

Care In Style Limited

Happy Days

Inspection report

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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

Happy Days is a residential care home providing accommodation and personal care for up to four people. The service provides support to people who have a learning disability and/or autism. At the time of our inspection there were two people using the service.

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

Suitable arrangements were in place to protect people from abuse and avoidable harm. Staff understood how to raise concerns and knew what to do to safeguard the people they supported. Risks to people's safety were assessed and mitigated to ensure people were kept safe. There were sufficient numbers of competent staff deployed to ensure people's safety and wellbeing. People received their medicines as they should. People were protected by the prevention and control of infection. Lessons were learned and improvements made when things went wrong.

The service was well-managed, and quality assurance, monitoring and oversight arrangements in place were robust.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right Support:

- The premises was small and did not feel impersonal, intimidating or institutionalised. People were able to use communal areas as they wished and to have privacy for themselves.
- People were able to access specialist community based healthcare services to ensure their health and wellbeing needs were met.
- People received personalised support and staff knew people very well. Positive behaviour support plans were in place for people who could become distressed and anxious.
- The service had a positive staff culture that was person centred and inclusive.

Right Care:

- There were enough appropriately skilled staff to meet people's needs, despite minor workforce challenges as a result of COVID-19. Strategies were in place to continue to recruit new staff and fill any staffing shortfalls.
- People were protected from the risk of harm and staff had completed appropriate training.

- People received good person-centred care to meet their care and support needs.
- People were supported to pursue their interests and hobbies and to participate in their local community.
- Where people had individual ways of communicating, staff were aware of these and could effectively engage with each person.
- People were treated with care and kindness. Staff treated people with respect and dignity.

Right Culture:

- The registered manager led by example. Governance arrangements at the service were robust and in place to monitor the quality of the service.
- Staff told us the management team was approachable. Staff stated they were not afraid to speak out or raise issues.

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

Rating at last inspection

This service was registered with us in August 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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.

Happy Days

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

The inspection was completed by one inspector.

Service and service type

Happy Days is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement dependent on their registration with us. Happy Days is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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.

What we did before the inspection

We reviewed information about the service since the service was registered in August 2021. We sought feedback from the Local Authority who work with the service. We used all this information to plan our inspection.

During the inspection

We spoke with both people who use the service about their experience of the care provided. We also spoke with the registered manager, senior team leader, behavioural analyst and three members of staff. We reviewed both people's care files and three staff personnel files. We looked at the provider's arrangements for managing risk and medicines management, staff training and supervision data, complaint and compliment records. We also looked at the service's quality assurance arrangements.

After the inspection

We continued to seek clarification from the manager to validate evidence found. We spoke with one person's relative about their experience of the care provided for their family member.

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.

Systems and processes to safeguard people from the risk of abuse

- Effective safeguarding arrangements were in place to keep people safe. Since being registered in August 2021, no safeguarding concerns had been raised.
- One person's relative raised no concerns about their family member's safety. The relative told us, "Yes, I think they are safe."
- Staff demonstrated a satisfactory understanding and awareness of the different types of abuse, how to respond appropriately where abuse was suspected and how to escalate concerns about a person's safety to the management team and external agencies. Staff told us they would not hesitate to raise a safeguarding alert if they suspected abuse.

Assessing risk, safety monitoring and management

- Suitable arrangements were in place to manage risks to people's health and safety. Risk assessments were in place and information recorded within people's care plans identified risks associated with people's care and support needs and how to mitigate them. For example, the risks involved in enabling people to access the community safely and undertaking specific social activities.
- Information provided identified people who could become anxious and distressed; and potential factors which could cause them to behave in a way that may challenge others. Risk management strategies were in place to enable staff to manage the person's behaviour safely and to improve the person's quality of life without restricting their freedom and liberty.
- Staff spoken with had a good understanding and knowledge of the risk management strategies in place, to ensure their and others safety and wellbeing. Staff had received training to support people who might exhibit distress and frustration.
- The service's fire safety systems were checked at regular intervals to ensure these were safe and equipment maintained in good working order.
- Personal Emergency Evacuation Plans [PEEP] for both people had not been completed. This is a bespoke plan for people who may have difficulties evacuating to a place of safety without support. An 'emergency grab' bag for the service was not in place at the service. This should contain items and information that are essential to recovering or continuing the provider's business and vital information that will assist staff and the fire and rescue service. Following the inspection, the registered manager wrote to us and confirmed the PEEP for each person had been completed and an 'emergency grab' bag ordered.

Staffing and recruitment

- The registered manager confirmed both people living at Happy Days received between 13 and 14 one-to-one support hours each day, with additional hours in place to enable them to access their local community

and take part in social activities.

