

Select Lifestyles Limited Select Lifestyles Limited -512-514 Stratford Road

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

| Is the service safe? | Inspected but not rated |
|----------------------------|-------------------------|
| Is the service caring? | Inspected but not rated |
| Is the service responsive? | Inspected but not rated |
| Is the service well-led? | Inspected but not rated |

Summary of findings

Overall summary

About the service

Select Lifestyles Limited – 512-514 Stratford Road is a care home without nursing providing accommodation and personal care for to up to 6 people. Six people lived at the home at the time of this inspection.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right support

Improvements had been made since our last inspection. Where possible people contributed to planning and reviewing their care and making decisions about their lives, including deciding how they spent their time. This demonstrated people's voices were being listened to. People had maximum possible choice and control over their lives, and they had opportunities to maintain and gain independence. Staff understood the importance of maintaining people's dignity and their right to privacy. People receive their medicines when they needed them.

Right Care

People felt safe and the safety of the service including cleanliness of the home had improved since August 2022. People received personalised care and support. Risks associated with people's care had been assessed and more information had been added to people's care records to help staff provide safe care.

Right culture

The leadership of the service had been strengthened and the providers quality assurance systems were being operated in line with their expectations. Whilst feedback confirmed the culture of the service had improved the provider needs to embed and sustain the improvements made to demonstrate consistent good practice over time.

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

Rating at last inspection and update

The last rating for this service was inadequate (published 10 October 2022) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 9 (Person-centred care), Regulation 10 (Dignity and respect), Regulation 12 (Safe Care and Treatment) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

We also undertook this inspection to assess that the service is applying the principles of right support right care right culture.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We use targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Select Lifestyles Limited 512-514 Stratford Road our website at www.cqc.org.uk

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

| Is the service safe? | Inspected but not rated |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection. | |
| Is the service caring? | Inspected but not rated |
| At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection. | |
| Is the service responsive? | Inspected but not rated |
| At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection. | |
| Is the service well-led? | Inspected but not rated |
| At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection. | |



Select Lifestyles Limited -512-514 Stratford 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 Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notices in relation to Regulation 9 Person centred care, Regulation 10 Dignity and respect, Regulation 12 Safe care and treatment and Regulation 17 Good governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team The inspection was carried out by two inspectors.

Service and service type

Select Lifestyles Limited - 512-514 Stratford Road is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Select Lifestyles Limited 512-514 Stratford Road is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not a registered manager in post.

Notice of inspection Our inspection visit was unannounced.

What we did before the inspection

We reviewed the information we had received about the service since our last inspection. We gathered feedback from local authority commissioners and the NHS care at home support team who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

During the inspection we spoke with 2 people to find out what is was like to live at the home. We observed the care and support provided in communal areas. We spoke with 1 person's relative about their experiences of the care provided. We spoke with 6 members of staff including 2 support workers, the manager, the operations manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed 3 people's care records and 4 people's medication records. We looked at a range of records relating to the governance and management of the service.

Is the service safe?

Our findings

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

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

At our last inspection we found the provider had not identified, assessed or mitigated risks associated with people's care and support needs, the environment, medicines and the prevention and control of infection. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- One person told us they felt safe because staff were kind and supported them to see their doctor when they needed to. They said, "He (doctor) keeps an eye on us and makes sure we are okay." A relative told us they had no concerns about their family members safety.
- Action had been taken since our last inspection to improve safety. Risks associated with different aspects of people's care and support such as their mobility had been assessed. In addition, the amount of information within care records had increased to help staff provide care safely.
- Discussions with staff demonstrated they understood how to manage risks. For example, a staff member explained how supporting a person to wash using a medicated lotion had improved their skin condition.
- At our last inspection a staff member assisted a person to eat whilst they were drowsy which was unsafe. During this inspection we observed the person was assisted to eat their lunch safely.
- Environmental risks had been mitigated. The rear garden gate had been secured and harmful cleaning products containing chemicals were no longer accessible to people.

Using medicines safely

- Medicines management had improved. One person told us staff gave them their medicines on time and medicine administration records showed people had received their medicines including medicated shampoos and ointments as prescribed.
- An electronic medicine administration system had been implemented since our last inspection. Staff told us the system was easy to use and alerted them if any medicines had not been given which reduced the risk of medicine errors occurring.
- Staff had completed medicines training to ensure they followed safe systems and processes to administer,

record and store medicines. Staff competency to do this safely was checked by the manager.

- The management of prescribed creams had improved. All creams in use had prescription labels and their dates of opening recorded in line with best practice guidance. That meant the provider could assure themselves creams were being used within recommended timescales.
- The medication storage had been refurbished and the storage of medicines had improved. Thickening powders were stored safely, and prescribed creams were no longer located in people's bedrooms. Temperature records meant the provider could demonstrate medicines had been stored within a suitable temperature range.

