

# Orwell Housing Association Limited

# Deben View

## Inspection report

The Avenue  
Woodbridge  
IP12 4BQ

Tel: 01394384565

Website: [www.orwell-housing.co.uk](http://www.orwell-housing.co.uk)

Date of inspection visit:  
30 October 2023

Date of publication:  
21 November 2023

## 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

Deben View is a domiciliary care agency, providing personal care support to adults living in their own flats in 1 purpose-built building.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection there were 30 people receiving personal care support.

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

Systems were in place to safeguard and mitigate risks of abuse and avoidable harm. People received their medicines when they needed them. Lessons were learned from incidents, and measures put in place to reduce the risks of them happening again. Staff were trained in infection control and used personal protective equipment where required.

Ongoing recruitment meant there were enough staff to ensure people were provided with the care and support required to meet their assessed needs and staff were recruited safely. Staff were trained to meet the needs of people. Where people required support with their dietary and health needs, this was assessed and systems in place to meet their needs.

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's care plans were person centred provided guidance for staff in how their assessed needs and preferences were met. People received care and support from staff who were caring and who respected their privacy and independence. People made decisions about their care and support, including how they preferred to be supported and their end-of-life decisions.

Systems were in place to monitor and assess the care provided, and where shortfalls were identified actions taken to make improvements. There was a complaints procedure in place and people's views were used to improve the service. The service worked well with other professionals involved in people's care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 23 May 2018).

### Why we inspected

This comprehensive inspection was prompted by a review of the information we held about this service.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Deben View on our website at [www.cqc.org.uk](http://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?

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 ●

# Deben View

## 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.

#### Inspection team

The inspection was undertaken by 1 inspector.

#### Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### 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. We sought feedback from the local authority and professionals who work with the service. We used the information the provider

sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who used the service. We reviewed the care records of 5 people who used the service. We also reviewed a range of records relating to the management of the service, including audits, policies and procedures, staff training records, 3 staff files and 1 staff recruitment record. We spoke with 4 staff members, including the registered manager, administrator, and 2 care staff.

Following our inspection visit, we received electronic feedback from 2 people's relatives and 1 staff member.

# 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 we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to reduce the risks of abuse. Policies and procedures were in place, which provided guidance to staff in identifying and reporting abuse. Staff had received safeguarding training and understood their roles and responsibilities in keeping people safe from abuse.
- Where concerns had been identified, staff had reported them appropriately to the required professionals. This demonstrated an understanding of how to keep people safe.
- The minutes of a meeting attended by people using the service in September 2023, showed safeguarding was explained and how they could report any safeguarding concerns to staff, if they had any.

Assessing risk, safety monitoring and management

- People were protected from avoidable harm; this was because risks were being assessed and measures in place to reduce them.
- Checks were undertaken on the safety of equipment used and fire safety to reduce the risks to people.
- People told us they felt safe. A person showed us their pendant alarm which they used when they needed assistance outside of their planned support visits, which made them feel safe and assistance was available when needed.

Staffing and recruitment

- There were sufficient staff available to ensure planned visits to people were undertaken as required. This was confirmed by people using the service and records.
- The registered manager told us how ongoing recruitment, including of permanent and bank staff, had significantly reduced the need to use agency staff. Records confirmed this. This meant people were being supported by consistent staff who knew them well.
- Staff were recruited safely, including the necessary checks. For example, Disclosure and Barring Service (DBS) checks which provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Where required, people received support with their medicines when they needed it.
- Where people required support with their medicines, their care records guided staff in what support was required and how this was provided safely.
- Staff were trained in the safe management of medicines and their competency was assessed.
- Monitoring of medicines supported the registered manager to identify any discrepancies and take action to address them.

### Preventing and controlling infection

- Infection control procedures and training, followed by staff, reduced the risks to people.
- Staff had access to personal protective equipment (PPE), which was used as required.

### Learning lessons when things go wrong

- The registered manager and staff learned from incidents and accidents and measures were put in place to reduce them happening again.
- Learning was disseminated to staff in meetings and records to ensure they were aware of the requirements of their role.



# 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 our last inspection we rated this key question good. The rating for this key question has remained good. 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

- Prior to people receiving support with their personal care needs, their preferences and requirements were assessed. The assessments were used to implement people's care plans and risk assessments, which were kept under review.
- Assessments were undertaken with the input of people using the service and their representatives, where appropriate.
- The provider's policies and procedures referred to best practice guidelines and legislation. Policies and procedures were used to inform the care people received.

Staff support: induction, training, skills and experience

- Staff received the training they needed to meet people's needs. This included ongoing training and an induction which incorporated the standards set out in The Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- In addition to training which was identified as mandatory, staff received training in people's diverse needs, including dementia, diabetes, mental health, learning disability and epilepsy.
- Staff received 1 to 1 supervision meetings, which provided a forum to discuss their work, receive feedback and identify any training needs they had.

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

- Where people required support with their nutrition and hydration needs, this was documented in their care plans, including guidance for staff in the support people required.
- Some people told us how they chose to have their meals in the shared areas of the service, which was confirmed in our observations. Staff supported the people in line with their care plan, where required.

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

- People's care records identified their health needs and the support required to maintain good health; this included the support needed with their oral care.
- Where concerns were identified with people's wellbeing, they were supported to access health care professionals. Any outcomes were incorporated into people's records to ensure guidance was being followed, for example received from a GP, occupational therapist and/or speech and language therapist.

## 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 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.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People's care records identified their capacity to make their own decisions. Where people had appointed individuals to support their decisions making, this was documented.
- People had signed their care documents to show they had consented to their plan of care.

