

Jeesal Residential Care Services Limited

Middleton's Lane

Inspection report

157 Middleton's Lane
Hellesdon
Norfolk
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Middleton's Lane is a care home without nursing. It supports up to six people with a learning disability or autism. At the time of inspection there were six people using the service. Each person has their own flat within the main building comprising of private lounge, kitchen, bedroom and bathroom. There are also shared gardens and a communal lounge and kitchen. There are two offices within the building.

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

People told us they liked living at the service and they were happy. They told us staff were nice to them and supported them to make choices, access health professionals and activities.

People and relatives told us they were supported to stay in touch throughout the pandemic in person, as well as by use of telephone and video calls. People had any risks for accessing the community assessed and were supported by staff to do so.

Relatives told us staff communicated well with them. People and relatives were both happy and confident to speak with the registered manager or staff team if they had any concerns.

People were supported safely to manage their medicines and health conditions. Staff had a good understanding of people's needs and preferences.

People were safe as they were supported by staff who understood about the risks of COVID-19 and had abuse awareness. Staff understood how to report concerns to keep people safe and where to go for additional advice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of safe and well-led; the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

People told us staff treated them well and they were able to do what they wanted to do. Relatives also told us that staff always treated their family member with respect and kindness.

The model of care supported individualised care that maximised people's choice and control as they were supported in their own flats and each person had individual staff support. This meant their environment was designed to suit their own needs and tastes and they had full control of who entered and how it was used.

This also meant people were able to follow their own plan of activities with flexibility built in to make changes where they wished. There was always a staff member there for them to engage and interact and offer support.

The registered manager was able to evidence how they promoted valuing people principles and had created a culture of person-centred care and respect. This was observed in practice where staff were seen interacting in ways that promoted people's independence and dignity and empowered them to make choices and decisions for themselves.

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 29 March 2019).

Why we inspected

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 received concerns about the provider's governance systems and oversight of the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has not changed and remains good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Middleton's Lane on our website at www.cqc.org.uk

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Middleton's Lane

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.

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

This inspection was carried out by two inspectors.

Service and service type

Middleton's Lane is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and three relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, deputy manager and care workers.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 told us they felt safe and liked living at the service. One person said, "I like it here, I like the staff."
- Staff received training on how to keep people safe and understood how to report and record any concerns. One staff member told us they were asked to watch and reflect on the Winterbourne View television documentary as part of their training. This can be a useful tool to help staff understand about abuse, how a culture of abuse can develop and the impact this had on people to reduce the risks of such abuse occurring at the service.
- There were systems in place for reporting and recording safeguarding concerns. These were monitored regularly by the registered manager who ensured any follow up action took place. Staff were proactive at recording every single interaction with people so that triggers for specific behaviours could be analysed and identified. This then formed part of their care plan to ensure staff supported them correctly and safely.
- Minutes of meetings showed that people were given the opportunity to reflect on things that made them anxious or worried and to talk this through with staff to help them feel safe again.
- Servicing of all safety equipment such as gas, fire systems and electrics were all up to date to ensure they were safe to use and in good working order

Assessing risk, safety monitoring and management

- Each person had risk assessments in place to safely manage their needs, and these were regularly reviewed and updated. People were encouraged to find solutions to manage anxiety related risks, such as identifying signs and then going to their flat for space and quiet until they felt better.
- The registered manager had also undertaken risk assessments for people and staff in relation to COVID-19 and environmental risks at the service. This included seeking guidance from external foundations specially supporting people with learning disabilities who might find COVID-19 and other risk measures difficult to tolerate.
- The registered manager also completed regular audits of risks and monitored practice and records to ensure information was current, and that staff understood and implemented them. One staff member told us, "[The registered manager] is strict but fair but this means I have learnt a lot about how to do things properly."

Staffing and recruitment

- There were enough suitably trained and skilled staff on shift. Each person had individual support from their own allocated staff member who knew them well.
- The registered manager ensured that all staff recruitment checks had taken place prior to staff being employed. This included checks for any unacceptable criminal records.

- Staff told us they received a good induction and a two-week training programme prior to starting work. This gave them a good understanding of the skills and knowledge required to meet people's needs safely.

