

Choices Housing Association Limited

Choices Housing Association Limited - 103 Heath Street

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

103 Heath Street is a residential care home providing personal care to five people who had a learning and/or physical disability at the time of the inspection. The service can support up to six people in one adapted building.

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.

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

People living at 103 Heath Street experienced an excellent level of care and support which promoted positive outcomes for people. There was a strong focus of person-centred care within the service, which staff followed in practice to ensure people led a full and varied life.

People received exceptional care at the end of their life that met their wishes. Staff ensured people received caring support and attention in the final days of their life.

People and relatives were consistently involved in all aspects of their care to ensure support reflected their preferences. The positive outcomes for people using the service were reflected in the principles and values of Registering the Right Support, by promoting choice and control, independence and inclusion.

The registered manager had forged excellent working relationships with other professionals to ensure people received the best possible care in line with their individual needs and preferences. Continuous learning and improvement strategies were used to continually seek ways to improve the level of support people received.

People were supported by safely recruited staff, who had the skills and knowledge to provide effective support. Staffing levels were regularly reviewed to ensure there were enough staff available to meet people's needs. People's medicines were managed, and staff followed infection control procedures.

People were cared for by caring and attentive staff who supported people in a dignified and respectful way. People's right to privacy was upheld. People had been supported to maintain friendships that were important to them. Staff and the registered manager respected people's diverse needs and promoted an open culture.

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 had access to complaints procedures and their feedback was used to inform service delivery. The registered manager had systems in place to ensure people's risks were mitigated. The registered manager worked in line with the requirements of their registration.

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 (published 13 October 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was exceptionally effective.

Details are in our effective findings below.

Outstanding ☆

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Choices Housing Association Limited - 103 Heath Street

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 carried out by one inspector.

Service and service type

103 Heath Street 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, which included notifications about events that had happened at the service. We sought feedback from the local authority

who work with the service. 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

People who used the service were unable to tell us about their experience. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with three members of staff including the registered manager and care workers. We reviewed a range of records. This included three people's medication and care records. We looked at a variety of records relating to the management and monitoring of the service.

After the inspection

We received feedback from five professionals who regularly visited the service to gain their experiences. We spoke with four relatives about their experience of the care provided.

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 Requires improvement. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from harm because staff understood how to recognise and report incidents of potential harm.
- The registered manager had made appropriate referrals to the local safeguarding authority. Investigations were completed where needed to ensure people were supported safely and risks were managed.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Relatives told us they felt their relatives were safe and well looked after at the service. One relative said, "The staff look after my relative well and I feel reassured that they are safe at the service."
- We observed staff supporting people to lower their risks whilst promoting their independence. For example; staff monitored one person's mobility as they were at risk of falls, whilst ensuring they encouraged them to do as much for themselves as possible.
- People had risk management plans in place, which were person centred and gave staff guidance on how to support people to lower risks whilst promoting independence.
- Incidents that had happened at the service were recorded and monitored by the registered manager. There were systems in place to pass on learning to staff to ensure further occurrences were reduced.

Staffing and recruitment

- Relatives told us there were enough staff available to ensure their relative's needs were met, which included personal care and accessing the community and interests they enjoyed. One relative said, "From what I have seen there has always been enough staff and [relative's name] goes out often with staff, so I think there is enough."
- There were enough staff available and deployed effectively to meet people's needs.
- The registered manager and provider had a system in place to monitor and review staffing levels to ensure they met people's changing needs. For example; one to one support was provided when needed to ensure risks to people were reduced.
- The provider followed safe recruitment practices to ensure people were supported by suitable staff.

Using medicines safely

- People's medicines were administered by staff who had received training and understood how to support people with their medicines in a safe way.
- Where people needed their medicines 'as required' protocols were in place to provide staff with guidance. For example; protocols detailed how staff needed to recognise when people were in pain such as pointing to specific areas, or different vocal sounds they made. This ensured people's pain was managed when they needed it.

- The registered manager had systems in place to ensure medicines were managed safely. This included observations of medicine administration and regular audits.

Preventing and controlling infection

- The service was clean and there were no mal odours present.
- There were infection control procedures in place which were adhered to by staff. Staff we spoke with told us the importance of using aprons and gloves, which were always available to them. One staff member said, "I always wear gloves and aprons when supporting people as this prevents cross infection. There are always plenty available for me to use."
- We noted that the radiators in the bathroom and shower room had some areas of rust, which could pose as an infection risk. The registered manager was aware of these areas and there were plans in place to ensure maintenance was carried out to lower the risk to people.

