

Starcare Limited

Abbotts Wood ECH

Inspection report

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Date of inspection visit:
04 March 2020
06 March 2020

Date of publication:
25 March 2020

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

Abbots Wood is an Extra Care housing scheme where people using the service lived in a large gated community on the outskirts of Chester City. 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 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.

People felt safe using the service and were protected from abuse and the risk of abuse. Procedures were in place for the safe management of medicines and people received them on time as agreed in their care plans. Safe recruitment practices were followed. Infection control practices were followed to minimise the risk of the spread of infection and regular safety checks were carried out.

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.

Systems were in place to monitor the quality of the service that people received. People's needs and choices were assessed prior to them using the service. People received care and support from experienced staff who received training and supported for their role. People were supported to have a nutritious and balanced diet of their choice. People's healthcare needs were met by staff and staff worked closely with healthcare professionals.

People and their family members felt the service met their needs and positive relationships had been formed with the staff delivering care and support.

People and their family members had access to information about how to make a complaint about the service.

Systems were in place to monitor the quality of the service that people received. The registered manager sought information and guidance from other agencies to continually develop the service.

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

Rating at last inspection and update

This service was registered with us on 10/10/2018 and this is the first inspection.

Why we inspected

This was a planned inspection, Abbots Wood Extra Care Housing Scheme was registered with us on 10/10/2018 and this is the first inspection.

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.

Abbotts Wood ECH

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 carried out by one inspector.

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 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

This inspection was unannounced.

Inspection activity started on 4 March 2020 and ended on 6 March 2020.

What we did before 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.

What we did before inspection

We reviewed information we had received about the service. We sought feedback from the local authority who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and one relative about their experience of the care provided. We spoke with eight members of staff including the managing director, registered manager, senior support workers and care and support workers.

We reviewed a range of records. This included four people's care records and medication records. We looked at four 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

- People were protected from abuse. Safeguarding procedures were in place. Staff had completed safeguarding awareness training. Staff had access to information on how to protect people from the risk of harm.
- Staff knew how to refer any concerns they had about people's safety.
- People told us they felt safe using the service.

Assessing risk, safety monitoring and management

- Risks to people were assessed and known to staff and plans were in place to minimise those risks.
- Staff had access to policies and procedures in relation to health and safety and staff had received training in this area.
- Regular safety checks were carried out on the environment that staffed worked in and the equipment they used.

Staffing and recruitment

- Sufficient numbers of suitably trained and experienced staff were deployed to safely meet people's needs.
- The recruitment of staff was safe. Appropriate checks were carried out on applicant's suitability for the role before they were offered employment.
- People told us that staff were always available to meet their needs. Comments included "Staff are brilliant, I have nothing but praise for all of them" and "The staff are so good they make sure I'm safe in their care".

Using medicines safely

- The service managed medication procedures and regular reviews of medicines records took place.
- The staff provided safe administration of people's medicines.
- Staff responsible for managing people's medicines had completed training in this area.

Preventing and controlling infection

- Staff had completed infection control training and followed good practice to minimise the risk of the spread of infection.
- Equipment was available to prevent the spread of infection.

Learning lessons when things go wrong

- Lessons were learnt, and improvements made following accidents and incidents.

- Accident and incidents were recorded and reviewed to look for ways of minimising further occurrences.

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 as 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 individual needs and choices were assessed prior to using the service.
- People told us staff supported them extremely well and that they received the care and support they needed.

Staff support: induction, training, skills and experience

- Staff had the right knowledge, skills and experience to meet people's needs effectively.
- Staff training records showed that staff were up to date with training and attended updated training when required.
- People spoke positively about the staff team. Comments included "Staff are brilliant" and, "Staff know what they're doing they are so good".
- Staff received regular support and guidance from their manager.

