

Family Mosaic Housing

38a Woolifers Avenue

Inspection report

Woolifers Avenue
Corringham
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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

Woolifer Avenue provides accommodation and support for up to three people who have a learning disability or autistic spectrum disorder, and physical or sensory disabilities. On the day of our inspection the service did not have any vacancies.

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.

At the last inspection the service was rated as Good. At this inspection the service remained Good.

The service was safe. Staff showed a good knowledge of safeguarding procedures and were clear about the actions they would take to protect people. People were kept safe and risk assessments had been completed to show how people were supported with every day risks. The service had a recruitment process in place which required certain checks to be carried out before staff started work, which helped to ensure that they were suitable to work in a care setting. There were sufficient numbers of staff on duty to meet people's needs. People's medication was well managed and people received their medication as prescribed.

The service was effective. Staff had been offered training to help ensure they had the skills and knowledge required for their role as a care worker. They also received regular support and felt well supported by the management team. People were supported to be able to eat and drink sufficient amounts to meet their needs. People were supported to maintain good healthcare and had access to a range of healthcare services. The service kept clear records about all healthcare visits.

The service was caring. People had agreed to their care and had been asked how they would like this to be provided. They were treated with dignity and respect and staff provided care in a kind, caring and sensitive manner. Meetings had been held for the people living at the service, relatives and for the staff. Where possible people's views and opinions had been sought and the service had listened and made the appropriate improvements.

The service was responsive. Detailed assessments had been carried out and care plans were developed around people's needs and preferences. The service had a clear complaints procedure in place which was clearly displayed. This provided information on the process and the timespan for response.

The service was well-led. Staff, relatives, healthcare professionals and those living at the service spoke positively about the registered manager and felt the service was well managed. There were systems in place to regularly assess the service and ensure it was providing a quality service and keeping people safe.

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 ●

This service continues to be rated Good.

Is the service effective?

Good ●

This service continues to be rated Good.

Is the service caring?

Good ●

This service continues to be rated Good.

Is the service responsive?

Good ●

This service continues to be rated Good.

Is the service well-led?

Good ●

This service continues to be rated Good.

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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 checked 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.

The inspection was an unannounced comprehensive inspection and took place on the 28 March and 5 April 2017. The inspection was undertaken by one inspector.

Before the inspection we reviewed the information we held about the service. This included notifications, which are documents submitted to us to advise of events that have happened in the service and the provider is required to tell us about. The provider also completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan what we were going to focus on during our inspection.

Due to the registered manager not being available the inspection was completed with the Deputy Operations Manager. During the inspection we spoke with three members of the care team. Not everyone who used the service were able to communicate verbally with us. Due to this we observed people, spoke with staff, reviewed records and looked at other information which helped us to assess how people's care needs were being met. We spent time observing care in the communal areas and also spoke with those who were able to verbally communicate.

As part of the inspection we reviewed three people's care records. This included their care plans and risk assessments. The service had not employed any new staff so we were unable to look at recruitment and induction processes, but these had been suitable in past inspections. We looked at staff support records and also a sample of the service's policies, their audits, the staff rotas, complaint and compliment records, medication records and training.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse and risks to people's safety as at the previous inspection, and the service's rating continues to be Good.

Relatives reported that the home was a safe and caring place to be. One relative added, "It is 100% safe and I have no concerns."

Staff we spoke with knew what action to take if they had any concerns and how to protect people from abuse and avoidable harm. Care staff had received regular safeguarding training and were aware of their responsibilities and how to take appropriate action if they had any concerns. Information on who staff could contact was also available within the office. The service had systems in place to help protect people from potential harm and included a whistle blowing procedure for staff. Staff stated that they felt people were 'looked after well' and 'kept safe' and that they had no concerns about people's welfare.

People's care plans included assessments of risks and how these could be reduced to help keep people safe. People were supported to take risks and where possible encouraged to make choices and decisions during their daily lives. Systems were in place to record and monitor incidents and accidents and these had been regularly monitored and reviewed by the registered manager and provider so as to ensure people's safety.

