

Nottingham Community Housing Association Limited

304 Southwell Road

Inspection report

304-306 Southwell Road East
Rainworth
Mansfield
Nottinghamshire
NG21 0EB

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Date of inspection visit:
10 March 2020

Date of publication:
26 March 2020

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

304 Southwell Road is a residential care home which can provide personal care for up to eight people. The service specialises in supporting people who have a learning disability, are on the autistic spectrum, or have mental health support needs.

The care home comprises of two adjacent bungalows with separate facilities. Each bungalow can accommodate four people. There were seven people living there at the time of our inspection. 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 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.

There were no identifying signs, 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

People were kept safe from avoidable harm. Staff were aware of their responsibilities for keeping people safe and knew what to do should they feel someone was at risk of harm. Risks relating to people's care and support had been assessed, managed and monitored. Suitable numbers of appropriately recruited staff were available to meet people's care and support needs and people were supported with their medicines safely. Staff followed the provider's infection control policy and lessons were learned when things went wrong.

A comprehensive assessment process was followed when new people moved into the service and people were supported to eat and drink well. Staff knew people well and had the skills and knowledge to meet their needs. People were provided with a comfortable and homely place to live. Staff worked well together, they supported people to live healthier lives and they obtained people's consent. 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.

Staff were kind and caring and showed people the respect they deserved. People were treated with dignity and were fully involved in making decisions around their care and support.

Plans of care had been developed when people had first moved into the service, and these identified the care and support people needed. Concerns were taken seriously and handled in line with the provider's complaints procedure. People's wishes at the end of their life had been explored.

The management team regularly monitored the service. Auditing systems were in place and these were carried out on a daily, weekly and monthly basis. The staff team felt supported and their views of the service were sought. People and their relatives were involved in how the service was run. This was through meetings, the use of surveys and day to day conversations with the management and staff team. The staff team worked in partnership with others to make sure people received safe care and support.

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 28 July 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 effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

304 Southwell 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

The inspection was carried out by one inspector.

Service and service type

304 Southwell Road 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, however they had recently left the service. A new manager had started on the day of our visit and it was their intention to register with CQC. This means the registered manager 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 held about the service such as notifications. These are events which happened in the service that the provider is required to tell us about. We sought feedback from the local authority who monitor the care and support people received and Healthwatch Nottinghamshire. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and

improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with five people living at the service. We spoke with the manager, the deputy manager, the quality monitoring officer and seven support workers. We observed support being provided in the communal areas of the service. We reviewed a range of records about people's care and how the service was managed. This included two people's care records and associated documents including risk assessments and a sample of medicine records. We looked at staff training records and the recruitment checks carried out for one staff member employed since our last visit. We also looked at a sample of the provider's quality assurance audits the management team had completed.

After the inspection

The manager provided us with further evidence to demonstrate compliance with the regulations.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living at 304 Southwell Road.
- One person told us, "I do feel safe, it is a calm place and I feel settled."
- Support workers were aware of their responsibilities to keep people safe from avoidable harm, including the reporting of any concerns. One explained, "I would report it to my line manager, they would act 100%."
- The management team were aware of their responsibilities for keeping people safe from avoidable harm. This included reporting any concerns to the local authority safeguarding team.

Assessing risk, safety monitoring and management

- The risks associated with people's care and support had been assessed when they had first moved to the service.
- Once identified, risks to people had been regularly monitored and managed to keep people safe.
- People were provided with a safe place to live. Checks had been carried out on the environment and on the equipment used.
- Personal emergency evacuation plans were in place. These showed how people were to be assisted should the need to evacuate the building arise.

Staffing and recruitment

- The provider's recruitment processes remained robust ensuring only the right people with the right values were employed at the service.
- Appropriate pre-employment checks continued to be carried out when new members of staff were employed.
- Appropriate numbers of staff were on duty to meet people's current care and support needs.

Using medicines safely

- People's medicines had been appropriately managed, and people were supported to have their medicines at the right times and in a safe way.
- Staff had received training in medicine management and their competency was regularly checked.
- Protocols were in place for medicines prescribed to be given only as required.
- Records kept showing the medicines people were supported with were appropriately completed with no gaps present.
- Medicines were stored securely and monitored regularly.

Preventing and controlling infection

- Staff had received training on the prevention and control of infection, and they followed the provider's

infection control policy.

- Personal protective equipment (PPE) such as gloves and aprons were readily available and used as appropriate.

Learning lessons when things go wrong

- The management team ensured lessons were learned and improvements were made when things went wrong.
- For example, due to a misunderstanding between support workers, one person was left without their one to one support for a short period of time. This was fully investigated, and a checking system put in place, to ensure there would be no reoccurrence of the incident.

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 remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's individual and diverse care and support needs had been comprehensively assessed prior to them moving into the service.
- People had been able to visit the service before moving in, and relevant information had been obtained from their relatives, and other support agencies involved in their care and support.
- During the assessment process people's goals and aspirations were identified and they were encouraged and supported to set goals for the future, wherever possible and however small.
- Care and support was provided in line with national guidance and best practice guidelines. This included providing oral healthcare support and preventing infections.

Staff support: induction, training, skills and experience

- Support workers had received an induction into the service when they first started working there and training relevant to their roles had been provided.
- One explained, "I had an induction where we discussed the care certificate and the training required. I can't fault them training wise, they are phenomenal. I've got first aid training on Thursday then all my training is done, all in six months. The trainers are amazing."
- Support workers felt very much supported by the management team. One told us, "I can honestly say this is the best place I have worked, and the company pull together to make sure everything is done in the correct way."