Using medicines safely

- People had accurate records and processes in place for safely managing their medicines. Some people were able to express an understanding of the need for their medicine.
- People had protocols and guidance in place to ensure staff understood how to administer their medicine safely and understand what the medicine was for. This included personalised plans about how to support people with medicines used as and when required to help manage their anxieties.
- Medicine records also contained information about how to best seek consent for each person which was tailored to their needs and likely responses. Medicine temperatures were recorded and monitored to make sure medicine did not overheat which can affect its efficiency.
- Records of all health appointments and checks were in place and all information about medicines and health issues was also available in an easy read version to aid people's understanding.

Preventing and controlling infection

- 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 using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- There was evidence in staff team meetings of the registered manager supporting staff to reflect on and learn from incidents when things went wrong. For example, a medicine error had occurred recently, and the staff had learnt that they needed to ensure people had additional staff support so that staff administering medicines could focus on the task without distraction.

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

- We observed the registered manager and staff team interacting with people in a way that was natural and relaxed. People were laughing about things that had occurred on the weekend and staff spoke to them in a way that was respectful and inclusive. People responded positively. One person told us, "I like having fun here. I do roller skating, trampolining, bowling. I do everything. My mum comes here too."
- We saw staff supporting people to open their own front door and to do as much as they could for themselves, such as cooking and counting money required for shopping. Staff encouraged people to think through what they needed for themselves and how they could achieve it, then offered the right level of support to promote independence. A person told us, "I do housework, go to the dentist and the doctors. It smells nice here. It's the cleaning. I love cleaning."
- We also saw how staff were aware of people's individual preferences and plans for the day and reacted quickly when there were signs of people becoming anxious. One person told us, "I like being on my own sometimes and being in my own flat. I have my own space. I was so unhappy where I was before, but I am happy here."
- There was detailed guidance for staff on people's individual communication needs and what specific phrases or gestures might mean. This helped staff support people by using a personalised approach, understand how to respond to people and prevent them becoming frustrated.

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 registered manager understood about the need to be open when things went wrong and share learning and outcomes with all involved.
- The provider was correctly displaying the most recent CQC inspection rating and outcome both in the service and on their website.

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

- The registered manager and staff team had a good understanding of the requirements of their roles. They understood the current best practice in care and how to ensure information was accessible. They understood about people's rights and how to promote them while keeping people safe.
- Staff received regular supervision and appraisals of their performance. Staff were happy with the way they were managed. One staff member told us, "The [registered] manager manages well. I have approached

them many times and they know me well. They listen and explain things, so if I am not clear I will ask them, and they help me."

- The registered manager understood how to use quality assurance systems to improve practices and had action plans which were clearly recorded and implemented for all areas of improvement in the service. This included maintenance, some of which had already been completed and others which were in progress.
- The registered manager told us they received enough support from senior managers. The provider had further systems in place to monitor the quality including oversight of the service by way of in person visits and reviewing records remotely via an on-line system.

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

- People told us how they were involved in making their own decisions and in choosing how to spend their time. Minutes of meetings showed how the registered manager sought people's views on the performance of the staff team, the way the service was managed and what they would like to see to improve things.
- Relatives also told us they were supported to stay in touch with people and asked for their views about the service. One relative said, "[The staff] do keep in touch and I phone [my family member] up. I met up with them a couple of weeks ago, so staff supported them to meet up with me."
- The staff team were also happy that they felt included and were fully supported by the registered manager. One staff member told us, "This is the place where I can really speak to my manager and they value my opinion and listen to me. I think they feel that support workers are equals and they try to explain things." Another staff member told us, "I don't have any complaints; [the registered manager] does her job perfectly. They treat people fairly; they are happy and nice with the people."

Continuous learning and improving care

- Staff told us the registered manager supported them to debrief and reflect when incidents had occurred so they could learn from this and know how to do things differently the next time. One staff member said, "[The registered manager] talks to me about my training and how I have understood it and if I am not sure they will explain it to me."
- Minutes of meetings showed staff were encouraged to reflect on things when they had gone wrong or on areas of concerns such as the COVID-19 pandemic and how to stay as safe as possible. The registered manager demonstrated a good understanding of the benefits of supporting staff to reflect and learn.

Working in partnership with others

- We saw how the staff team worked well with a variety of health and social care professionals to seek support for people's health and social and mental health needs. There were regular appointments for medical check-ups. People were also supported to speak with assessors who helped them make decisions that were in their best interest where they could not do this fully for themselves.
- A relative told us how they were supported to have reviews of care with social work professionals and the staff team via video calls during the COVID-19 pandemic.
- The registered manager also regularly sought advice from specialist organisations such as the Challenging Behaviour Foundation to support best practice techniques.