Regular checks had been completed to help ensure the service had been well maintained and that people lived in a safe environment. Appropriate monitoring and maintenance of the premises and equipment had been on-going and the building had been well maintained. The service ensured that staff had access to contact details and information on action to be taken in the case of a fire, flood and other incidents within the service. The deputy operations manager had also completed regular audits to monitor risks and repairs.

The service had systems in place to monitor people's level of dependency and to identify the number of staff needed to provide people's care. They were aware that assessing staffing levels was an ongoing process and provided examples of where extra staff had been recruited so people could have allocated one to one time. During our inspection we noted that there were sufficient care staff available to meet people's individual needs. People were seen to be well supported and we saw good examples from care staff where people were provided and assisted with care promptly when they needed it.

The service had a recruitment policy in place to help ensure that correct checks would be completed on all new staff. The service had a consistent staff group and no new staff had been recruited since our last inspection. Due to this we were unable to assess the provider's recruitment arrangements, but we had found at previous inspections that correct procedures had been followed. The service also had a probationary period in place and a disciplinary procedure, which could be used when there were concerns around staff practice which would help to keep people safe.

People had received their medicines safely and as prescribed. Medication had been administered, stored

safely and recorded in line with the service's medication policy. Regular audits had been completed and staff had attended medication training and received regular competency checks. A staff member was observed administering the lunchtime medication and correct procedures were followed.

Is the service effective?

Our findings

At this inspection we found staff had the same level of skills, experience and support to enable them to effectively meet people's needs as we found at the previous inspection. People continued to have freedom of choice and were supported, where appropriate with their health and dietary needs. The service's rating continues to be Good.

Newly recruited staff completed a six day induction at the provider's head office. This covered mandatory training as deemed appropriate by the provider and enabled staff to complete the Care Certificate or an equivalent. This is a industry recognised qualification and induction process into care. An induction would also be completed at the service to help new staff understand how the service works and also gain information about the people who lived there and their care needs. No new staff had been recruited since the last inspection so it was not possible to gain feedback from staff on the induction process.

Staff had received support through one to one sessions, meetings and appraisals. The senior management team completed regular audits to ensure staff received supervision in line with company policy. Staff confirmed they received regular support and felt that they could ask for support and advice at any time from the management team.

Staff confirmed they had received regular training and felt they had the knowledge and skills to carry out their roles and responsibilities as a care worker. They had also been provided with specialist training relevant to the people they provided care and assistance to.

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 Mental Capacity Act (MCA) 2005. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether staff were working within the principles of MCA and DoLS. We found that the management team had a good understanding of MCA and DoLS and had made appropriate referrals to the Local Authority. Staff demonstrated an awareness of MCA and DoLS and confirmed they had received training. This had also been discussed at team meetings and showed that staff had up to date information about protecting people's rights and freedoms. People's capacity to make day to day to day decisions had been assessed to help ensure they received appropriate support.

People were supported to have sufficient to eat and drink and maintain a balanced diet. Staff had a very good understanding of each individual person's nutritional needs and how these were to be met. People's nutritional requirements had been assessed and their individual needs were well documented and this included their likes, dislikes, dietary or cultural needs. There were nutrition and weight charts in place which enabled care staff to regularly monitor people and where risks had been identified or where people required assistance from a nutritionist or healthcare professional this had been gained. The service had recently been working on the soft diet meals offered to people and had produced a cook book with ideas and recipes that could be easily prepared. Staff had also been involved in a workshop to look at ways of presenting pureed and soft diet foods. Feedback from staff included they had enjoyed the work shop and felt it had made them

'work better together' and they had also tasted the food and liked the new menus. Management were also looking at purchasing food moulds to help with the presentation of meals. We completed an observation of a lunchtime meal and found people were offered choice, the food was hot and people enjoyed what they had to eat. Those people who needed assistance was provided with this appropriately and with dignity and respect.