- The deployment of staff was suitable to meet both people's care and support needs in line with information documented within their care plan and this included carrying out their chosen activities.
- The registered manager confirmed the service had experienced minor workforce challenges during the most recent COVID-19 outbreak. This led to additional staff support from one of the provider's 'sister' services and increased agency staff usage. Where possible the same agency staff were utilised to ensure continuity of care.
- Appropriate arrangements were in place to ensure that the right staff were employed at the service.
- Staff recruitment records showed thorough recruitment procedures were in place to keep people safe. Relevant checks were carried out before a new member of staff started working at the service. These included processing applications, the obtaining of references, ensuring that the applicant provided proof of their identity, conducting employment interviews and undertaking a criminal record check with the Disclosure and Barring Service [DBS].

Using medicines safely

- We looked at the Medication Administration Records [MAR] for one person using the service. Information showed the person had received their medication at the times they needed them, and records were kept in good order.
- There was no evidence to suggest that people's behaviour was not being controlled by excessive or inappropriate use of medicines in line with NICE guidance on stopping over medication of people with a learning disability, autism or both [STOMP].
- Suitable arrangements were in place to ensure staff who administered medication were trained and competent to undertake this task safely and to an acceptable standard.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections. Visitors were screened for symptoms of COVID-19 and were required to wear appropriate PPE.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was accessing testing for people using the service and staff. However, improvements were required to ensure all staff employed at Happy Days recorded the outcome of their test results.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

- People's relatives were able to visit their family member in line with government guidance.

Learning lessons when things go wrong

- The registered provider operated an open and transparent culture whereby staff were encouraged to report concerns and safety incidents. Appropriate arrangements were in place to review and investigate events and incidents and to learn from these.

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 had their needs assessed prior to admittance to the service. This was to ensure their care and support needs could be effectively met and delivered by Happy Days.
- One relative confirmed they had been fully involved with their family member's move to the service and the pre-admission assessment process. They told us, "It was a big move for [Name of person using the service] but the transition went well.
- Suitable arrangements were considered and undertaken to ensure a smooth transition from the person's previous care setting to Happy Days. Where possible this was phased and managed to ensure any anxieties and distress were minimised for everyone involved.

Staff support: induction, training, skills and experience

- Suitable arrangements were in place to ensure staff received training so they could meet the needs and preferences of the people they cared for and supported. Staff training records viewed showed staff had received mandatory training in key areas.
- Staff received an induction comprising of training in key areas appropriate to the needs of the people they supported and an 'in house' introduction to the organisation. In addition to the above staff were given the opportunity to shadow a more experienced member of staff.
- Staff told us they felt valued and supported. Supervisions were completed at regular intervals allowing staff the time to express their views, to reflect on their practice and to discuss their professional development and training needs. Staff confirmed supervisions were a two-way process. One member of staff told us, "Supervision gives you room to say what you feel."

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

- People received sufficient food and drink of their choice and mealtimes were flexible to suit their individual needs.
- People were encouraged and supported to help with planning their meals and meal preparation. We saw people communicating with staff about what they wanted to eat at lunchtime and in the evening.
- The nutritional needs of people were identified and recorded to ensure these could be met.

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

- Staff worked well with other organisations to ensure they delivered good joined-up care and support.
- People's healthcare needs were met and they received appropriate support from staff. Relatives confirmed

they were kept informed of their member of family's healthcare needs and the outcome of any healthcare appointments.

- Care records showed people's healthcare needs were clearly recorded, including evidence of staff interventions and the outcomes of healthcare appointments. Each person had a hospital passport. If people are admitted to hospital this document is used to provide staff with important information about the person.

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

- People lived in a safe, well maintained environment.
- People's diverse needs were respected as their bedrooms were personalised to reflect their own interests and preferences.
- People had access to comfortable communal facilities, comprising of a large lounge and separate dining area.

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.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff had a good knowledge and understanding of MCA and Deprivation of Liberty Safeguards (DoLS).
- Staff were observed during the inspection to uphold people's rights to make day to day decisions and choices.
- Information available showed that each person who used the service had had their capacity to make decisions assessed.
- Restrictions in place for both people were identified and recorded. A best interest decision had not been recorded where restrictions were imposed. We discussed this with the registered manager, and it was clear this was an oversight and not systemic of restrictive practices at the service. Following the inspection, the registered manager confirmed the required documentation had been completed.