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 MCA 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.

• We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Preventing and controlling infection including the cleanliness of premises

- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. Improvements had been made since our last inspection because the home was clean. Regular cleaning took place to ensure standards of cleanliness were maintained to make sure the home was a nice place for people to live.
- We were assured that the provider was using PPE effectively and safely. We saw staff wore their face masks correctly throughout our visit.
- We were assured that the provider's infection prevention and control policy was up to date. The policy was up to date and was followed by staff to prevent infections spreading to keep people safe.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

• Visiting in care homes

The provider facilitated visits in line with guidance. The manager told us visitors were welcome at any time.

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 our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Respecting and promoting people's dignity, privacy, and independence; Supporting people to express their views and be involved in making decisions about their care; Ensuring people are well treated and supported; respecting equality and diversity

At our last inspection people were not always treated with respect and did not have opportunities to be involved in making decision about their care. People's privacy and dignity was not always maintained, and their independence was not promoted. This was a breach of Regulation 10 (Dignity and respect) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 10.

- People's dignity was maintained. One person explained staff provided prompt support when they needed to use the toilet which confirmed improvement had been made in this area since our last inspection.
- A relative described the home as a 'happy place.' They commented, "We visited last week, and we heard people laughing and joking with staff, it was lovely."

• People liked the staff and a relative provided positive feedback about them. One person said, "Staff are really nice," and, a relative commented, "Three staff in particular are very good, very caring. They go beyond what is expected."

• The management team had taken action to ensure people were treated well which included holding a staff meeting to remind staff of the provider's expectations. Our discussions with staff confirmed they cared about people and they spoke about them in a respectful way. Staff encouraged people to make decisions including choosing what they wanted to drink and how they spent their time during our visit.

• People's privacy was respected. An electronic communication device used at our last inspection had been replaced with a more suitable piece of equipment which meant private conversations were not overhead by others. One person told us, "The monitor is a thing of the past, it's gone and it's not coming back, it wasn't dignified, the buzzer is much better, more grown up."

• Action had been taken to ensure people's independence was maintained and promoted. An accessible bespoke workstation had been created for one person in response to our inspection feedback in August 2022. The person told us the height of their workstation had been measured for them which meant they

could develop and increase their food preparation and cake making skills comfortably.

Is the service responsive?

Our findings

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

At our last inspection this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

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

At our last inspection the care and support provided did not meet people's needs or reflect their preferences. This was a breach of Regulation 9 (Person-centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 9.

• People told us they received personalised care and they had more control over their lives. Where possible people had been involved in writing and agreeing to the content of their care plans to ensure staff provided care and support in line with their wishes. That showed the provider had made improvements.

• People were supported to achieve meaningful goals. One person who had previously told us of their wish to access further education had enrolled onto a college course. They commented, "I can't wait."

• Staff knew people well and demonstrated commitment to supporting people to live fulfilled lives. People told us they had more opportunities to go out and experience new things including going to discos. One person smiled when they spoke with us about going to the disco. A staff, member commented, "They (person) are living their best life."

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 our last inspection we rated this key question inadequate. We have not changed the rating as we have not looked at all of the well - led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection the provider had failed to ensure their systems and processes were established and operated effectively. Accurate and complete records in respect of each person were not maintained and feedback from relevant persons to continually evaluate and improve the service was not gathered. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

• Governance systems to monitor the quality and safety of the service had been strengthened. Audits and checks were taking place in line with the providers expectations and the new electronic medicines administration system had improved medicines safety. Whilst improvements had been made the provider needs more time to demonstrate the improvements made can be sustained over time to assure themselves, they are embedded into practice.

• Provider and managerial oversight of the service had improved. A new manager had started work at the home in October 2022. Senior managers including the nominated individual had increased the frequency of their visits to offer support and guidance to staff to make sure people were in receipt of safe, quality care.

• To continually improve and learn the provider had sourced an independent compliance company to conduct mock CQC type inspection checks. The nominated individual told us they, "Wanted to get things right and then sustain the good practice."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

• At our last inspection the culture of the home was not shaped and led by people. During this inspection a relative told us communication was improving. They explained staff were getting better at keeping them updated on their family members health and a meeting was arranged to take place shortly after our visit to

discuss their family members care.

• People felt more involved in making decisions and their feedback was gathered and listened to. For example, people had chosen the paint colour for walls in their home and they were more involved in menu planning and writing their care plans.

• People had opportunities to attend meetings and talk about their care and their home. The nominated individual said, "We have really improved, we are listening and responding to what people want."