in place to ensure that people who used the service were protected from the risk of abuse.

People's individual levels of risks were assessed, monitored and reviewed; remedial action was taken quickly to protect people from the risk of harm.

There were enough suitably qualified staff available to maintain people's safety and meet their individual needs. Staff had been recruited using safe recruitment procedures.

People's medicines were managed safely; staff were well trained and supported people with their medication as required. People were supported to access external healthcare professionals and other agencies in order to ensure their healthcare needs were fully met.

People consented to their care and the provider followed the requirements of the Mental Capacity Act 2005 (MCA) where people lacked the capacity to make certain decisions about their care.

People were supported with their nutritional requirements and preferences.

People were supported by staff who were caring and compassionate. People were involved in the planning and review of their care.

The provider had a complaints policy available and people knew how to complain and who they needed to complain to. People were given the opportunity to feedback on the quality of their care and actions were in place to make improvements.

People and staff told us the registered manager was approachable and staff felt supported in their role.

The provider had systems in place to monitor the quality and safety of the service.

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. Staff were able to recognise abusive situations and when necessary action was taken. Risks to people's wellbeing were identified and assessed, reviewed and managed in a safe way. People were recruited through safe procedures and there were enough staff to support people in a safe and timely way. People's medicines were managed well.

Is the service effective?

Good ●

The service was effective. Staff received regular support and training to fulfil their role effectively. The principles of the MCA were consistently followed to ensure people were involved and consented to their care, treatment and support. People's nutritional and health care needs were met.

Is the service caring?

Good ●

The service was caring. People were treated with kindness and compassion. People's dignity and privacy was respected and their independence promoted.

Is the service responsive?

Good ●

The service was responsive. People received care that reflected their individual needs and preferences. People had some opportunity to be involved in hobbies and interests of their choice. There was a complaints procedure and people knew how to use it.

Is the service well-led?

Good ●

The service was well led. There was a registered manager. Staff and people told us they felt supported to fulfil their role and the registered manager was approachable. Systems were in place to continually monitor the quality of the service.

Poplars

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 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 Health and Social Care Act 2008.

The inspection took place on 7 November 2016 and was unannounced. The inspection team consisted of one inspector.

Prior to the inspection we looked at the information we held about the service. The provider completed a Provider Information Return (PIR). This is a form that asked the provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at the notifications that we had received from the provider about events that had happened at the service. A notification is information about important events which the provider is required to send us by law. We reviewed the information we received from other agencies that had an interest in the service, such as the local authority and commissioners.

We spoke with four people who used the service; they were able to tell us their experiences with the service. We spoke with the registered manager, a senior member of care staff, and two care staff. We looked at two people's care records, staff rosters, two staff recruitment files and the quality monitoring audits. We did this to gain people's views about the care and to check that standards of care were being met.

Is the service safe?

Our findings

People who used the service told us they felt safe. One person told us: "Yes I feel safe I don't think anything will happen to me while I am here". Staff we spoke with knew the signs of abuse and who they needed to report it to if they suspected someone had been abused. One staff member told us: "I would report any concerns straightaway to the manager and if she was not available then I would phone the safeguarding team". The registered manager was aware of their responsibility and had made referrals to the local authority when they had concerns in relation to allegations of abuse.

We saw that people's level of risks had been assessed and action taken to reduce the risks to them. Where there were concerns with peoples' personal safety when out in the community we saw that risk assessments had been completed. These included the action staff needed to take to ensure the person was as safe as possible without infringing on their independence or rights.

The registered manager told us minimum staffing numbers were maintained over the 24 hour period with additional staff available when people had chosen an activity where they required additional staff support. For example, shopping, leisure and recreational activities. Staff confirmed that the levels of staff were sufficient for them to provide the care and support to people with their preferences and in a safe and effective way. The staffing levels were flexible to meet the individual needs of the people who used the service.

Staff were employed using safe recruitment procedures. Pre-employment checks were carried out to ensure that prospective staff were of good character and fit to work. This included references from previous employers and disclose and barring checks (DBS). DBS checks are made against the police national computer to see if there are any convictions, cautions, warnings or reprimands listed for the applicant.

People's medicines were stored and administered safely. People had a locked cabinet within their bedrooms in which to store their medications. One person who used the service told us: "The staff help me with my medicines; this is okay as if I looked after them myself I would be worried that I would forget them or take them at the wrong times". Staff told us that currently all people who used the service needed support with their medications. We saw that some people were prescribed medicines that had to be taken at regular times. We saw arrangements were in place to ensure staff adhered to these instructions.

Some people had been prescribed medicines that could be taken when needed and as required. These medicines were often referred to as PRN medicines. We saw information had been provided to inform staff of when and how often these medicines could be offered. We saw one person had been prescribed PRN medicines to help when they were feeling anxious and distressed. Staff explained that PRN medicines were regularly reviewed by the person's consultant to ensure they were still relevant for the needs of the person.

Is the service effective?

Our findings

Staff confirmed they had sufficient training opportunities to enable them to support people who used the service. One staff member told us training was on-going and regularly refreshed. They had both computer based and face to face training and they found both ways of learning useful. The registered manager told us that conflict management training had been arranged so that staff would have an additional awareness and confidence if any challenging situations arose.

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. Where concerns were identified in relation to people's capacity to manage their own money, safety and personal vulnerability an assessment had been completed. Best interest decisions were made in corroboration with other professionals to ensure the action needed was in the person's best interest. We observed and records showed that the principles of the MCA were being followed.

