Newlife Care Services Limited

Mountview

Inspection report

1-2 Stocksfield Square
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Stocksfield
Northumberland
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Tel: 01661844134

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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
Mountview is a residential care home providing personal care and accommodation to people with a learning disability and/or autism.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The service was a larger home, bigger than most domestic style properties. It was registered for the support of up to 10 people. Nine people were using the service. This is larger than current best practice guidance. However, the building fit into the local residential area and other larger domestic homes of a similar size and design. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff did not wear anything that suggested they were care staff when coming and going with people.

People's experience of using this service and what we found
Staff understood how to minimise risks and keep people safe without restricting them. Medicines were managed safely and people lived in an environment that was homely and clean.

People were supported by well trained staff who understood their needs and preferences. People's healthcare needs were assessed and were appropriate healthcare specialists were involved in people's care. Staff had worked together to research and develop a sensory room which people enjoyed spending time in.

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.

Staff were very fond of people and made sure people were treated with dignity, respect and patience. A

family member said, "Mountview wouldn't be the place it is without the staff, they really are lovely and manage the care very well."

Some care plans were very detailed and specific to people's needs. Others needed some further explanation about people's communication needs. The registered manager and deputy manager acknowledged this and prioritised the review of care plans. People were supported to maintain community links and develop new friendships. No complaints had been received since the last inspection.

A range of audits were used to assess the quality of the service and to identify any improvements that were needed. Action plans, identified what improvements were needed and progress was closely monitored.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion.

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

Rating at last inspection
The last rating for this service was good (published 23 December 2016).

Why we inspected
This was a planned inspection based on the previous rating.

Follow up
We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Mountview

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
This inspection was completed by one inspector.

Service and service type
Mountview is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 the inspection
We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We also reviewed information we had received about the service since the last inspection. We sought feedback from the local authority commissioners, safeguarding and Healthwatch. Healthwatch is an

independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used all of this information to plan our inspection.

During the inspection
We spent time with eight of the nine people who used the service. Not everyone was able to have a verbal conversation with us due to their complex needs so we took notice of gestures and facial expressions.

We spoke with the registered manager, the deputy manager, and four support workers, including senior support workers. We viewed a range of records including three people's care plans, medicine records and two staff files. We also looked at a range of records relating to the management and governance of the service.

After the inspection
We contacted two family members over the telephone.

Good

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse
- Since the last inspection there had been no safeguarding concerns. One person said, "I feel safe."
- Staff had attended safeguarding training and knew how to raise concerns. They were confident concerns would be addressed.
- Policies and procedures were in place and included the safeguarding of children and vulnerable adults.

Assessing risk, safety monitoring and management
- Risks to people were assessed and managed. Risk assessments included the need for staff training and equipment checks however this wasn't always relevant to the risk. This was discussed with the registered manager.
- Health and safety checks of the premises and equipment were completed in a timely manner and any concerns rectified.

Staffing and recruitment
- Safe procedures for the recruitment of staff continued to be followed. People were involved in recruitment however this was not documented.
- Staffing levels were such that people's needs could be met.
- Everyone told us there were enough staff, the staff team was stable and agency staff were not used.

Using medicines safely
- Medicines were stored, administered and recorded in a safe way.
- Staff spent time with people chatting with them in a respectful way when medicines were administered.
- A staff member said, "We attend training and have competency assessed annually for medicines."

Preventing and controlling infection

- The premises was clean and tidy.
- Systems were in place to prevent and control infection.
- Recognised systems were used for the safe storage, handling and preparation of food.

Learning lessons when things go wrong

- Incidents were analysed and changes made to minimise the risk of reoccurrence.
- Distraction techniques had been introduced to reduce people's anxiety and keep them engaged. This information was shared with day services so care was consistent and the number of incidents minimal.

Good

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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 physical, mental and social needs were assessed before they moved to Mountview.
- Care plans were developed which included people's preferences and choices.
- Care was delivered in line with best practice including The National Institute for Health and Care Excellence (NICE) guidance and CQC publications.

Staff support: induction, training, skills and experience
- Detailed induction programmes were used. The Care Certificate was completed by any staff who had limited experience of the social care sector. This provides an agreed set of standards for care staff.
- Specific training was sourced to make sure staff understood people's needs. This included autism, non abusive physical and psychological interventions and positive behaviour support.

Supporting people to eat and drink enough to maintain a balanced diet
- People were supported with any nutritional needs.
- Care plans and risk assessments were in place and included detail of any healthcare professional's guidance.
- A pictorial menu was used and people chose what they wanted to eat and drink.

Staff working with other agencies to provide consistent, effective, timely care
- Staff worked well with other agencies and systems were in place to ensure effective communication and sharing of information.
- Other agencies, including day support, were invited to people's care reviews were appropriate.
- Individual transition plans were developed to support people to have a successful move to Mountview and get to know the staff and the other people they would be living with.

Adapting service, design, decoration to meet people's needs
● The home was wheelchair accessible and there was a lift to the first floor.
● Staff had worked together to design a well-equipped sensory room which people clearly enjoyed.
● Specialist equipment had been sourced, such as moulded bean bags to make sure people had comfortable and safe seating.

