

Speciality Care (Rest Homes) Limited

Speciality Care (Rest Homes) Limited - 15 Sussex Road

Inspection report

15 Sussex Road
Southport
Merseyside
PR9 0SS

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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

15 Sussex Road is a semi-detached house in Southport situated close to the town centre and its amenities. It is a specialist residential college service providing personal and nursing care to one person aged 18 and over at the time of the inspection. The service can support up to three people. It is part of Arden College that provides specialist further education for young people aged 16-25 years of age with learning disabilities. Accommodation can be term time only or for fifty-two weeks a year.

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.

The building was a semi-detached house, which fitted into the residential area. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside 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 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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The service was safe. Risks to people's health and safety were assessed and mitigated. Medicines were managed in a safe way.

People were supported to take positive risks to ensure they were able to access the community and live fulfilling lives. Staff knew people's identified risks well and were able to support people during an activity and when out in the community in a safe way. Systems and processes were in place to safeguard people from the risk of abuse. Staff received safeguarding training and had access to relevant information and

guidance about how to protect people from harm.

There were enough staff deployed to ensure people received appropriate care and support. Staff worked with the person in the service and at the college. This provided the person with consistency.

Staff were familiar with the level of support people required as well as being familiar with their likes, dislikes and preferences. Staff had developed effective communication with a person, using their particular signs and symbols. This meant that the person was able to make their own decisions about their support; staff ensured they were supported to make choices on a day to day basis. This helped the person to plan their lifestyle. People had choice and control over their meals, in accordance with their wishes and preferences.

People were supported to be as independent as possible with aspects of daily living. Staff supported people to access activities and amenities in their local area. People were supported to maintain good health. Regular appointments were made with local dentists and health clinics.

Family members were kept up to date with the well-being of their relative. They were in regular contact with staff and were able to visit the service when they wanted to. They spoke positively about the service provided.

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 October 2016).

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 ●

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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 completed by one inspector.

Service and service type

15 Sussex Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. Young people with autism and learning disabilities live there whilst they attend Arden College in Southport. 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be available to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included any statutory notifications sent to us by the registered provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send to us by law. This information helps to plan our inspection.

The provider did not complete the required Provider Information Return (PIR) as the service was closed for major refurbishment at the time the PIR was received. This is information providers are required to send us with key information about the service, what it 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 a relative about their experience of the care provided. We spoke with the registered manager, the residential home manager and a senior care worker.

We reviewed a range of records. This included the person's care records and medication records. We looked at one staff file in relation to recruitment, staff supervision and training records and sampled a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with two professionals who had commissioned the service and worked with the staff.

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

- Systems and processes were in place to safeguard people from the risk of abuse
- Staff continued to receive safeguarding training and had access to relevant information and guidance about how to protect people from harm.
- Staff were confident about how to report safeguarding concerns.

Assessing risk, safety monitoring and management

- Individual risks to people were assessed; risk assessments provided detailed information around people's individual risks for staff to keep people safe.
- Risks to people were regularly reviewed and records updated to reflect any changes in identified risks.
- Staff knew people's identified risks well and were able to support people during an activity and when out in the community in a safe way.
- People were supported to take positive risks to ensure they were able to access the community and live fulfilling lives.
- Personal Emergency Evacuation Plans (PEEPs) provided guidance for staff to safely evacuate people in an emergency.
- Regular safety checks were completed on the environment and the equipment people used to ensure it remained safe.

Staffing and recruitment

- Safe recruitment processes continued to be followed.
- Staff worked with the person in the service and at the college. This provided the person with consistency.
- Regular bank support workers were used to cover additional shifts that could not be carried out by the permanent staff team.
- Staff supported people in the home and on individual activities in the community.

Using medicines safely

- Staff received training in medicines management and had their competency to give medicines regularly assessed.
- Medication was administered in conjunction with guidance and instructions; medication administration records (MARs) were appropriately completed.
- Regular checks and audits took place of the medicines system to ensure it continued to be managed in a safe way.

Preventing and controlling infection

- Staff received training around preventing and controlling the spread of infection and had access to relevant guidance and information about good infection prevention and control.
- All areas of the home were clean and well-maintained.

Learning lessons when things go wrong

- Incidents and accidents were logged, recorded and actions taken to reduce the risk of a re-occurrence.

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

- Assessments of people's care and support needs were completed in good detail and provided guidance for staff to support people based on their needs and choices.
- Staff knew people well and how to best meet their needs.
- Relatives and staff said people experienced very positive outcomes using the service.

Staff support: induction, training, skills and experience

- Staff continued to receive a good range of support including regular training. Staff told us training was appropriate and gave them the skills to meet people's needs.
- Training records showed staff training was kept up-to-date. Staff received regular supervision and appraisal to support their developmental needs.