People had been supported to maintain good health and had access to healthcare services and received ongoing support. Referrals had been made to healthcare professionals when needed and this showed that staff supported people to maintain their healthcare whilst living at the service.

Is the service caring?

Our findings

At this inspection we found people were as happy living at the service as they had been during our previous inspection. The service's rating continues to be Good.

People were seen to be relaxed with staff and given the time and support they needed. Care was provided with kindness and compassion and people had regular contact from staff during our inspection to ensure they did not need anything and were comfortable. People were observed with care staff and they showed through their body language that they were happy and comfortable with the care being provided. Staff were seen responding to people's needs quickly and they were kind and caring in their approach. One relative stated, "I can tell [person's name] is happy by the way they interact with the staff. They have settled in very well and they are very happy."

We saw that people's privacy and dignity was respected and care staff were polite and courteous when interacting with people. Doors were always shut when personal care was provided and staff knew the people they were looking after very well. We heard staff addressing people in an appropriate manner; clearly choosing the most appropriate form of address by either using their first name or the name they preferred.

People were encouraged to be part of their care and the care staff were observed providing support and encouragement when needed. The service was very 'homely' and it was clear that staff were there for the people they supported and to improve their quality of life. Each person living at the service was clean, tidy, dressed appropriately for the weather and looked comfortable. Feedback from one relative included, "[Person's name] is always clean and dressed well. Their hair is cut nicely and they get a lot of support from the staff." Staff were observed providing care and assistance to one person who had a visual impairment and they were noted to advise the person what they were doing and ensuring they were involved. One staff member added, "This is my fourth shift here and I am getting to know the people. [Person's name] is getting used to my voice now."

Where possible people were supported to express their views about their care and support. Most people at the service had relatives involved in their care and regular contact and visits were made. The management and care staff advised that they did their best to ensure relatives were involved in any reviews and decisions on care. They added that if someone did not have access to family or friends that could support them, the service would arrange for an advocacy service to offer independent advice, support and guidance to individuals. Some people had been allocated guardians for finances and best interest decisions. One relative added that the service always involved them and ensured they kept them 'up to date.'

Is the service responsive?

Our findings

At this inspection we found people continued to receive responsive care which was person centred and met their needs. The rating of the service continues to be Good.

We found care staff assisted people with their care and were observed being responsive to people's needs. It was clear that the staff were there to ensure people were well cared for and their quality of life improved. Each person had a key worker and staff knew how each person wanted their care to be provided. People were seen being treated as individuals and received care relevant to their needs.

People's needs had been fully assessed before they moved to the home. The assessment forms were easy to read and quickly helped to identify each person's needs and assisted the service to identify whether they could provide the care required. Systems were in place to encourage people to be involved in the care planning process where possible. The care plans we reviewed were very in-depth and contained a variety of information about each individual person, including their physical, psychological, social and emotional needs. Any care needs due to the person's diversity had also been recorded and when speaking with staff they were aware of people's dietary, cultural or mobility needs.

Each person had a 'This is me' document in place, which provided information about each person and identified their needs. Management advised that this document was in the process of being developed to be more person centred and specific on identifying risks and how each person wanted to be supported. Each person had a health action plan and daily record notes, which provided information about each individual and ensured staff were kept up to date at each shift. Care plans had been reviewed regularly and updated when changes were needed to reflect variations in people's needs. Staff confirmed they had been given time to read each person's care folder and they felt they contained sufficient information for them to be able to provide appropriate care.

The service supported people to follow their interests and hobbies and access the local community through day trips and events. Activities were individualised and staff were seen speaking with people to see how they wanted to spend their time. During the inspection people were seen being assisted in making necklaces and bracelets. Another staff member brought some magazines for one person and was seen reading these and discussing the pictures and content. People were seen being offered three choices of film and encouraged to pick a film they wanted to watch. Another person went out with staff to the shops and for a walk. Staff were aware of people's likes and dislikes. One member of staff explained that they liked to keep music on or play a musical film so that the person with sensory needs could join in with the songs. They added, "I have noticed that [person's name] is more alert if there is some music on and it is not too quiet."