Supporting people to live healthier lives, access healthcare services and support
● People were supported with their healthcare needs and attended regular appointments with chiropodists, dentists and opticians.
● Specialist healthcare services were involved in people's care where needed, including speech and language therapy, occupational therapy and district nurses.
● People had hospital passports which contained all the information healthcare professionals would need to know if a person was admitted to hospital.

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. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

● People's capacity had been assessed and best interest decisions made where appropriate.
● Appropriate DoLS applications had been made and there were no conditions on any current authorisations.
● Staff sought people's consent before providing care and support.
● People were not unduly restricted and were supported to make decisions wherever possible.

Good

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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 continued to benefit from long term, kind and caring relationships with staff. Staff treated people well and supported them in a respectful manner. One person said, "I like living here, I like [names of staff]."
● Staff were incredibly patient and kind with people whose behaviour and communication could, at times, be repetitive. A family member said, "The staff really are excellent, they know [person] so well and are fantastic with them."
● People were supported to maintain relationships and develop new friendships. Staff supported and encouraged people who were in long term relationships to maintain these relationships.
● People were settled and enjoyed positive relationships with staff. A family member said, "Staff are brilliant, they have a lovely rapport with [person] and I'm so pleased."

Supporting people to express their views and be involved in making decisions about their care
● People were supported to express their views. This often involved staff interpreting people's body language and facial expressions.
● Staff involved people in making decisions about their care and support as far as possible and always asked permission before providing any support.
● Residents meetings were held and everyone was supported to have a say and be included.
● Advocacy support was available if needed. The registered manager explained how some people had advocates who spoke on their behalf which provided different perspectives for staff to explore.

Respecting and promoting people's privacy, dignity and independence
● Staff understood that at times people would want to spend time alone. This was respected and supported. Visual aids were used to discreetly communicate that bathrooms were in use.
● Dignity was respected, and support was prompted and provided in discreet and sensitive ways.

● Independence was encouraged, and some people chose to help with meal preparation and household jobs. One person said, "I like to cook. What can I make for dinner?"

Good

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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

- Staff had supported people for many years, so they knew people well. People were supported to be involved in their care and staff made sure their needs preferences were met.
- Some care plans were very detailed and specific to the person. Others would benefit from including detail on how people communicate and express their emotions. The registered manager and deputy manager acknowledged this and prioritised completing this work.

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.

- Easy read information was available for people. Everyone had a welcome pack which was pictorial and included information about the service and how they would be supported.
- Pictorial information was used to support some people with decision making.
- Information could be provided in different formats and languages if needed.

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's interests and likes were documented and understood by the staff so in their free time people were encouraged to follow their interests and take part in activities.
- Bee active, arm chair exercises were popular. People were also supported to access the sensory room and massage and aromatherapy by qualified therapists was available, so people's sensory needs were met.
- People were well known within the local community and attended the local pub and community events.
- Staff supported people with maintaining existing relationships and developing new friendships. One

person had been supported to complete the Great North Run with a friend which their family member was very proud of. Another family member said, "The social contact with other people is very good."

Improving care quality in response to complaints or concerns
● Since the last inspection there had been no complaints or concerns received.
● An easy read, pictorial guide was provided for people.
● When asked what they would do if they were unhappy with something one person said, "I would tell [staff member]."

End of life care and support
● At the time of the inspection no one was being supported with end of life care.
● End of life care plans were in place and they were being reviewed to make sure they were up to date and included people's preferences were known.
● Staff had previously supported people at the end of their lives and spoke about people with respect, compassion and care.

Good

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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection we recommended the provider review and re-familiarise themselves with the requirements of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009, entitled Notification of other incidents. The provider had made improvements.

- The registered manager and deputy manager understood the requirement to submit notifications of certain incidents to the Commission and made sure this was completed.
- All staff were clear about their roles and the need to provide good quality care.
- A range of audits were completed to identify any areas for improvement. Action plans were closely monitored by the registered manager and the regional manager to make sure any required improvements were made.
- The provider had introduced monthly meetings for registered managers and deputy managers so they could share good practice and learn from each other.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff described the culture as being open and inclusive. One staff member said, "We all work together for the people who live here. It's like a family really."
- The organisations values were evident in the observations of relationships and interactions between staff and people. The registered manager said, "The values are to support and value everyone, to be transparent and develop uniqueness everyone is their own person."

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 duty of candour. They said, "It's about being open and honest with people when something goes wrong. The provider emailed about it and staff are trained in duty of candour."

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

● Family members told us how welcome they were made, and how they had been included in their relatives care.

● People and staff had strong links locally and people had been supported to maintain a community presence and were well known and respected.

● Questionnaires had been used to seek the views of people, their families, staff and external professionals on the quality of the service. All feedback had been positive.

● Easy to read pictorial surveys had been developed for people using the service so they were able to share their views.

Working in partnership with others

● The provider had introduced new systems to ensure registered managers worked in partnership internally as well as externally.

● Staff were involved in local forums including provider meetings and infection control meetings.

● Newsletters and updates from various organisations were received and used to ensure the service remained up to date with current best practice.