

Housing 21

Housing 21 – Lonsdale Court

Inspection report

Lonsdale Court
Pategill
Penrith
Cumbria
CA11 8LD

Tel: 03701924051

Website: www.housing21.co.uk

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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

Housing 21 – Lonsdale Court is an extra-care scheme. The building, known as a 'Court' has 29 apartments. At the time of this inspection, 31 older people lived at Lonsdale Court, of which 26 received personal care.

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 received high-quality, person-centred care. Their privacy and dignity were protected by staff who were caring and respectful.

People felt very safe living at Lonsdale Court with support from staff, who knew them very well. People's care needs were assessed, and action was taken to reduce any risks. The registered manager recorded and monitored accidents and incidents to minimise the likelihood of a reoccurrence.

People were cared for by trained and competent staff who were fully supported by the registered manager in their roles. Staff worked well with external professionals to ensure people achieved positive outcomes.

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 were involved in developing their care plans and making decisions. They were encouraged to maintain or regain their independence. The service was very flexible and was often changed to meet people's ongoing needs.

Staff arranged communal social activities to help reduce loneliness and promote socialisation. People were encouraged to join in and pursue their own interests and hobbies.

The registered manager carefully monitored safety and quality through checks and audits. High standards were achieved through continuous improvements.

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 (report published 23 February 2017).

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 remained safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service remained effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service remained caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service remained responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service remained well-led.

Details are in our well-led findings below.

Housing 21 – Lonsdale Court

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 conducted by one 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 care service.

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 announced. We gave the provider 48 hours' notice to ensure staff would be available at the office location. We also asked them to seek the permission of people who used the service, for us to visit them.

What we did before the inspection

We reviewed the information we had received about Housing 21 – Lonsdale Court since the last 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 used all this information to plan our inspection.

During the inspection

At the site visit, we spoke with the registered manager, two assistant care managers and three care workers. We reviewed four people's care records. We looked at information kept regarding the management of the service. This included three staff records and records related to the quality and safety of the service. We requested some additional evidence to be sent to us. This was received, and the information was used as part of our inspection.

We spoke with six people who received personal care and support and two relatives.

We emailed all staff for their feedback and to ask questions about their skills and knowledge. We received five responses. We also received feedback from a local authority social worker and an occupational therapist who worked in partnership with the service.

Is the service safe?

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; Assessing risk, safety monitoring and management

- People felt safe. One person said, "I'm really safe here, well I wasn't before on my own and this is great, it really is." A relative told us, "I have no worries about (family member) being here. I can go away and not worry at all, which is such a relief, in fact I would say this is the happiest (family member) has ever been in his life."
- Staff were trained to safeguard people and were proactive to protect people from avoidable harm.
- Staff carried out risk assessments on people's needs, such as mobility, falls and medicines. Action was taken to minimise risk which helped keep people safe. Staff promoted positive risk taking and encouraged people's independence.
- The system to report, record and monitor safeguarding issues, accidents and incidents remained in place. The registered manager used this information to identify trends and take additional preventative measures.

Staffing and recruitment

- There were plenty staff to manage the service safely and meet people's needs. One person said, "If I push my buzzer, (care workers) come straight away." A care worker said, "We've got enough staff and we all work well together."
- Staff delivered safe care because they were trained, competent and experienced.
- The system to recruit staff remained safe. Thorough checks were carried out on new staff before they were able to work with people.

Using medicines safely

- Staff followed a good system to ensure the management of medicines was safe.
- Medicine administration records were well organised and up to date.
- Regular checks of medicines were carried out by staff and the registered manager had oversight of this. Monthly audits were completed by the assistant care managers to make sure people had received their medicines as expected.

Preventing and controlling infection

- Staff took appropriate action to protect people from the risks of infection and cross contamination.
- Disposable gloves and aprons were worn by staff when undertaking personal care. Staff followed best practice guidance in relation to transporting and cleaning laundry.

Learning lessons when things go wrong

- The registered manager regularly evaluated the service. This helped to identify any areas for improvement.
- Lessons learned were shared with staff to improve their practices and the service.

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.

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 continued to be fully assessed at regular intervals. People achieved good outcomes through continuous effective support. A care worker told us, "Since (staff names) have become assistant care managers, our work place is effective, and they are always on the ball with updating paperwork."
- People's care plans fully described their needs, wishes and choices. They included people's preferences about how care should be delivered. A relative told us, "They (care workers) are really good, they all know what they are doing."
- Staff supported people in line with best practice guidance and relevant legislation. Staff 'leads' had been recently introduced on topics such as, The Mental Capacity Act, infection control and prevention, nutrition and hydration, pressure care and end of life care. The 'leads' shared important information and updates on topics to the team. This ensured high-quality care delivery was maintained.

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.