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 now improved to Outstanding. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The registered manager and staff had been proactive in assisting people to improve their eating ability. For example; one person was unable to eat food orally and through staff interaction with professionals this person began to eat orally. Staff told us this person had always taken great pleasure from eating and it was very rewarding to see them enjoying food again.
- Professionals told us staff and the registered manager had been exceptional in working with them to ensure people's eating and swallowing risks were reduced. One professional said, "The staff and registered manager have been excellent in recognising and referring people to ensure they were supported effectively. They are excellent at acting on advice given to ensure people's risks are reduced when eating and drinking."
- Staff we spoke with had a high level of understanding with regards to managing people's nutritional risks and there were detailed plans for staff to follow, which confirmed what staff had told us.

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

- People were supported to access healthcare professionals to ensure their health and wellbeing was maintained. One relative said, "The staff and manager are fantastic, they call the GP to come out immediately if my relative is unwell."
- Professionals told us staff and the registered manager were pro-active in their approach to people's health needs, which had meant people's health had improved. For example; staff and the registered manager worked alongside health professionals to understand how one person displayed pain and how this could be alleviated. Recording charts were implemented to note when this person was in distress and how staff had alleviated this by changes in their position. This helped with the management of this person's pain. Due to this input and joint working this person's pain medicines had been reduced and has decreased the need for previously planned orthopaedic surgery.
- Staff and the registered manager worked closely with health and social care professionals to alleviate one person's anxieties, which caused them a high level of distress. Through working with professionals, recording times of distress and analysing trends this person's support was increased. The analysis identified that one of the triggers to this person's anxiety was visitors to the service and staff ensured they facilitated an outing when they knew people were visiting the service. This has significantly reduced this person's periods of heightened anxiety.
- Staff followed nationally recognised guidelines to support people with their oral healthcare needs and explained the importance of good oral hygiene. Support plans gave clear guidance on how staff needed to support people with their oral health.

- Hospital passports were in place, which contained information about people's needs and how to communicate with people effectively. This ensured people received consistent care when they were being supported by other agencies
- There was a handover system in place, which ensured staff provided consistent support that met people's changing needs.

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

- People's needs were assessed before they started to use the service. Care plans were developed in all areas of people's care to ensure the support they received was personalised and met their diverse needs. For example; one person's support detailed the need for staff who had built up a good rapport with them to assist with their meals as this promoted the person's eating to ensure their weight was maintained. Staff rotas were developed in line with this person's care needs to ensure familiar staff were available to provide support.
- People's support was provided in line with current guidance, such as NICE to ensure they were supported effectively.
- The service met the principles of Registering the Right Support because the registered manager and staff ensured people received person centred care.

Staff support: induction, training, skills and experience

- Staff had received an induction before they supported people and had received training to ensure they had the skills and knowledge to support people effectively.
- Staff had been supported to undertake condition specific training such as epilepsy, which helped staff to understand how to support people with their individual conditions. One staff member said, "I have received epilepsy training and it really helped me understand how to help people when they are having a seizure."
- Staff told us they were supported in their role. One staff member said, "I feel fully supported we have supervisions, where I can raise any issues and talk about any training I may need. [Registered manager's name] always listens and we have good discussions."

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

- The service was designed and decorated to meet people's needs. People's bedrooms were personalised, and communal areas were homely.
- Adaptations had been made to the service to ensure people were safe such as bath chairs and specialist beds. Assistive technology was used to ensure people were safe when attempting to mobilise and to reduce the risks of falls.
- Sensory lights were in place in the bathroom to create a relaxing area for people to spend time and to relay any fears when being supported to maintain their personal hygiene.

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.

- Staff and the registered manager understood their responsibilities to ensure people were supported in their best interests and in line with the MCA and their authorised DoLS.
- The records in place supported what staff had told us and ensured staff had guidance to follow to support people in their best interests.

