

CareTech Community Services Limited

CareTech Community Services Limited - 19 Wheelwright Road

Inspection report

19 Wheelwright Road
Erdington
Birmingham
West Midlands
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23 June 2016

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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

This was an unannounced inspection, which took place on 23 June 2016. The service was rated as requiring improvement overall. At this inspection we saw that the improvements had been made.

The home is made up of two linked terrace houses located in the Erdington area of Birmingham and provides care and support for up to six adults who have a learning disability. One of the houses is divided into two flats, with ground floor facilities, that could be adapted for people with restricted mobility, should the need arise. At the time of inspection there were six people living there.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People received a safe service. Procedures were in place to ensure that people received a service that was safe; staff followed the procedures to ensure the risk of harm to people was reduced. The risk of harm to people receiving a service was assessed and managed appropriately; this ensured that people received care and support in a safe way. Where people received support from staff with taking prescribed medicines, this was done in a way that ensured the risk to people was minimised.

People received care and support from staff that were trained and supported to be effective in their role. People's rights were protected and they had choices in their daily lives. People were supported to maintain their diet and health. People's privacy, dignity independence and individuality was respected and promoted at all times.

People received care from staff that were suitably recruited, supported and in sufficient numbers to ensure people's needs were met.

People were able to raise their concerns or complaints and processes were in place to ensure complaints were investigated and responded to, so people could be confident they would be listened to and their concerns taken seriously.

People received a good quality service, which was well managed. There were processes in place to monitor the quality of the service people received, ensuring that the provider could easily recognise and act on any shortfalls in the quality of the service.

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.

People said they received a safe service, procedures were in place to keep people safe and staff knew how to keep people safe from abuse and harm.

Risks to people were assessed and managed appropriately and there were sufficient staff that were suitably recruited to provide care and support to people.

People received their prescribed medicines as required.

Is the service effective?

Good ●

The service was effective

People received care from staff that had received adequate training and had the knowledge and skills they required to do their job effectively.

People received care and support with their consent, and people's rights were protected. People chose what they ate and drank, with support from staff in maintaining a healthy diet. People's health care needs were met.

Is the service caring?

Good ●

The service was caring.

People said they had a good relationship with the staff that supported them.

People were able to make informed decisions about their care and support, and their privacy, dignity and independence was fully respected and promoted.

Is the service responsive?

Good ●

The service was responsive.

People were involved in all decisions about their care and the

care they received met their individual needs.

People were able to raise concerns and there were clear procedures in place to respond to people's concerns and complaints.

Is the service well-led?

Good ●

The service was well led.

People received a good quality personalised service.

The service was monitored to ensure it was managed well. The management of the service was open and receptive to continual improvement.

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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 was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

This inspection took place on 23 June 2016 and was announced. The provider was given 48 hours' notice because the location was a small home for people that went out regularly; we needed to be sure that someone would be in. The inspection was undertaken by one inspector.

In planning our inspection, we looked at the information we held about the service. This included, the last inspection report, notifications received from the provider about deaths, accidents/incidents and safeguarding alerts which they are required to send us by law. We contacted the local authority that purchases the care on behalf of people, to see what information they held about the service. We reviewed the information on the Health Watch web site, to see if people had raised any compliments or concerns about the service. Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spoke with two people that used the service, two care staff, and the registered manager. We looked at, safeguarding and complaints records, sampled three people's care records; this included their medication administration records and daily reports. Other records looked at included audits and monitoring records completed by the manager and senior managers within the organisation. Some people could not verbally tell us about their experience, but they were out on the day we inspected, so we

spoke with the people that were in.

Is the service safe?

Our findings

People told us they were safe. One person told us, "Yes I am safe. I love living here, the carers are brilliant." This person also told us, "If I was worried I would tell the staff and my mom." People said they could speak with the registered manager or any of the staff if they were concerned about their safety.

There were procedures in place to help staff to keep people safe from abuse and harm. All staff spoken with and records looked at confirmed that staff had received training on how to keep people safe from harm. All staff knew about the different types of abuse and the signs to look for which would indicate that a person was at risk. Staff understood how to report concerns both within the service and external agencies that they could contact, should they have any concerns about people's safety. The registered manager said there have been no incidents relating to people's safety at this service since we last inspected the service on 12 April 2015.