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

- People were supported to maintain a healthy balanced diet and to eat and drink well.
- Nutritional risk assessments had been completed and plans of care developed for people's eating and drinking requirements.
- People were involved in menu planning and were supported to prepare their own meals whenever possible to maintain their independence. One person told us, "We've got a menu, I love it."

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

- The staff team worked with external agencies including commissioners and healthcare professionals to provide effective care.
- Support workers were observant to changes in people's health and when concerns were raised, support from the relevant healthcare professionals was sought.

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

- People had access to suitable indoor and outdoor spaces. There were spaces available for people to meet with others or to simply be alone.
- Communal rooms were designed to provide a pleasant, welcoming and homely environment for the people living there.
- People were encouraged to personalise their own rooms. We saw rooms reflected people's interests, hobbies and culture.

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.

- The service was working within the principles of the MCA.
- Mental capacity assessments and best interest decisions had been completed for individual decisions people were unable to make for themselves.
- Any restrictions on people's liberty had been authorised and conditions had been adhered to.
- The staff team had received training on MCA and those spoken with understood their responsibilities within this. One staff member explained, "It is there to safeguard the service users and is used in people's best interest."

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

- People told us the staff team were kind and caring and they looked after them well.
- One person explained, "Staff are always in a good mood, and they care." Another told us, "The staff are all so friendly."
- Support workers offered support in a relaxed and caring manner and spoke to people in a kind way.
- Information was available to enable the support workers to provide individualised care and support.
- Support workers knew the people they were supporting well and knew their likes and dislikes and personal preferences.
- People using the service experienced positive relationships with the staff team.

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

- People were actively involved in making decisions about their care and support and encouraged and supported to express their views about their day to day routines and personal preferences.
- We observed support workers offering choices and supporting people to make decisions throughout our visit.
- Support workers listened to people and understood those they supported. One person explained, "They know me so well, what I like and what I don't like, they treat me like a princess."
- Advocacy services were made available. This meant people had access to someone who could support them and speak up on their behalf when they needed it.

Respecting and promoting people's privacy, dignity and independence

- People were supported to be as independent as possible.
- Support workers understood it was a person's human right to be treated with respect and dignity and to be able to express their views. One explained, "We respect people's choices, even if it's not always a good choice."
- Support workers had received training on equality and diversity and respected people's wishes in accordance with the protected characteristics of the Equality Act.
- A confidentiality policy was in place and support workers understood the importance of keeping people's personal information confidential.

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 remained the same. 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

- People were supported to receive individualised care, maintain their independence and access the community.
- People's individual and diverse needs had been identified before moving to the service and plans of care had been developed. Those seen were comprehensive and included personalised information within them.
- People's plans of care had been regularly reviewed to ensure staff had access to information that reflected people's current needs.
- The staff team worked hard to ensure they could meet people's needs however complex.

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 management team understood their responsibility to comply with the AIS and was able to access information regarding the service in different formats to meet people's diverse needs. This included producing documentation in an easy read format.
- People's communication needs had been identified and information had been provided in a way people understood.

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

- The staff team worked hard to support people to actively access interests and activities that were important to them.
- People's interests and hobbies had been fully explored and people were supported to follow their interests and take part in meaningful activities of their choice.
- One support worker explained, "[Person] goes tree cutting on a Thursday and music café on a Wednesday. Not a day goes by when they are not doing something, I love it."
- People confirmed there were lots of activities they could attend. One person explained, "I like bowling and swimming and I've just been shopping." Another told us, "I went to the youth club last week and I'm going to [name] church today."

Improving care quality in response to complaints or concerns

- The provider's complaints process was displayed, and people knew what to do if they were unhappy about

anything. One person told us, "I talk to management first, they listen." Another explained, "I would talk to the staff."

End of life care and support

- There was no one requiring end of life care at the time of our visit.
- Where appropriate, people's wishes for their end of life were included in their plans of care. These included preferences relating to their culture and spiritual needs.

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

- The service helped people achieve good outcomes and people spoke positively about the staff team.
- One person told us, "The staff are great, and I really enjoy it here."
- Support workers understood the provider's vision for the service, and they told us they worked as a team to deliver good standards of care. One explained, "Our aim is to create better lives for those in our care and to enable them to have a life as fruitful as ours. I love my job because I can see what a difference we are making."
- Support workers felt very much supported by the management team. One explained, "I feel 100% supported, [name] is brilliant."

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

- The service had a manager registered with the Care Quality Commission, however they had recently left the service. A new manager had started on the day of our visit and it was their intention to register with CQC.
- The management team understood their legal responsibility for notifying the Care Quality Commission of deaths, incidents and injuries that occurred or affected people using the service. This was important because it meant we were kept informed and we could check whether the appropriate action had been taken in response to these events. They were also aware of their responsibility to have on display the rating from their latest inspection. We saw the rating was clearly on display within the service.
- Systems were in place to monitor the quality of the service being provided.
- Audits had been carried out on the paperwork held including people's plans of care and medicine records. Records showed where issues had been identified, action had been taken.
- Regular audits to monitor the environment and the equipment used to maintain people's safety had also been carried out.
- Support workers understood their roles and responsibilities and the management team understood the importance of their roles. The staff team were held to account for their performance where required.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were fully involved in how the service was run. This was through the use of surveys, regular meetings and informal chats.
- Staff felt valued and confident to speak up about anything that concerned them. One explained, "We have

regular meetings where everyone can speak freely."

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

- The management team worked in an open and transparent way when incidents occurred at the service in line with their responsibilities under the duty of candour.

Working in partnership with others

- The management team worked openly with stakeholders and other agencies. This included raising safeguarding alerts and liaising with social work teams and other professionals when appropriate.

- The management team worked in partnership with people and their relatives, through regular communication. For example, regular newsletters were sent out keeping everyone up to date with events within the service.