

# Prime Life Limited Old Station Close

#### **Inspection report**

Unit 1, Old Station Close Shepshed Loughborough Leicestershire LE12 9NJ Date of inspection visit: 08 May 2017

Good

Date of publication: 07 July 2017

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Ratings

#### Overall rating for this service

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

We carried out an unannounced inspection on 8 May 2017.

Old Station Close is a residential care home that provides care for up to 21 people who live with learning disabilities and mental health. The building is purpose built with accommodation in three distinct areas, all with single rooms with and en-suite facility. People have access to a landscaped garden. At the time of our inspection 21 people were using the service.

At our last inspection in March 2015, the service was rated 'Good'. At this inspection we found that the service continued to be 'Good'.

People continued to receive safe care. All staff, including care workers and domestic staff knew how to recognise and report any signs that people were abused or at risk of abuse.

The provider had assessed risks relating to people's care to help them to remain safe whilst encouraging them to be as independent as they wanted to be. The provider had procedures in place for staff to report concerns and for those concerns to be investigated and acted upon.

Staff were appropriately recruited and there were enough staff to provide care and support to people to meet their needs. People were supported to receive their medicines safely.

The care that people received continued to be effective. Staff had access to the support, supervision and training that they required to work effectively in their roles. People were supported with their nutritional and health needs and were supported to access health services when they needed to.

People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

People developed positive relationships with the staff that were caring and treated them with respect, kindness and dignity.

People consistently experienced care and support from staff which helped them to achieve their aspirations to lead more independent lives. People's needs were met in line with their individual care plans and assessed needs.

People and their relatives felt they could raise a concern and the provider had systems to manage any complaints that they may receive.

The provider had effective arrangements for monitoring and assessing the quality of care people experienced. These included seeking and acting upon the views for people who used the service, their

relatives, staff and health professionals who visited the service.

Further information is in the detailed findings below.

#### The five questions we ask about services and what we found

We always ask the following five questions of services.

<b>Is the service safe?</b> The service continued to be safe.	Good ●
<b>Is the service effective?</b> The service continued to be effective.	Good ●
<b>Is the service caring?</b> The service continued to be caring.	Good ●
<b>Is the service responsive?</b> The service continued to be responsive.	Good ●
<b>Is the service well-led?</b> The service continued to be well-led.	Good •



## Old Station Close 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 is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 8 May 2017 and was unannounced.

The inspection team consisted of an inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of service. The expert by experience for this inspection had experience of caring for and supporting people who lived with learning disabilities.

Before the inspection visit, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what it does well and improvements they plan to make.

Before our visit we reviewed notifications the provider had sent to the Care Quality Commission about incidents that had occurred at Old Station Close since our last inspection. Notifications are events a provider has to tell us about, for example serious injuries or incidents that occur between people using the service.

On the day of our site visit we spoke with eight people who used the service. We observed how staff interacted with people. We spoke with the registered manager, a regional manager, two senior care workers, a care worker and a maintenance person who looked after the building and facilities.

We looked at two people's care plans and associated records. We reviewed information about the training and support staff received. We looked at a staff recruitment file to see how the provider operated their recruitment procedures. We reviewed records associated with the provider's monitoring of the quality of the service. These included surveys and audits.

We contacted the local authority that funded some of the care of people using the service and Healthwatch

Leicestershire, the local consumer champion for people using adult social care services, to see if they had feedback about the service.

### Our findings

The support that people received made them feel safe at Old Station Close. A person told us, "I am safe and my room is safe." Several people told us they went out into the local neighbourhood and beyond. They felt safe when they went out because staff had advised them about staying safe when they were in the community. People told us they felt safe because the staff were caring and understood their needs. A person told us, "The staff are trained and they are kind to me" and another said, "The staff know what they are doing."

People continued to be protected from the risk of harm because staff had received training in how to safeguard people and applied this learning effectively on a day to day basis. They supported people to exercise choice and managed the risks associated with activities people engaged in. A person told us," I can do what I want when I want to. There are no restrictions."

There were enough experienced and skilled staff that had been safely recruited to provide people's care and support. Staff were effectively deployed to ensure that people received support when they needed it. A person told us, "I don't have to wait when I need help." This included supporting people to participate in activities when they wanted to.

People continued to be supported to have their medicines at the right times. People who went out a lot were encouraged to organise their activities in such a way that they did not miss their medication. A person told us, "I can go out when I want to but have to be back at certain times for my meds. Like out at 10.30 and back for 1.30 for meds. I like that the staff look after my meds."