People did not have any concerns about any risks to their care and support. Staff confirmed that risk assessments were available for each person, based on their identified needs and risks. Staff said all new risks were reported to the registered manager and this would trigger a review of the risk assessments. Records looked at confirmed that risks associated with people's care and support were identified and managed, so as to reduce the risks.

People spoken with felt the home was safely maintained. We saw that the provider had processes in place to ensure that safety checks of the premises were undertaken, such as fire, electrical and gas safety. Staff spoken with confirmed that there were clear processes in place to undertake repairs and to ensure that all equipment were maintained and checked for safety.

Staff knew the procedures for handling medical and other emergencies that may affect the care and support people received. All staff said there was a senior member of staff on call at all times for guidance and support in an emergency.

Everyone spoken with said there were enough staff to provide the service they needed. One person said, "Enough staff." Staff said there was flexibility within the staff team to cover for sickness, annual leave and to enable people to access activities within the community. The PIR stated that there were two staff vacancies to be filled and the registered manager confirmed that they have now completed the recruitment for these staff. During our inspection we saw that there were enough staff to meet people's needs and ensured their safety. A new member of staff spoken with told us all the required recruitment checks were undertaken before they started working to ensure they were suitable for the role. We saw records which indicated that the recruitment checks required by law were undertaken before staff commenced work. This showed the provider ensured only suitable people were employed.

People told us that staff always gave them their medicines. Medication administration records (MAR) looked at confirmed this. All staff spoken with knew the procedure for supporting people with their medication and said they received training to ensure they followed the procedures. Where people needed medication to be

given as and when required, protocols were in place to support staff to do this based on the person's needs.

Is the service effective?

Our findings

All staff spoken with said they received the necessary training to help them to do their job. Staff training records looked at confirmed that staff training was provided. One member of staff told us that along with core training they were encouraged by the registered manager to undertake any training they saw fit to support their development. We saw that staff had the skills to meet people's needs.

Staff said they had regular supervision and appraisal to enable them to undertake their role well. We saw that the provider adopted a planned approach to staff training, supervision and appraisal, which was monitored and reviewed to ensure staff were effective in their role.

People told us that staff always ask them what they wanted to do and that they did what they wanted to do, with support from staff. One person told us, "Yes I can do whatever I want to do." They [staff] ask me what I want to do. They wouldn't do anything if I wasn't happy with it." They went onto tell us that they were going out that day to exercise their right to vote. The registered manager told us about the research she had done on the subject in order to support the people who wanted to vote to understand the process. Staff told us that they always provide care and support in line with what people wanted.

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. Staff said that people were able to make day to day decisions about what how they were supported. They said that some people could express themselves verbally and they were able to gauge other people's consent by gestures and body language. This enabled them to understand and respect people's wishes. Staff said they had received training to enable them to understand how to protect people's rights.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The registered manager told us that applications had been made for some people at the home, as they needed continual supervision and lacked the capacity to make significant life decisions for themselves. However, although people have been assessed confirmation of the authorisations had not been received by the service at the time of inspection. Records confirmed that the applications had been made.

We saw that where people needed additional support to manage their moods and emotions, the appropriate plan was in place help staff to support them in an effective way. Staff told us and records showed that that staff were trained to support people with this aspect of their needs.

People told us they were involved in agreeing the menus and groceries needed for the home and that they helped with cooking the meals with support from staff. Staff said they met with people to talk about what each person wanted to eat and menus and shopping was decided on based on what people wanted to eat.

We saw that menus were in pictures so that staff could support people to make healthy food choices. One person told us, "I like all the food and I help staff to cook."

Staff said and records showed that staff had received training on ensuring that people ate a balanced diet and maintained healthy weights.

People told us they saw the doctor when needed and we saw that the provider had systems in place to support people in having regular health checks with various health care professionals. The PIR told us that each person had a Health Action Plan (HAP) which detailed how they were being supported to manage and maintain their health. Records we saw confirmed this to be the case.

Is the service caring?