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

- Relatives told us the staff were caring and compassionate towards their loved ones. Comments included, "The staff are brilliant and my relative is well looked after", "The carers are fantastic, and I feel so happy they are well looked after" and "The care staff are very nice, they are willing to do anything to make sure my relative is happy."
- We observed caring interactions between people and staff. People were happy to see staff and they spent time with people talking about the things they liked. Staff complimented people on the way they were dressed, and they responded happily and were proud of their appearance.
- Professionals all commented on the caring and attentive support staff provided. One professional said, "The staff are always very caring when they are providing support to people and they are attentive to people's needs."
- People were supported to maintain relationships with their families and friends. The registered manager told us they were discussing 'keep in touch days' with families, to ensure they maintained regular contact with their relatives.
- Staff understood the importance of respecting people's diverse needs when they provided support and how they promoted equality and anti-discriminatory practice.
- Care plans contained details of how people expressed their sexuality and how staff needed to support people in line with their preferences.

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

- People were encouraged to make choices about their daily support and staff ensured people were given information in a format that helped them to make as many choices as possible.
- Staff respected people's wishes and had a good understanding of people's way of communicating their choices. These were often physical signs and individual sounds that people made to make their views known.
- The care plans were detailed and confirmed what we saw and what staff told us during the inspection.

Respecting and promoting people's privacy, dignity and independence

- Relatives told us staff treated people with dignity and respect. One relative said, "The staff are always very respectful and treat my relative with dignity."
- People's independence was promoted. For example, one person had an adapted dish to help them eat their meals independently.
- Staff explained the importance of supporting people in a way that met their needs and how they

encouraged independence.

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 now improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

End of life care and support

- Without exception professionals told us the end of life care at the service was excellent. One professional said, "I have worked closely with the registered manager for the palliative and end of life (EOL) care for one of their residents. The registered manager advocated for the person living at 103 Heath Street and ensured that all services/agencies involved made reasonable adjustments to meet the needs of this person. The registered manager worked above and beyond to ensure the person stayed at 103 Heath Street as this was their home and being anywhere else for EOL would have caused them great distress. With the passion and dedication of this registered manager and their team they enabled this person to have a very peaceful passing and most importantly surrounded by those that knew them the best and offered so much comfort right until the end."
- Staff supported this person in line with their wishes and preferences at the end of their life. The person loved parties and wanted lots of parties at the service with the people who were important to them. We saw pictures of these parties celebrating the person's life.
- This person loved Christmas and staff ensured their room was decorated with Christmas decorations and Christmas films were playing on the television during their final hours. Staffing had been arranged to ensure there was always someone with this person, holding their hand and offering drinks.
- The registered manager said, "This person's death was so peaceful and just how they wanted it. It was a good death for them surrounded by the things and people they hold dear to them."
- Another professional told us the registered manager had challenged a health professional where a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) form had been completed. They ensured the decision was in their best interests and representatives in this person's life were involved.
- End of life wishes had been gained from other people or their relatives to ensure staff could provide an inclusive and personalised service when they are at this time of their lives.

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

- People and their relatives were an integral part of the planning and developing of the care they wanted. People's support plans were individual and contained detailed guidance for staff to follow to support people in line with their preferences. This ensured people's wishes were at the heart of the support they received from staff.
- Relatives felt fully involved in the planning and review of their relatives' support. One relative said. I have been very involved in my relative's care. The staff listen to me, which has helped them support my relative in the way they have always liked."
- Professionals were extremely positive about the personalised support people received. Comments

included, "The support people receive is always person centred. I have always been confident that if a person has complex feeding issues (including feeding tubes) their needs will be met. Staff are good at co-ordinating care to ensure people receive positive outcomes. For example, arranging a Multidisciplinary Team Meeting (MDT) to discuss how best to meet a person's needs", and "I have observed the home to provide personalised care in relation to ensuring safety and personal preferences are integral to care planning."

- Staff and the registered manager had continually responded to people's changing needs to ensure they had the best possible outcomes. For example; one person had been admitted to hospital as their condition had deteriorated. This person was discharged from hospital unable to eat for themselves and needing their nutrients through a tube. Staff worked with professionals to help this person regain their ability to eat their food orally. This person was now able to eat their food supported by staff. One staff member said, "They [person] have always taken great pleasure from their food and it is so rewarding to know we have helped them to eat again and continue to get enjoyment from this."