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

- People were supported to maintain a healthy balance diet.
- People had a choice of what meals they wanted, and staff would prepare meals. There was a restaurant at the scheme that staff could collect meals for people or support them to go.
- People told us that with the support of staff, they planned their meals.
- Advice from healthcare professionals in relation to eating, drinks and specific health conditions were planned for and recorded in people's care plans.

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

- The service was provided in peoples homes. As part of the persons assessment the ergonomics were assessed and ensured staff provided the care and support required.
- People had access to equipment provided by healthcare professional services to assist them in maintaining their independence in their home and the community.

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

- The service managed supporting people well to attend their appointments.
- People had registered with health and other services and understood the importance of their well-being.

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.

- The service had the DoLS procedure in place staff understood when and why it would be initiated for a person.
- Staff had received training in this area and understood the procedure for the best interest of the person.

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

- People told us that they were looked after well by staff. Their comments included, "All staff are brilliant, so caring. The care I receive is always provided in a dignified way", "All the staff are excellent", "I am always treated with respect, I enjoy the daily visits from the staff" and, "The staff totally understand my needs".
- Staff knew people well and it was evident from their interactions with people that positive relationships had been formed. Comments from people included "The staff are always friendly and upbeat" "Staff are all amazing".
- A family member spoke positively about the service their family member received. The family member told us that staff go above and beyond to care and support their relative.

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

- People and their family members were encouraged to share their views about the care provided.
- A family member confirmed all their family had been involved in supporting their relative to make decisions about their care and support and wellbeing.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect. People's comments included, "Staff are always respectful, they know me so well", "Staff always ask if I want their support with anything, they are all very respectful".
- People told us they were given choice and control over their care. People's comments included "Staff always respect my choice of day to day care as it can vary", and, "I choose what I want to do on the day, staff always support me in my decisions".

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.

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.

- People's specific communication needs were recorded in their care plans.
- Information was provided in different formats where this was needed to support people's understanding.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

● People's identified needs had been planned for and were recorded in their care plans. People who used the service and staff had access to this information.

● Records were maintained of the care and support offered and delivered to people.

A family member told us that they were updated about their relative's care and support where appropriate, were involved in care plan reviews.

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 had access to the activity of playing bingo within the Extra Care Scheme to offer stimulation to prevent social isolation.

● People were supported to pursue their hobbies and interests. Peoples comments included "I come and go to activities outside my home, I like keeping active", "Staff always check that I am ready to go out", and "I enjoy going to the bingo, its great fun".

Improving care quality in response to complaints or concerns

● People and a family member knew who to speak to if they were unhappy about the service they received. Their comments included "I would talk to the manager but I have no complaints the staff go above and beyond for me", "I would talk to [staff member] if I wasn't happy but I am very happy with everything they do" and, "I don't have any complaints, they are so good".

● A system was in place to record and monitor any complaints received about the service.

End of life care and support

● The service had a policy for end of life care.

● The registered manager told us that the service would be supported by health professionals.

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

- Person-centred care was delivered and tailored around people's needs, wishes, choices and preferences.
- Staff were committed to enhancing the experiences of people. People told us they were empowered and supported to remain as independent as possible.

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 was aware of their legal responsibilities, the importance of investigating incidents/events that occurred and being open and transparent with their findings.

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

- The registered manager and staff were clear about their responsibilities and worked together in providing a good level of care and support.
- Systems and processes for audits, quality assurance and improving practice were in place.

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

- Arrangements were in place to engage and involve people using the service, family members and staff.
- Peoples equality and diversity support needs were assessed and determined from the start of their care package provided by the service.
- Staff followed advice and worked in partnership with others such as health care professionals to ensure the best possible outcomes for people.

Continuous learning and improving care

- Quality assurance processes were in place, assessing and identifying areas of improvement required.
- Staff received regular support and training for their role to ensure their practice was up to date and safe.
- The provider sought information and guidance from good practice guidelines to continue to develop the service.

Working in partnership with others

- Staff worked closely with other healthcare and social care professionals, so people received care that was tailored around their support and healthcare needs.