# 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 we rated this key question good. The rating for this key question has remained 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

- People told us they were supported by staff who were kind and compassionate. This was confirmed in our observations, staff interacted with people in a caring way. A person said, "I love the staff." Another said, "The staff are excellent, all caring." A person's relative told us, "[Family member] is treated with respect, in a friendly caring manner."
- People's care records included people's diverse needs and guidance for staff in how they were to be met.
- Staff received training in dignity in care and equality and diversity.

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

- People's views were sought and valued in relation to the care and support they received.
- People's preferences were documented in their care records and guidance for staff in how to promote and respect people's choices.
- People told us they felt they were listened to in relation to their care. A person said, "I do what I like when I like."

Respecting and promoting people's privacy, dignity and independence

- People's care records included guidance for staff in the areas where people could attend to their care needs independently and where they required support. A person said, "My independence is respected."
- People told us their privacy was respected and their records identified how people's privacy and dignity was promoted and respected. A relative told us, "[Family member] is supported in [their] personal care in a dignified way."

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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

- People told us they received the care and support they needed. A person's relative said, "We have had a very positive experience with Deben View. My [family member] has been made very welcome and cared for well. The staff are extremely helpful and friendly."
- People's care records were written in a person-centred way and included people's specific needs and preferences and guidance for staff in how they were to be met.
- People's records were kept under review and updated when people's needs or preferences changed. People were included in their reviews and care planning, which evidenced their choice and control was promoted and respected.
- Where concerns about people's wellbeing were identified, this was shared with the management team. This information was used to assess if a care review was needed to identify if any changes were required with the support provided, or if further time was required for their visits to ensure their care needs could be met.
- A person's relative told us, "I have never experienced a problem in communicating [family member's] changing needs with any of the staff or management. Plus, they are always ready to listen and suggest ways that we can manage [family member's] care within the guidelines of their responsibilities."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's care records included information about how they communicated and guidance for staff in how to communicate effectively with the individual.
- Where required, documents, such as the complaints procedure and service user guide, was provided in accessible formats, including easy read and larger print.

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

- People told us how they could use the shared areas to meet each other socially such as coffee mornings and Sunday lunch. Social activities, such as bingo and card games were led by the people using the service. This reduced the risks of loneliness and isolation.
- People told us about the 're-wilding' project, where the grounds were made accessible to wildlife in the

area, such as bird boxes. There was a notice board which included photographs of the project and of wildlife seen. A person told us how they had woken during the night and tried to see the badger, which they had not been successful with.

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place.
- Records of complaints demonstrated they were investigated and responded to in line with the complaints procedure and used to drive improvement and reduce the risk of future concerns.

End of life care and support

- People's records included the decisions people had made in relation to their end-of-life care and support. This included if they wished to be resuscitated and where they wished to be cared for if they were becoming unwell.
- Records demonstrated people's decisions were respected, such as if they wished to receive treatment or not. This demonstrated they were in control of their lives and received information to make their own informed decisions.
- The registered manager told us how they worked with other professionals, involved in people's care at the end of their lives. This included anticipatory medicines in preparation should they be required to be given by health professionals.

# 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 good. The rating for this key question has remained good. 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- People told us they were happy using the service and that the service was well-led. A person said, "I would not be anywhere else, [registered manager] does a great job." A relative told us, "I have nothing but praise for [registered manager] and team of staff for managing Deben View the way they do."
- Staff were empowered in sharing their views about working for the provider. For example, we saw a recent flyer which asked staff for their views. In addition, the minutes from an 'employee voice' meeting attended by staff members discussed staff wellbeing.
- The registered manager understood the requirements of their role, including informing us of notifiable incidents, as required. The care and support provided to people was kept under review to reduce risks, and people were at the centre of the service to achieve good outcomes.
- Audits were undertaken which assisted the registered manager to identify shortfalls and address them. An improvement plan was in place which identified when improvements were needed, set timescales for implementation and when they had been completed.
- The registered manager told us how they had supported staff to ensure they worked in a safe environment when working with people using the service. Records and discussions with the registered manager demonstrated they had worked with the provider and local authority to ensure they were following procedures to keep staff safe.

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

- There was a duty of candour policy and procedure in place, which was understood by the registered manager.
- Discussion with the registered manager and records viewed demonstrated the duty of candour policy was followed where required.

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

- People were asked for their views about the service in questionnaires, tenant meetings and care reviews. Their comments were valued and used to drive improvement.
- Staff attended staff meetings, where they received updates to the requirements of their role, shared good practice and discussed any changes or concerns they had about people using the service.

### Continuous learning and improving care

- Staff were provided with training which was relevant to their role. A commissioner told us the registered manager had requested local authority workshops in report writing for staff to, "Do some proactive work in care recording good practice."
- Spot checks on staff during their usual work practice were undertaken, and improvements identified were discussed with the staff member to improve their practice. During the spot checks, people were asked for their views about how they felt their care was provided.

### Working in partnership with others

- The registered manager told us they worked well with other professionals involved in people's care. This was confirmed by a commissioner, who told us the local authority had recently provided safeguarding training to the staff team, which was received well.
- A commissioner told us how the 're-wilding' project had been supported by people using the service, volunteers and local school children, which demonstrated people were part of the community they lived in.
- The registered manager told us how they worked with partner organisations to support the 'next generation' into the caring profession. Young adults undertaking national awards, designed to help them to enhance skills, had visited the service and undertook social activity with people, which achieved positive outcomes.