- Staff applied the principles of the MCA within the support they gave people with confidence. They assumed people had the capacity to make decisions, unless they assessed otherwise. People had consented to the care they received and were involved in any decisions made. Best interest decisions were made in accordance with legislation and people's wishes to ensure their legal and human rights were upheld.

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

- Staff continued to support people to achieve positive outcomes. The registered manager shared several examples of people whose lives had significantly improved since moving to Lonsdale Court.
- Staff worked proactively to involve external professionals in people's care. People received timely interventions from others when their needs changed.
- Staff had maintained good links with external professionals such as social workers and occupational therapists which helped people to live healthier lives and improve their well-being.

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

- Staff ensured people's nutritional needs were met. They monitored people's requirements and prompt action was taken when needed. Most people were independent with food and drinks and staff gave minimal support to encourage people to follow a balanced diet.

Staff support: induction, training, skills and experience

- Staff remained well trained to effectively support people. Their skills and knowledge were regularly updated. This included topics to increase staff awareness of people's specific needs, such as dementia and end of life care.
- A thorough induction was delivered to new staff. They also completed a probationary period and shadowing, to ensure their suitability for the role.
- Staff said they were very well supported by the registered manager. They had regular supervision meetings and an annual appraisal to identify further learning needs or potential development areas. Assistant care managers conducted spot checks to ensure staff remained competent with tasks such as medicines administration and manual handling. One care worker told us, "I have done all my basic training, my moving and handling, medicines, fire, safeguarding, all of that. I see the manager for my supervision, you can go to her with anything."

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.

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

- Overwhelmingly people provided good feedback about the staff and the service they received. One person said, "The (care workers) are great, I couldn't ask for better, we have a laugh."
- Staff were caring, kind and compassionate towards people. Another person said, "The (care workers) are lovely, spot on."
- Staff displayed extremely positive attitudes and they presented the right skills to deliver person-centred care. Staff knew people exceptionally well and they respected people's individual wishes and choices. Staff engaged very well with people and they provided important additional emotional support. One care worker said, "This is the best job I've ever had, I come in for the people who live here. It's so lovely learning about people's lives, they have done so many interesting things, it's a pleasure."
- An equality and diversity policy was in place and staff were trained to ensure people were treated with respect regardless of their sex, age, disability or beliefs. Staff promoted people's rights and ensured they were not discriminated against in any way.

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

- People were fully involved in making decisions about their care. Staff acknowledged when people needed help from others and helped them to obtain independent advice and external support.
- The registered manager frequently sought the views of people to make decisions about the service, such as how to spend funds or how to make improvements.

Respecting and promoting people's privacy, dignity and independence

- People's rights to privacy and confidentiality were wholly valued by staff. Staff fully maintained and promoted people's dignity. One person said, "The (care workers) are very polite, very friendly, they knock and call out. I know them all and if a new one starts, they come and introduce them." A care worker said, "I listen and talk to people. I support them to be involved as much as they can. I give them choice and control and respect their preferences, lifestyle and care choices. I also respect their right to privacy and personal space. I always treat them as equals and allow them to be as independent as possible."
- Familiar staff who understood people's needs provided consistent support to people. Staff were able to identify when people were anxious or upset and acted discreetly to provide prompt support.
- People had total control over their own lives and made their own choices. Staff encouraged people to regain, maintain and improve their independence. This had helped people to achieve good outcomes. One person said, "I do all my meals now, when I first came in (care workers) cooked for me. Then they sort of stood back and watched me until I was OK and now I do it all myself. That's good, that makes me feel I am

doing stuff for myself."

Is the service responsive?

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

- People were fully involved in creating their care plans with staff, external professionals and family members. Care plans were regularly reviewed. One person said, "I have a care plan and daily record, I call it the epilogue. They do that every day." A relative told us, "There is a care plan and we have reviews."
- Care plans were personalised and included a full assessment of people's individual needs. Staff followed people's care plans to support them to achieve their personal goals and experience positive outcomes. The support staff delivered was completely person-centred and considered people's own established routines and preferences. A relative said "We have had sight of the care plan and it is what we wanted."
- The service was entirely flexible and changed to accommodate people varying needs.
- In a recent survey, external professionals had made positive comments about the responsiveness of the service. This included, "reactive to patient needs"; "good response to falls or crisis situations" and, "flexibility to meet changeable needs."

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 communication needs were known by staff and they had recorded what support people needed to effectively communicate. Records described how people should be given information and how to make sure it is understood, such as verbally, large print or graphics.
- Staff shared people's communication needs appropriately with external professionals, so any information they provided to people was fully understood.