There were also photographs around the service of parties, entertainment and general outings that people had taken part in. The service had recently joined in with a 'red nose day' at another service owned by the Provider. Pictures had been taken and these showed that people had had a good time and enjoyed being with other people. The atmosphere within the service was friendly and laughter and chatter could be heard throughout the day.

The service had effective systems in place for people to use if they had a concern or were not happy with the service provided to them. People had been provided with information on how to make a complaint and this was also available within the service in a format suitable for them. The service had set forms to record details of the any complaints they received and this included how these were investigated and also the outcome. A complaint log was in place so management could identify any trends or reoccurring issues and complaints had been monitored as part of the monthly audit. Management were seen to be approachable and they listened to people's experiences, concerns or complaints. Care staff stated that they felt able to raise any concerns they had. Relatives spoken with said they would be able to speak with management if they had any concerns and one added, "When we have reported things they have always dealt with them."

Compliments the service had received included, "We would like to say how much we appreciate the way you after [person's name] to continue to do so since she had been at Woolifers. The change in her has been remarkable considering how ill she was last year, she is so content, relaxed and it shows in the way she behaves. The whole staff are so good with her and she has a great rapport with them."

Is the service well-led?

Our findings

At this inspection we found the service was as well- led as we had found during the previous inspection. The service's rating continues to be Good.

The service had a registered manager in post. There were clear lines of accountability and the registered manager had access to regular support from the organisation's senior management team when needed and was aware of their responsibilities.

Staff were complimentary about the management team. They said that they had received supervision and attended regular staff meetings. They told us that they felt listened to and that ideas and suggestions discussed at team meetings were listened to and acted upon. Staff felt they were kept up to date with information about the service and the people who lived there. Staff felt there was a good team spirit and that everyone worked together and was valued. This meant that people benefitted from a consistent staff team that worked well together to deliver good care.

Staff were aware of their responsibilities and there was clear accountability within the staffing structure. This meant that people living at the service benefitted from a cohesive staff team, who worked together to deliver good care. The service had clear aims and objectives and also a 'service user's charter', which included dignity, independence and choice. The ethos of the service was made clear to people through the service's aims and objectives and staff had a good understanding of the standards and values that people should expect.

People received a good level of care and the service had a number of systems in place to help monitor the standard of care received. The registered manager was committed to delivering a high standard of care and carried out regular checks and audits such as health and safety, medication and fire systems to ensure people's health and welfare. Records seen showed that the registered manager and provider had completed regular audits to assess the quality of the service and to drive continuous improvements.

Feedback from a health care professional included, "The manager has always been client focussed and will ensure they have the best possible care. The staff team are caring and competent and nothing is too much trouble for the clients. I have always been met with professional courtesy and find the team easy to work with even in the most difficult times. I would recommend this home and staff team to anyone needing a home for a relative, it is always a pleasure to visit the home."

Environmental and equipment checks had been carried out to help ensure people and staff's safety. Monthly audits had also been completed by the registered manager in line with the company's own policies and procedures. Regular visits were also completed by the Deputy Operational Manager for support and auditing of the service. The local authority had completed a quality assurance visit in November 2016 and the service had scored 86.6% out of 100%. They had scored 100% in six of the 16 areas inspected and 90 plus percent in two of the areas.

People who lived at the service and their representatives were provided with opportunities to provide their views about the care and quality of the service. There was an open culture and people and their families were involved with the running of the service and there were systems in place to gain people's views about the service. Meetings had taken place with the people living at the service in the past, but due to communication issues the registered manager felt these were not the best way to gain feedback from the people who lived at the service. They were looking at ways that could gain feedback but was more appropriate for the people who lived at the service. An annual survey is completed by the company and feedback is also gained from family and staff.