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

- People were supported to eat and drink appropriately.
- There was a person-centred approach to mealtimes. People had choice and control over their meals, in accordance with their wishes and preferences.

Staff working with other agencies to provide consistent, effective, timely care

- The service planned a comprehensive transition from previous care providers before people moved in to Sussex Road. This involved staff from both care providers working together to support the person and share their knowledge of their support needs.
- A healthcare professional told us, "The transition to Sussex Road was well planned and [Name] and her family benefitted from this."

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

- The premises was suitably adapted to meet people's individual needs. The home had recently undergone a complete refurbishment. Bedrooms now had en-suite bathrooms. Décor throughout was modern and appropriate for the younger people who live in the home.
- People's bedrooms were furnished and decorated to suit their individual tastes.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to maintain good health. Regular appointments were made with local dentists and health clinics.

- Staff responded promptly to people's changing needs. Records showed staff had engaged well with health and social care professionals, to ensure that people's needs were met as effectively as possible.
- Relatives confirmed that their family member's physical and emotional well-being needs were being met.

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 continued to work within the principles of the MCA; DoLS applications had been completed appropriately and sent to the relevant authority.
- Staff ensured that people were involved in decisions about their 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 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 received good care and support from staff who clearly knew them well.
- Staff spoke positively and compassionately about the person they supported.

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

- Staff had worked hard in relation to developing effective communication with a person. This meant that they were able to make their own decisions about their support; staff ensured they were supported to make choices on a day to day basis. This helped the person to plan their lifestyle.
- Staff were familiar with the level of care and support people required as well as being familiar with their likes, dislikes and preferences.

Respecting and promoting people's privacy, dignity and independence

- People were supported to be as independent as possible with aspects of daily living.
- People's bedrooms had en-suite bathing facilities to promote privacy and dignity with personal care.

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

- The care people received was person centred and based on their individual needs. Staff knew people's likes, dislikes and preferences and used this knowledge to care and support people in the way they wanted, such as, how they preferred to spend their time.
- Care records were detailed and contained relevant and up-to-date information regarding people's needs. The service ensured that all relevant records were completed in a timely manner when people's needs changed so that staff had access to the most up-to-date information.
- Family members felt involved in care planning; they told us they were always kept informed of any changes or concerns. One person told us, "There is good communication between us and staff."
- People were supported to access a range of activities in the community on a regular basis. Activities were planned around people's needs and preferences. These included visits to family members.

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 service continued to meet the communication needs of people with a disability or sensory loss in line with the Accessible Information Standards.
- Staff new how to communicate effectively with the person using pictures, symbol and signs.
- Additional training was to be provided to further enhance their communication skills.

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 attended Arden college whilst living at the service.
- People took part in activities in the community. Staff supported people to maintain friendships and arranged for people to meet.
- A relative said, "[Name] has a great social life; they seem very happy."
- A healthcare professional told us, "Staff are focused on providing care within a positive risk model and [Name] is responding well to this and their engagement with activities and other people has improved."
- People were supported to keep in contact with families. Family members visited regularly.

Improving care quality in response to complaints or concerns

- The registered provider had a complaints policy and procedure which was made available to people.
- A complaint had been made and had been investigated in line with the policy.
- The home manager and staff were in regular contact with relatives. Relatives reported they had no issues with the support or the service provided.

End of life care and support

- The service was not supporting anyone with end of life care at the time of the inspection. People only lived at the service whilst they attended Arden college.

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 registered manager, home manager and staff promoted a culture of person-centred care by having a clear set of aims and values, engaging with everyone using the service and family members.
- Relatives gave very positive feedback about the staff and home manager.

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 service continued to be well led by a registered manager, home manager and team of support staff. They understood their role and what was required to ensure the service provided good care to people.

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

- The registered manager was clear about their responsibilities for reporting to the CQC and the regulatory requirements. Risks were clearly identified and escalated where necessary.
- Staff received supervision and support from the home manager to develop their practice.
- Information related to people who used the service was stored securely and treated in line with data protection laws.
- Governance was fully embedded into the running of the service. There was a strong focus on continuous improvement.
- There was a strong focus on learning from incidents and adverse events.

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

- People were involved with decisions about their care and support; this included any activities they wanted to do. Staff used photographs and other communication aids with them to support them to make and communicate the preferences to staff.
- People were encouraged to access services in the local community; activities included local shops, cafes, a local disco and leisure centre.
- Family members were in regular contact with staff to discuss the service their relative received.

Continuous learning and improving care

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify areas of improvement.
- Staff meetings and daily handover meetings were opportunities to discuss any incidents or ways to improve the support people received or increase people's independence.

Working in partnership with others

- The service continued to involve people and family members in discussions about the support provided.
- The service worked closely with other agencies to achieve good outcomes for people. This included liaising and having regular contact with the college, and consulting health care professionals.