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 were supported to understand information in various ways. Pictorial formats were available to help people understand in a way that met their needs. For example, there were pictorial communication plans to ensure people could inform staff how they were feeling. Safeguarding from abuse was provided in a pictorial format so people were able to tell staff if they felt unsafe.
- One professional said, "The staff seek and use different strategies to communicate with people and listen to any advice given to help people have a voice. I feel that communication is a strength at this service."
- Support plans provided detailed guidance for staff to ensure they recognised the individual ways that people communicated their needs, such as physical movements and specific vocal sounds. Staff were observed interacting with people in line with this guidance.

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 supported people to be involved in activities that were important to them. For example; one person was at risk because they attempted to put plastic in their mouth. However, staff had worked with the relative and found out that the person gained a lot of pleasure from plastic items. Staff devised a 'rustle box' for this person which was used with staff to ensure they were safe. We saw the person enjoyed this activity, which settled them and helped them manage their anxieties.
- People took part in activities in the local community. This included bike rides with specially adapted bikes to enable people in wheelchairs to enjoy this activity. People went shopping with staff, visited local garden centres and enjoyed pamper/sensory sessions within the service.
- People made a wish each month of what they wanted to do with staff and memory books had been created for people to look back on and reminisce about past activities they had been involved in.

Improving care quality in response to complaints or concerns

- Relatives told us they knew how to make a complaint if needed. All relatives we spoke with had no concerns about the care people received and described the service as 'Wonderful'.
- People had access to easy read versions of the complaints procedure to ensure they were provided with the most effective way to raise any concerns in line with their needs.
- There had been no complaints received at the service, since our last 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.

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; Working in partnership with others

- Without exception the feedback we gained from professionals was extremely positive. They all told us that the registered manager was integral in ensuring people were at the heart of the service. One professional said, "[Registered manager's name] truly cares about the people who live here [103 Heath Street] they lead the staff team to provide excellent person-centred care."
- Excellent links had been developed with professionals to adapt people's support needs to ensure they had the best possible quality of life. A professional told us how the registered manager had advocated on a person's behalf to ensure their end of life wishes were listened to and staff followed by example.
- The registered manager created a person-centred culture and continuously drove staff to follow the values of the service. One staff member said, "Our main goal is to make sure people are happy and involved in their care."
- The registered manager carried out culture assessments to ensure any concerns around the culture at the service were identified and rectified. This ensured that people were supported in an environment that promoted their wellbeing.
- The registered manager understood the importance of 'Registering the Right Support' and ensured they supported people in line with these principles. This ensured people received care which was developed around their needs and in a way that met their preferences.

Continuous learning and improving care

- Staff told us their suggestions were used to improve people's outcomes. For example; one staff member told us they had suggested a different evening routine for one person to help them settle. The registered manager listened and incorporated this into their support. The staff member told us this had really helped the person to relax before they went to bed.
- The provider was pro-active in preventing abuse and had implemented a framework which was used alongside staff supervision to ensure staff had an excellent knowledge of safeguarding concerns and conflicts within the care environment.
- There was an annual improvement plan in place, which contained the vision of the service 'To provide outstanding care, every time'. The improvement plan was used to continuously improve the service people received.

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; Engaging and involving people using the service, the

public and staff, fully considering their equality characteristics

- The registered manager promoted an open culture where people, relative, staff and professionals felt able to approach them with any suggestions about the service provided.
- Relatives told us the registered manager was always available if they needed to speak with them and acted on any feedback they provided. One relative said, "[Registered manager's name] is very supportive and easy to talk to, they have always been helpful with me and my relative."
- Staff told us they had a good role model in the registered manager, who was supportive and listened to their views. One staff member said, "[Registered manager's name] is very supportive and if I raise any issues they always act on it."
- There were systems in place to gain feedback from people, relatives, staff and professionals, such as surveys, resident meetings and staff meetings. This ensured there was the opportunity to gain feedback to inform service delivery.

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

- The registered manager understood the responsibilities of their registration with us. They had forwarded notifications as required and the previous rating was on display.
- There were effective systems in place to ensure the service people received was monitored and risks mitigated. Where issues had been identified the registered manager had acted to ensure staff were aware of any changes in the support to ensure further incidences were reduced.
- The provider had an overview of the service. Systems were in place to update the provider of the results of audits undertaken and to show the actions taken by the registered manager.
- Compliance assessments were carried out by the provider's performance and compliance manager to ensure the registered manager was carrying out their role as required. Feedback was provided to the registered manager on any areas that needed action.