

Dignus Healthcare Limited

Elm Road

Inspection report

18 Elm Road
Leamore
Walsall
WS3 1BH

Tel: 0121357504
Website: www.dignushealthcare.com

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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

Elm House is a small residential care home that provides personal care for people with learning disabilities and/or autism. At the time of the inspection one person was living at the home.

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 small home, registered for the support of one person. The building fitted into the residential area. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

The person told us they felt safe with staff. Staff could tell us how to deliver safe care and minimise risks to protect the person from harm. The person received their medicines as prescribed. There were detailed risk assessments in place and sufficient staff on duty to support the person.

The person was 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 had a range of skills and knowledge to meet the person's needs and received relevant training and support. The service worked with other social and health care professionals to ensure the person's needs were met.

Staff were kind and caring and knew the person well. Staff respected the person's privacy and dignity and encouraged their independence. The person was included in decisions about their care and daily routine.

The service was responsive to the needs of the person living at the home. Care was tailored to the individual's needs and regular feedback was sought from the person. Staff had a flexible approach and adapted the care to the person's needs and choices.

The service was well led, the person and staff were positive about the registered manager and their approachability. Audit systems were in place to monitor the quality of the service, although some improvements were required. Staff were knowledgeable about their roles and felt supported.

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 the person using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. The person's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

Rating at last inspection

This service was registered with us on 09 July 2018 and this is the first inspection.

Why we inspected

This was a scheduled inspection based on the provider's registration date.

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.

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

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.

Elm Road

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 carried out by one inspector.

Service and service type

Elm House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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

We gave the service a short period notice of the inspection because it was a small service and people are often out and we wanted to be sure there would be people at home to speak to us.

What we did before the inspection

We reviewed information we had received about the service since their registration. 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 of this information to plan our inspection.

During the inspection

We spoke with the person who used the service about their experience of the care provided. We spoke with

four members of staff including two carers, one team leader and the registered manager. We reviewed a range of records. This included the person's care and medicine records and two staff files in relation to recruitment. We also reviewed a variety of records relating to the management of the service, including policies and procedures and checks and audits.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at safety reports and risk assessments. We spoke to a social care professional and advocate who regularly visit the service.

Is the service safe?

Our findings

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

This was the first inspection. We rated this question as 'Good'. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The person living at the home told us they felt safe.
- The registered manager and staff demonstrated a good understanding of how to protect people from the risk of harm or abuse. Staff could tell us how to recognise signs of abuse and who they should report to including external bodies.
- An advocate told us, "There are no concerns about safety."
- Information about safeguarding processes and staff responsibility was communicated well within the staff team. Safeguarding discussions took place at every team meeting and in staff supervision.

Assessing risk, safety monitoring and management

- Robust risk assessments and care plans were in place. The registered manager and staff had a proactive approach to anticipating and managing risk. A staff member told us, "We look at what could be a risk, a busy crowded place that could cause anxiety."
- Staff understood the risk to the person living at the service and how to support them safely. Changes in behaviour were responded to effectively and in a positive way to reduce the person's anxiety.
- A range of checks to assess and monitor environmental risks were in place. The person's individual needs were considered within this to ensure the living environment was safe.

Staffing and recruitment

- Staffing levels were set in line with the person's dependency to ensure they were supported safely. When the person needed more support, there was a flexible system in place to increase staff.
- The provider had a robust recruitment process in place. We saw evidence of Disclosure and Barring Service checks (DBS) being completed to ensure staff were suitable to work with vulnerable people.

Using medicines safely

- The person received their medicines safely.
- Medicine Administration Records (MAR) were up to date and accurately completed.
- We saw medicines were stored securely and stock balance checks were completed daily to ensure medicine quantities were accurate.
- Where medicines were given 'as and when required' there was guidance in place so this would be administered consistently.

Preventing and controlling infection

- We found all areas of the home to be clean and tidy. Staff had access to personal protection equipment

(PPE) as required.

Learning lessons when things go wrong

- The registered manager had made changes to improve the consistency of the staff group following an analysis of incidents. This action had reduced the number of incidents and had a positive impact on the person using 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.

This was the first inspection. We rated this question as 'Good'. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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.

- We saw a mental capacity assessment was completed, however this was a generic capacity assessment rather than decision specific as required by the MCA. The registered manager told us they would carry out these assessments.
- DoLS applications had been made to the relevant Local Authority and the registered manager had a system in place to monitor this and ensure the person's liberty was not unlawfully deprived.
- Staff demonstrated a good understanding of the principles of MCA and DoLS. One staff member told us MCA would need to be adhered to, "If an individual doesn't have the capacity to make choices to keep themselves safe."
- We saw staff gaining consent before they completed any care tasks and supported the person to make choices.

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

- The service fully included the person to plan their meals. The person told us, "We do a food planner every Sunday, choose what we are having every day."
- Staff told us how they supported the person to make healthy choices. A staff member told us, "We try to give healthy choices and the right portions." A social care professional confirmed, "They have tried to promote a healthy diet but not in a too restrictive way."
- The registered manager told us they were planning a vegetable garden so the person could use fresh vegetables in their cooking.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- A comprehensive assessment of the person's needs was completed before they moved into the home with

input from the person and health care professionals.

- We saw care plans included information about how the person liked their care to be delivered.