Our findings

All the people living at the home spoken with said they were treated well by staff. One person told us, "I love living here. The carers are great." We saw that all staff interacted well with people. Staff spoke to people in a sensitive, respectful and caring manner. We saw that staff understood people's communication needs and gave people the time and space to express their views. All staff spoke about people in a kind and caring way that showed they knew people's individual needs and preferences. This ensured that people were cared for in a way that they wanted.

People told us they made all the decisions about their day to day care. One person said, "The staff do what I want them to do." Staff told us that people decided what they wanted to do on a daily basis and would show their disagreement if they did not wish to do something. One person told us they knew about their care plan. Staff discussed with people any changes needed to their care plan so they could express their views.

Staff spoken with told us and records looked at showed that people's care plans included information about how to provide individual care and support to people. These included any specific communication needs that people had, so staff could ensure they provided information to people in a way that they could understand. We saw that information about keeping people safe, independent advocacy and how to complain about the service was available in the registered manager's office and in the hallway in symbols and pictures. We saw that people came into the registered manager's office to sit down and talk with staff throughout the day, so the information was accessible to people in a way they could understand.

People we spoke with said their privacy and dignity was respected by staff. People told us and we saw that lived full and independent lives, with support from staff. Everyone spoken with said they were involved in undertaking daily tasks within the home. All staff spoken with gave good examples of how they ensured people's privacy and dignity was maintained. This included, discussing the care with people to ensure they were in agreement, making sure doors and windows were kept closed whilst providing personal care and people were covered up when they received support with their personal care, so they maintained their dignity. A member of staff told us that where people were unable to speak verbally, a light had been put on their door, so the person could see that staff were waiting to come in and the person would open the door. This gave the person control over when staff entered their room.

People told us their friends and relatives were free to visit them and that they were supported to maintain good relationships with family and friends.

Is the service responsive?

Our findings

People told us that they liked living at the home and were happy there. We saw that people's needs were assessed and detailed information was available to enable staff to support people's individual preferences, histories and lifestyles. Staff told us that care plans were individualised based on each person's needs.

We saw that people were dressed in individual styles of clothing that was suitable for their age, gender and the weather. People told us that they chose the clothes they wore, so they dressed in a way that matched their individual preferences and ensured they were independent in this aspect of their life.

People said they were able to pursue activities of their choice. One person told us that they liked gardening, so they mowed the lawn and talked about planting vegetables. Another person told us, "I have a good social life."

People said they were free to raise any concerns with the staff or the registered manager and were confident that they would be addressed. One person said, "[Registered manager's name] is great, she is down to earth. If I have a complaint I would tell her and she would do something about it." The provider had an accessible complaints procedure; the manager said no complaints had been received since we last inspected the service and we have received no concerns about the service.

Is the service well-led?

Our findings

People said they were happy living at the home. People felt the management was open and helpful. One person told us they felt this was the best home they had lived in.

The registered manager said consultation with people about the quality of the service was done on an individual basis with each person. The provider had also recently sent surveys to people and their relatives, so that they could have their say about the quality of service provided. The surveys for this year had not been collated and analysed at the time of our inspection. However, the PIR told us that there was an internal compliance team, which over saw the quality aspect of the service and ensured information from audits and surveys were used to secure continual improvements to the service. Staff spoken with confirmed this.

Staff said they had regular supervision and an annual staff survey so were able to put ideas forward for improvements. All staff said they could speak with senior staff and managers openly about any ideas they had on how the service could improve. Staff did not give any examples of suggestions they had made for improvements, so we could not verify this in practice. Staff knew about the provider's policy for reporting bad practice and stated they were confident in using it, if they felt people were not receiving an appropriate service.

There was a registered manager in post, who had registered with us since our last inspection and all conditions were met. Information we hold about the service showed that there were no concerns about the service since our inspection 12 May 2015. The provider kept us informed about changes that affected the management of the services as required. The registered manager told us that the outcome of the last inspection had been viewed positively and had helped her to improve the service. Our inspection found this to be the case.

The PIR was completed and submitted to us when we requested it. This gave us the information we needed and was in line with what we saw during our inspection.

We saw that there were processes in place to monitor the service. These included various audits completed by staff and a senior manager undertaking a review and service improvement plan, in which the provider assessed and rated the service against the regulations. All records seen were up to date and in good order, showing that the administration of the service was organised and well managed for the benefit of people living there.