The Deprivation of Liberty Safeguards (DoLS) is part of the Mental Capacity Act 2005. The legislation sets out requirements to make sure that people in care homes are looked after in a way that does not inappropriately restrict their freedom. The registered manager told us they had made referrals for some people to be legally deprived of their liberty and they were waiting for the authorisations to be granted. We saw when people's freedom of movement was restricted they were supported in such a way as was the least restrictive which ensured their safety and promoted their independence and rights.

People's nutritional needs were met. One person told us they and other people who used the service planned the menu for the week and then went grocery shopping to buy the provisions. People told us they made their own breakfast and lunch but were supported to prepare and cook the evening meal with the staff. One person told us they particularly liked Fridays as it was 'take away' night.

People were supported with their healthcare needs. We saw records that confirmed people had access to a wide range of health facilities. These included doctors, wellbeing clinics, consultant psychiatrists, dentists and chiropodists. All people had a health action plan which recorded why, when and where they visited health services.

Is the service caring?

Our findings

People told us the staff were friendly and kind. One person described all the staff as 'lovely'. We saw people had built relationships with the staff and staff knew people well. People were treated with dignity and respect and communication between people was respectful and supportive. We saw staff spend time with one person who became anxious about their finances. Staff patiently spoke with the person and explained their situation and offered reassurances that their financial situation was okay.

People were encouraged to be as independent as they were able to be. People told us they all had their own room and that they were able to access all areas within the service. Some people needed support and guidance with making choices about their care and support including what to eat and where to go. Other people were able to make their own choices. One person who used the service told us: "I like to spend time in my room but I go into the lounge to watch the television, I do what I want to do". Some people spent time in their rooms, whilst others sat in the lounge.

The registered manager explained that people had the support from an independent advocate when decisions were needed in regard to people's individual circumstances. We saw people were actively involved with planning and agreeing their care and support needs and how they preferred to have these needs met. One person had recently been involved with drawing up a weekly activity schedule with their key worker. They were unable to fully tell us about this but spoke of the things they liked to do and we saw that they were supported with their plan of action.

People were encouraged to maintain links with their families and friends. Friendships had been forged with other people who lived close by and staff told us people visited each other often and enjoyed each other's company. We saw one person visited their longstanding friend nearly every day, they told us they enjoyed this. The registered manager told us that the parents of some of the people who used the service had sadly passed away. They told us two people had asked if they could visit the graves of their relatives at Christmastime. The registered manager had already made plans and arrangements to facilitate this request.

Is the service responsive?

Our findings

People received care that was personalised and met their individual needs. Everyone had a plan of care which informed staff of their history, likes, dislikes and preferences. The plans were available in both written and pictorial format which ensured that people were able to understand the information in their care records. We saw people's care was regularly reviewed and plans reflected people's current care needs.

Staff knew people well and we observed they followed people's individual plans. We saw that people received the care and support that reflected their preferences. Staff told us of the swift action that had been taken when there was a significant change in a person's care and support needs. Staff and other professionals were fully involved with the person to ensure they received the level of support they required. The care and support plan was amended to ensure all staff were aware of the changes and had the most up to date information regarding the person's support needs.

People had choice over their daily lives and were supported to have as much control over their lives as possible. People required varying levels of support to maintain their independence. One person told us: "This is my home, I do what I want to do and I don't want to go anywhere else. I am very happy here". We saw that people enjoyed a variety of pastimes, this included visiting friends and accessing the local community amenities.

People got together each week to discuss the weekly food menu, activities they would like to participate in and holiday venues. Staff told us people could do whatever they wanted to do and the staff would be available to support them. The service was responsive, listened and enabled people to live their own lives in the way they preferred.

There was an accessible easy to read complaints procedure in place. People told us they would be able to speak with the registered manager or their key worker if they were unhappy or had any concerns. The registered manager told us they had received one formal complaint since our last inspection. We saw the complaint was fully documented and action was taken to resolve the complaint. Thank you cards were on display acknowledging the good support that had been provided to both the staff and people who used the service.

Is the service well-led?

Our findings

There was a registered manager in post. People told us the registered manager was supportive and helpful. We saw good relationships had been developed and maintained; people who used the service regularly visited the office and spoke with the registered manager. Conversations were light hearted and friendly. There was a clear management structure. Staff knew who to report to and there was an on call system in place. This enabled carers to obtain support, guidance and advice at times when the registered manager was off the premises.

People had the opportunity to air their views and express their opinions of the service through formal and informal platforms. Satisfaction surveys were distributed each year, some people attended the local Service User Forum and people meet with their key worker each month. The registered manager included in the provider information return (PIR) information regarding the service user platform: 'A local Service User Forum has been set up this year as there are a number of our services very local to one another. They can discuss any matters that affected them individually or as a group. They can also put forward any ideas for the home that might be useful for the other houses'.

Staff told us they had regular supervision with their line manager and an annual appraisal. This gave them the opportunity to discuss work related issues and their training and development needs. The registered manager had a plan of the supervision sessions so that they and the staff could plan ahead and have full benefit of these one to one sessions.

Audits and checks regarding the systems in place to assure the safety and the quality of the service had been completed. For example accidents and incidents were audited on a monthly basis, any trends or themes were then speedily identified and action taken to reduce the risk of further incidents from occurring. We saw that recently an incident had occurred which affected the safety and confidence of a person. Action was quickly taken to assess the situation and put in measures to reduce the risk of a recurrence.

The registered manager was aware of the need to continually improve the service and these included plans to maintain the environment. They had produced a record of the items which required attention that would benefit and enhance the comfort for the people who used the service. Plans had been made to redecorate and refurbishment some areas within the service. Some windows required repair or replacement, the registered manager told us that contractors had been contacted and they were currently waiting for their response. The registered manager told us quality and compliance visits were completed twice a year to ensure standards were maintained.