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 treated with care and kindness. Interactions were positive, person centred and focused on people's routines and personal preferences.
- People and staff were relaxed in each other's company and staff knew people well. Interactions were observed to be comfortable and relaxed. Staff had a good rapport with the people they supported.
- Relatives spoken with told us they were happy with the care and support provided for their family member. They told us, "Staff are very attentive to [Name of person using the service] and know to handle them. Staff listen and are open to advice and suggestions from us. Overall, we are very pleased with the service."
- Staff understood people's different communication needs and how to communicate with them in an effective and proactive way.
- The registered manager confirmed satisfaction questionnaires had yet to be put in place for people using the service and those acting on their behalf.

Respecting and promoting people's privacy, dignity and independence

- People received personal care and support in a way which maintained their privacy and dignity. Staff spoke to both people in a respectful way, without belittling them or using inappropriate language.
- People were supported to be independent. Staff encouraged people to do as much as they could for themselves according to their individual abilities and strengths. One person was supported by staff at lunchtime to make meal choices and to make themselves something to eat. Another person was supported to shower independently and were able to undertake some household chores.

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 received good personalised care and support that was responsive to their needs.
- Care plans covered all aspects of a person's individual care and support needs, focussing on the care and support to be delivered by staff, the person's strengths, what was important to them and their personal preferences.
- Information showed people's care plans were reviewed and updated to reflect where their needs had changed.
- The registered manager confirmed no one was judged to be at the end of their life. The registered manager was aware how to work in partnership with healthcare professionals, including the local palliative care team should the need arise. Staff had received end of life training.

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.

- Appropriate steps had been taken to meet people's information and communications needs.
- Although people's care plans were not in an easy read format, information regarding how people liked to communicate was clearly recorded.
- One person required specific assistive technology to enable them to effectively communicate. This referred to a symbol supported communication aid and a language programme that used signs with speech and symbols. Another person used 'objects of reference to aid their communication needs. These are objects consistently used with a person to represent people, objects and activities. Staff told us this helped them with their daily routines. This person also used social stories which had been developed by the organisations behavioural analyst.

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 able to maintain relationships that matter to them, such as with family members and other people who were important to them.
- People could spend their time as they wished and wanted. Suitable arrangements were in place to ensure they had the opportunity to take part in leisure and social activities of their choice and interest, both 'in-

house' and within their local community. One person confirmed they attended a local sports centre to play football and told us they enjoyed this activity.

- In addition to participating in social activities, one person attended school four days a week and one person attended college twice weekly.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place for people, relatives and staff to use if they had a concern or were not happy with the service.
- Staff stated they were comfortable to speak up and voice their concerns. One member of staff told us, "[Name of registered manager] listens and acts on things, they are very proactive."
- The registered manager confirmed since being registered in August 2021, no complaints had been raised about the service, either internally or from external sources.

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.

Leaders and the culture they created did not always support the delivery of high-quality, person-centred care; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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; Continuous learning and improving care

- The service had a positive culture which ensured the care provided to people using the service was person-centred, open, inclusive and focused on people's individual care and support needs. This was in line with the underpinning principles of Right Care, Right Support, Right Culture.
- Suitable arrangements were in place to assess and monitor the quality of the service provided. This included the completion of audits at regular intervals, data gathered and analysed to help identify and manage risks to the quality of the service and to help drive improvement.
- The provider had employed an external organisation to undertake an audit of the service. The registered manager confirmed this was planned but had not yet been initiated and completed.

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

- The registered manager understood the importance of their role and responsibilities. They demonstrated a commitment to providing good care for people using the service, providing support to staff employed and ensuring compliance with regulatory requirements was attained and improvements made when things went wrong.
- The registered manager was aware of their regulatory responsibility to submit the appropriate statutory notifications to the Care Quality Commission as and when required.
- The management team knew the people they cared for well and had a good relationship with the existing staff team.
- Relatives told us the registered manager was professional and communication was good.
- Staff were complimentary about the registered manager and told us they enjoyed working at Happy Days and that morale was good. One member of staff told us, "[Name of registered manager] listens and is approachable, I feel comfortable to go to them." A second member of staff stated, "The registered manager is actively interested in people's wellbeing. [Name of registered manager] is open to suggestions and ideas, they value your opinions. I work with a great team."
- The registered manager confirmed they received supervision and felt supported and valued by the provider.

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

- The registered manager told us plans were in place for people using the service and those acting on their behalf to complete a satisfaction questionnaire.
- Formal staff meetings had not yet been implemented but suitable systems were in place to ensure effective information sharing with staff. This was through the messaging and video calling platform, WhatsApp and through Microsoft Teams.

Working in partnership with others

- Information showed the service worked closely with others, for example, the Local Authority, healthcare professionals and services to support care provision.