

Housing & Care 21

Housing & Care 21 - Priory Court

Inspection report

Manor Gardens
Wardley, Gateshead
Tyne & Wear
NE10 8WL
Tel: 0370 192 4042
Website: www.housing21.co.uk

Date of inspection visit: 5 and 11 August 2015
Date of publication: 24/09/2015

Ratings

Overall rating for this service

Good



Is the service well-led?

Requires improvement



Overall summary

We carried out an unannounced comprehensive inspection of this service on 6 and 8 January 2015. One breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of regulation regarding assessing and monitoring the quality of the service provided.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met the revised legal requirements. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Housing and Care 21 - Priory Court on our website at www.cqc.org.uk.

We found the provider had met the majority of assurances they had given in their action plan and were no longer in breach of the regulation.

The standards of quality assessment and monitoring had improved since the last inspection and were of an acceptable standard. A new manager had been appointed and had applied for registration. 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 using the service (tenants) and staff made positive comments about the manager's approach and the improvements they had brought to the service. There were now staff and 'tenant' meetings taking place regularly. People's views on the quality of the service were being sought and acted upon. People using the service and staff felt informed about changes in the service. A

Summary of findings

new quality assurance system had been introduced, but withdrawn temporarily due to IT difficulties. We were assured this would be reintroduced as soon as these problems were resolved.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

The service was well led.

A new manager had been recruited and had applied to become registered with the Care Quality Commission.

Staff felt involved and well informed about management decisions and said they now received updates from management about their concerns and suggestions for change.

Quality assurance and complaints systems were in place and being used to review the service and were acted upon to make improvements.

We could not improve the rating for: 'Is the service well-led?'; from 'Requires Improvement' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires improvement



Housing & Care 21 - Priory Court

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Housing and Care 21 - Priory Court on 5 and 11 August 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider had been made after our comprehensive inspection on 6 and 8 January 2015. We inspected the service against one of the five questions we ask about services: is the service well-led? This is because the service was not meeting a legal requirement at the time of our initial 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 was undertaken by one adult social care inspector. During the inspection we talked with four people using the service, five staff and the manager. We reviewed a sample of quality assurance and monitoring records. These included medicines, health and safety and care plan audits, complaints records, accident records, tenant and staff surveys, meeting minutes and the staff hand over book.

Is the service well-led?

Our findings

At our last inspection in January 2015 a breach of legal requirements was found. Suitable arrangements were not in place for assessing and monitoring the quality of the service. We reviewed the action plan the provider sent to us following our comprehensive inspection in January 2015. This gave assurances that action was being taken to improve arrangements for assessing and monitoring the quality of the service. The provider told us in their action plan 'actions have either been complete or are underway. Several are on-going and will be constant piece of work.'

We found improvements had been made with assessing and monitoring the quality of the service. People we spoke with told us their views on the quality of the service were sought and they felt listened to. They confirmed surveys were undertaken by the provider and described the new manager as having an open style. People we spoke with praised the manager and staff team. A comment made to us was, "Sometimes we get questionnaires. We have tenants meetings too." With regards to raising complaints, one person said, "You can just go to the office and tell them about it, or speak to the senior or the manager." People also confirmed the new manager was proactive in seeking people's opinions. For example, one person said, "I'm quite happy here, now. The manager is really, really good. She speaks to us and asks if we are alright." Another person told us, "There's a chap who comes and checks if things are alright. They assess the place and ask a few questions."

Staff we spoke with made similarly positive comments about their involvement in the quality monitoring and oversight of the service. One staff member told us, "They are good at listening to what we have to say. You can speak to the manager and the senior at any time. It's getting better." Regarding the manager they said, "The manager's just started, they're definitely trying and making a difference. They act on what you say." Another staff member told us the manager; "Seems to be down to earth, bubbly and very helpful. They will attend to incidents and I think they are really good." Staff also told us more senior managers had visited the service and had spoken with people using the service and staff.

We looked at a sample of audit and monitoring records. Staff sought people's views on a formal basis by the use of questionnaires. Staff told us these were completed on a rotational basis, with four being handed out and

completed by people using the service each month. Questions asked included those seeking people's overall views about the service received and suggestions for improvements. More specific questions about being kept up to date with changes, levels of staff support and the complaints process were also asked. People's feedback was, on the whole, positive. Suggestions for improvements around activities, which had also been raised in 'tenant meetings', had been acknowledged and acted upon. This was confirmed in the feedback we received from people using the service.

Other audits carried out by the manager and senior staff included medication audits, and checks on care plans and staff files. Staff had reviewed the quality of these areas by using checklists and identified areas needing improvement. Where action was needed, this was documented and followed up to ensure improvements were put in place and sustained. For example, where staff had omitted to sign medicines they had administered, this was picked up through the audit process, highlighted through an action plan and followed up to ensure practice improved. We saw such audits were carried out regularly and were up to date.

The manager told us external audit arrangement had been developed using a new IT system. This had been started, but temporarily suspended due to technical IT issues. Nevertheless, we were told by people using the service and staff that more senior line managers visited the service to ensure expected standards were maintained.

The complaints system was also used to seek people's views and used as a means to improve the service. We looked at four complaints logged during 2015. The manager had acknowledged, investigated and provided feedback to the complainant in each case. There was also evidence that action was taken to resolve the concern that had initially triggered the complaint.

When we last inspected, poor communication had been identified as an area of concern by staff. Staff told us this had significantly improved since the appointment of a new manager. They told us they were more informed and involved in changes affecting the service. This was confirmed by the meeting records we looked at.

Is the service well-led?

We found the assurances the provider had given in the action plan with regard to assessing and monitoring the quality of the service had been met or were in the process of being addressed.