Staff support: induction, training, skills and experience

- Staff received a range of training to ensure they had the skills required to meet the person's needs. This was updated annually.
- Where new staff were appointed there was a thorough induction in place. This involved completing training before shadowing more experienced staff.
- The Care Certificate was part of the induction process. The Care Certificate is the nationally recognised benchmark set as the induction standard for staff working in care settings.
- There was a system in place to monitor training and identify when updates were required.

Staff working with other agencies to provide consistent, effective, timely care

- The service had worked with another care professional to gain a good understanding of the person's needs.
- A social care professional told us there was, "good engagement and communication" with the service.

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

- The person's living space reflected their care and support needs. The service was supporting the person to buy more items for the home.
- The person confirmed they had been involved in decorating their bedroom and we saw it was personalised.

Supporting people to live healthier lives, access healthcare services and support

- Staff had supported the person to access healthcare in a timely way. The care records showed the person had been supported to access emergency healthcare when needed.

Is the service caring?

Our findings

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

This was the first inspection. We rated this question as 'Good'. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- We saw staff knew the person very well and the person was comfortable with them, sharing smiles and conversation.
- An advocate told us staff were, "Very good and understanding of [person's] needs."
- Staff respected the person's need for routine and consistency and as far as possible supported them to maintain this. This had had a positive impact on the person's life.

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

- Staff encouraged the person to make choices about their life. They had been supported to attend the hairdressers as they wanted to become more independent with haircare.
- Staff valued the person's views and choices. One staff member told us, "We give [person] choice with everything. If they are not making a good choice, for example around their health, we support the person by offering other alternatives."
- The person had weekly planning meetings with staff to talk about suggestions they had about their care and to plan the week ahead.
- We saw the person was supported to access their advocate. An advocate is an independent person who supports someone to express their needs and wishes and helps them stand up for their rights.

Respecting and promoting people's privacy, dignity and independence

- The person's independence was continually promoted. We saw the person being encouraged to assist with the cooking and they told us they had also done their own laundry.
- Staff knew the importance of keeping information confidential and the person's information was stored securely.
- The person's dignity and privacy were promoted, staff ensured that the person had space and privacy to attend to their personal needs whilst being discreet with the support they offered.

Is the service responsive?

Our findings

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

This was the first inspection. We rated this key question as 'Good'. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The person was supported in a personalised way which was tailored specifically to their needs. Triggers had been identified that might cause anxiety and care plans put in place to reduce them. This had resulted in a positive outcome for the person.
- Care plans contained detailed information about the person's likes, dislikes as well as their emotional needs.
- Staff told us they needed to be responsive to the person's needs. Although activities and meals were planned weekly, staff still worked flexibly making changes if the person requested or they became anxious.

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.

- The person had a communication plan, which detailed how the person liked to communicate and what staff needed to do to enhance communication.
- The weekly activity plan was available in picture format which the person was involved in producing.

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

- Staff had supported the person to take part in new activities and look for new opportunities. For example, the person had begun to go out for day trips to new places and there was a plan to work towards an overnight stay for the first time.
- Staff supported the person to maintain important relationships.

Improving care quality in response to complaints or concerns

- The person told us they could speak to the registered manager any concerns. They told us when they had a problem it was, "sorted out quickly."
- The provider had a complaints process in place. Whilst there had been no official complaints, the staff and registered manager met regularly with the person to ask if they had any concerns.

End of life care and support

- End of life care was not provided at the time of our inspection.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This was the first inspection. We rated this key question as '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

- Organisations registered with CQC have a legal obligation to tell us about certain events at the home so we can take any follow up action needed. We saw from our records the provider had systems in place to ensure we were usually notified of incidents, so their legal responsibility was fulfilled. However, during the inspection, we identified one incident we should have been notified of. The registered manager had taken appropriate action in relation to this incident. They advised there had been a delay in receiving the information and sent us the required notification without further delay.
- Systems were in place to monitor the quality of the care and risks to people.
- There was a clear staffing structure in place and staff were clear of their responsibilities.

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

- Staff told us the registered manager was approachable and they had regular supervision. One staff member told us the registered manager was, "Very proactive and very hot on everything."
- A social care professional told us the service had supported the person to achieve good outcomes, increasing their community involvement. They said, "[Person] has made good progress over the last 12 months. More progress than expected."
- The registered manager and staff both spoke of a shared vision to further improve the person's quality of life and support them to increase their independence.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager met with the person using the service on a regular basis to gain their views and discuss any concerns. The person told us, "I talk to [registered manager] if I have any problems."
- The service provided equality and diversity training as mandatory training for all staff.
- Staff meetings happened regularly, and staff told us they could raise any suggestions. One staff told us, "If it is a good idea we can discuss in team meetings."
- The service worked in partnership with social and healthcare professionals to provide person centred care and to ensure they were meeting the person's needs.
- The culture in the home reflected the values that underpin Registering the Right Support and other best practice guidance. These values include promotion of independence, choice and inclusion.

Continuous learning and improving care; 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

- Staff were aware of the whistleblowing policy and told us they felt confident to raise any concerns.
- The registered manager and staff told us how a change in the staff group had improved the care the adult received and reduced their anxiety. The registered manager told us; "Through structure and staff being developed, [person's] quality of life has improved."