#### Is the service effective?

#### Our findings

People continued to be supported by staff that had the right skills and knowledge to consistently provide good quality care and support. A person told us, "The staff are good. They get training done." Some of the people who used the service told us they participated in staff training sessions which made them felt assured that staff had the right training. A person told us, "Staff are trained well and they know me well." It was evident from staff we spoke with that they were able to apply their training successfully when providing care and support to people.

The Mental Capacity Act (MCA) 2005 provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Staff supported people in line with the MCA, for example, they sought and received people's consent before providing support. Staff also supported people in line with DoLS authorisations which meant they supported people in their best interests and in the least restrictive manner.

Staff continued to support people with their nutritional needs. People spoke in complimentary terms about the quality of their meals. Comments from people included, "The food is as good as in a French restaurant" and "The food is gorgeous." People who wanted to lose weight were supported to do so through healthier eating. A person said, "There is plenty to eat and drink but they encourage me to cut down on snacks for healthy eating reasons." A person who wanted to gain weight told us, "I'm underweight so they are feeding me up." Another person told us, "The food is very good and there is enough to eat and drink. The snacks are fantastic and there is always fruit here."

People's health needs continued to be met by staff who were attentive to changes in people's health. A person told us, "If I'm poorly they [staff] help me to calm down and they come with me to appointments." Another person said, "They help out with lots of things like illnesses." People who smoked were supported to limit the amount they smoked to agreed limits. This showed staff supported people to lead healthier lifestyles.

### Our findings

The service continued to be caring. Staff focused on the quality of people's experience of the service. There was a particular emphasis on supporting people to lead as independent lives as they wanted which people told us was important to them. Comments about that included, I'm getting better now and trying to be more independent with their [staff] help" and "I get support for my independence."

Staff involved people in decisions about their support because they cared about the people. They involved people in every day decisions about their care and support and longer term decisions. A person told us, "The care is very good because I have a say in how I'm cared for. People had opportunities to be involved with more general decisions at residents meetings where they contributed to decisions about holidays, activities and social events. A person told us, "At the residents meetings they [staff]) do what is asked for.

People enjoyed privacy or mixed with others when they wanted to. Staff respected people choices about how they spent their time and they supported people to respect each other's choices. For example, a person who liked to spend time meditating was not interrupted by anyone because they knew it was time the person wanted to spend alone. A person told us, "I can have private time here (lounge) or in my room."

People were supported to maintain contact with relatives which people told us was very important to them. They had also developed friendships with other people who used the service. A person told us, "We all get on well together here like a big family." The support staff provided ensured that people did not experience social isolation.

#### Is the service responsive?

### Our findings

People we spoke were very pleased with the care and support they received. Their comments included, "It's a smashing place and the care is good" and "I am definitely happy here." What people told us was compatible with what people had said about the service in the most recent satisfaction survey in the autumn of 2016 when people consistently rated their experience of the service as outstanding.

People experienced support that met their unique needs. They were supported with a variety of creative and innovative activities by skilled staff which led them to achieving things that were important to them and which enhanced the quality of their lives.

Staff empowered people to make decisions about their care and support and they set goals to achieve greater independence which staff supported them with. Staff respected people's choices about how they followed their religious beliefs and they supported people with their cultural interests.

People were actively encouraged to give their views or raise concerns about the service. They did this at reviews of their care plan, at monthly residents meetings but were also able to speak with the registered manager when they wanted to. A person told us, "At the residents meetings they write down what we say and request. They then do it. They ask us for ideas about trips and things."

People had access to a complaints procedure that was in an easy to read format. People felt listened to. A person said, "They do make an effort to solve problems. They will re-organise things that need to be organised which is good. I have no complaints." Another person said, "The manager would sort out things."

#### Is the service well-led?

### Our findings

The service continued to be well led.

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.

People and staff we spoke with told us they felt that Old Station Close. People told us they were very pleased to be living at Old Station Close and staff told us they were highly motivated by the registered manager. The registered manager inspired staff and people who used the service to be creative and innovative. They supported ideas such as the rambling, diners and swimming clubs and supported people to further their artistic gifts. Their support and holistic approach to care had inspired people to achieve things they might not otherwise have done. A senior told us, "I think we do a really good job of supporting people to lead independent lives. I'm proud of the service. They also supported staff. A care worker told us, "The support I've experienced has been really good. The manager has a lot of time for staff." People who used the service consistently rated it as good or outstanding in satisfaction surveys.

Arrangements for monitoring the quality of service operated at two levels. The registered manager carried out scheduled checks and audits. A regional manager verified the registered manager's findings ad carried out their own checks which were reported to the provider's operational board. The operational board members were supportive of this and other services run by the provider. Staff we spoke with told us they had met and spoken with board members and they felt they care a lot about the service. This demonstrated good governance arrangements and visibility and accessibility of senior managers to staff.