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

- Some people needed social support to prevent social isolation and loneliness. A care plan had been developed to support this. People's individual needs, wishes and preferences were explored with regards to the activities, hobbies and interests.
- Staff organised communal activities and arranged for external companies to visit Lonsdale Court. This helped people to engage with others and encouraged socialisation amongst the people who lived there. Activities included visits from church groups, singers, instrument players and a pat dog. Staff also supported people to go out to the theatre, hold coffee mornings, concerts and communion. One person told us, "The

Church of England and the Methodist visitor come once a month. We have a man who comes and plays the guitar and sings all the hymns which is lovely."

- Staff helped people to foster new friendships with others living at Lonsdale Court, as well as maintaining relationships with their own family and friends. We saw people regularly met up in communal areas to have a conversation or play games such as bingo and dominoes. A relative said "My (family member) has friends here which is lovely."

Improving care quality in response to complaints or concerns

- There had been no complaints made about the service. The registered manager addressed minor issues promptly to avoid any dissatisfaction with the service. They told us any learning from minor issues was shared with staff to improve their practices and ensure people received a fully satisfactory service.
- People knew how to complain. Leaflets were available to inform people of how to raise any complaints. People said they were confident to raise anything with staff and they were sure the registered manager would listen to them and resolve matters.

End of life care and support

- There was currently no-one using the service who received end of life care. However, the provider had provided this level of care in the past.
- People's religious and cultural preferences were indicated in care plans. This helped staff to care for people as they would wish when they were no longer able to express their views themselves.
- Where people had chosen to share the information, emergency care and resuscitation preferences were recorded.

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.

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

- People spoke highly of the service. Comments included, "I love it here and I wouldn't want to live anywhere else. I couldn't ask for better and I never want to leave"; "It's brilliant here. I couldn't ask for better, I fell on my feet when I came here" and, "I like it better than when I was at home."
- The service was managed by a well-established and experienced registered manager who was motivated to provide person-centred care. A relative told us, "(Registered manager) is wonderful."
- The registered manager was supported by two assistant care managers. They shared the organisation's values and displayed their passion to empower people and promote independence. They led the care team very well and ensured staff upheld the company values. An occupational therapist told us, "Their forte is their strong and effective management which transcends to the carers."
- The registered manager had an excellent understanding of providing consistently safe, high-quality care to help people to achieve positive outcomes.
- Staff said they were listened to and supported by their managers to deliver person-centred care. They said they were respected and valued at work. A care worker said, "It's great here, it's a really good team and it's very happy. I can go and talk to (registered manager) anytime."

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 demonstrated transparency when dealing with any issues. They had developed a very good relationship with people and staff. People and staff had confidence in registered manager and said they would act in a responsible manner if something went wrong.
- Representatives from the provider organisation visited the service regularly. They checked the registered manager carried out her role candidly and made decisions about the service which benefited the people who lived there.

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

- The registered manager and staff team had an excellent understanding of their roles and responsibilities including their regulatory requirements. The policies and procedures in place, which included best practice guidance, supported staff to deliver a high-quality service. An occupational therapist told us, "I have been thoroughly impressed with everyone at Lonsdale Court as to the care and support they provide. The (managerial staff) are very approachable and communicative as are the carers. Overall, there is a positive

atmosphere about the place and a can-do attitude."

- Quality assurance systems were fully embedded into the service. Audits were completed to monitor the safety and quality of the service. Audits were evaluated by the registered manager to look for key themes and trends. They acted quickly to address issues and make improvements to the service.
- The provider carried out annual audits of the service. This was last conducted in May 2019. Lonsdale Court was ranked very highly in the provider's portfolio of similar services, achieving 92%. The service had made improvements year after year.

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

- There was frequent engagement with people to involve them in how the service was run. Surveys were used to gather people's and visitor's views. Results were always positive. The registered manager regularly updated a 'You said, We did' noticeboard to highlight any changes made from suggestions. The registered manager planned to carry out a survey with people about loneliness. They hoped to identify gaps in the service that could be improved to prevent loneliness amongst older people.
- Staff meetings were an opportunity for staff to share their ideas for improvements and be involved in the running of the service. Staff told us the registered manager was very approachable and listened to their ideas.
- The provider shared information, good news stories, campaigns and incentives through regular newsletters to people and in staff briefings.

Continuous learning and improving care

- Learning from incidents which happened throughout the provider's organisation were shared with staff, to continually improve the service they provided to people.

Working in partnership with others

- The registered manager and staff had a positive relationship with external professionals which helped meet people's needs in a timely manner. A social worker told us, "Lonsdale Court are very helpful in allowing people to visit, to assist with decision making. Communication with regards to vacancies (and filling them), is excellent."
- Staff had made good local connections with other businesses to give people who lived at Lonsdale Court opportunities to be involved with their local community and use it safely. This included one person who liked to visit the local pub. With their permission, staff had shared contact details with the pub staff in case the person became disorientated or upset and needed assistance from care staff.