

Orwell Housing Association Limited

Kittens Lane

Inspection report

5 Kittens Lane
Loddon
Norwich
Norfolk
NR14 6JU

Date of inspection visit:
10 April 2019

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20 May 2019

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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:

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

Kittens Lane accommodates up to 10 people with a learning disability and complex needs in two self-contained bungalows. During our comprehensive unannounced inspection on 10 April 2019, there were 10 people living there.

This care service supported people in line with the values that underpin the Registering the Right Support and other best practice guidelines. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

People's experience of using this service:

Staff understood their responsibilities to protect people from abuse, harm and discrimination.

Staff continued to be recruited safely and received on-going support and training to be competent in their roles.

People were protected from harm by effective systems in place to monitor medicine management, staffing, infection control and the upkeep of the premises.

People's nutritional and hydration needs were met.

The service worked well with other organisations to ensure people had joined up care. Community professionals made positive comments about the service provided to people.

People's independence was encouraged, their privacy respected, and their dignity maintained.

The way staff interacted with people had a positive effect on their well-being. People using the service appeared comfortable in the presence of staff.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

People's care records were detailed and up to date. They were reviewed with the person and their relatives where possible. They reflected people's needs with their end of life wishes documented.

People had a variety of activities which they enjoyed on a regular basis and had opportunities to maintain positive links with their community.

People and relatives' views were sought, and opportunities taken to improve the service.

Formal supervision meetings were carried out with staff. They told us they were supported and clear about what was expected of them.

There was a complaints procedure in place and people's concerns were addressed.

The service had systems to continuously monitor, assess and improve the service provided.

Rating at last inspection:

We inspected Kittens Lane on 21 October 2016 and published our report on 5 December 2016. We rated the

service overall good. Safe, effective, caring and responsive were rated good and well led was rated requires improvement.

Why we inspected:

We inspected this service in line with our inspection schedule for services currently rated as good.

Follow up:

We will continue to monitor this service and plan to inspect in line with our re-inspection schedule for those services rated good.

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

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 effective?

Good ●

The service was effective

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

Kittens 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Kittens Lane is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (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. The registered manager is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

The inspection was unannounced.

What we did:

Prior to the inspection we gathered all the information we held about the service and used it to develop a plan for the inspection. We reviewed information provided to us from the Local Authority contract teams and information we received from the provider by way of notifications.

Notifications are required by law and identify incidents that had happened in the service and the actions taken in response. We used the information sent to us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

People could not always readily tell us about their experiences. We observed the way people interacted with the management team and staff.

We looked at the care records of three people who used the service, including risk assessments, care plans and records relating to medicines administration.

We spoke with the registered manager, four members of staff and a relative. We received electronic feedback from four relatives, a member of staff and four community professionals.

We reviewed information the service held about how they monitored the service they provided and assured themselves it was meeting the needs of the people they supported. This included audits, staff training and recruitment records.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People continued to be supported by staff who were trained and understood their responsibilities in keeping people safe from abuse, harm and discrimination.
- The service had raised safeguarding concerns appropriately when they were worried about people's safety. The registered manager worked with the local authority safeguarding adults' team to protect people.

Assessing risk, safety monitoring and management

- People's care records included risk assessments which guided staff about how the risks in people's lives were reduced. This included risks associated with falls, choking, moving and handling and nutrition.
- Identified environmental risks had an associated risk assessment in place which guided staff how to mitigate risks within the service. Equipment, including hoists, portable electrical appliances and fire safety equipment, had been serviced and checked so it was fit for purpose and safe to use. There was a system to reduce the risks of legionella bacteria in the water system.

Staffing and recruitment

- People continued to be supported by an established team of staff who provided kind and personalized care to people living in the home.
- There were enough staff to meet people's needs. Staff had been recruited safely and were of good character.

Using medicines safely

- Medicines continued to be stored safely and securely in the service. There were procedures in place to ensure the service did not run out of people's medicines.
- Staff were trained in medicine administration and their competencies were checked regularly to ensure they followed company policies and procedures.
- Regular audits and checks on medicines supported the registered manager to identify and address any shortfalls promptly.

Preventing and controlling infection

- Staff had received training in food hygiene and infection control and regular audits supported the management team to address any shortfalls promptly.
- Relatives were complimentary about the cleanliness of the service. One person's relative described the service as, "Very clean and spotless."

Learning lessons when things go wrong

- Accidents and incidents had been reported appropriately with action taken to make improvements.

- Regular reviews of accidents and incidents in the service were carried out by the registered manager to identify if there were any trends, or if lessons could be learned and improvement actions taken to minimise future risks.

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

Good: 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 who lived in Kittens Lane had done so for a long time. The registered manager explained how prior to people moving into the service they would carry out a comprehensive needs' assessment. This would be done in consultation with the individual, their representatives and any appropriate health and social care professionals. This assessment would be used to determine if the service could meet the person's needs and to inform their care and support plan.

Staff support: induction, training, skills and experience

- Staff continued to be provided with training and professional development opportunities to equip them with the skills and competencies needed to carry out their role.
- Staff were provided with one to one supervision meetings. These provided an opportunity to receive feedback about their practice, discuss any issues, and identify training needs.
- Staff told us that they felt supported and encouraged to undertake professional qualifications.

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

- People's dietary needs continued to be assessed and met. This included people who were at risk of choking and/or were not maintaining a healthy weight. Staff spoken with were very knowledgeable about people's dietary needs and the support required.
- People enjoyed a positive meal time experience. Staff were attentive and supported people who needed assistance.

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

- People continued to be supported to maintain good health. They had regular access to relevant healthcare professionals and records were maintained regarding who had visited and any action taken.
- Feedback from professionals involved with the service was complimentary. One health care professional told us, "I have nothing but unreserved recommendation that this service is exceptional."

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

- The environment was homely with an accessible layout that met people's needs. The premises were generally in good repair, with a choice of spaces to spend time with others or to have private time alone if desired by people.
- A community professional commented about the service, "Both Broad Horizons and Marmalade House [names of the two bungalows at Kittens Lane] are pleasant environments."

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- We saw that staff consistently asked for people's consent before providing any care or support. For example, a staff member asked for a person's consent to support them with their medicines and at lunch time another staff member checked with people if they wanted to wear protective clothing.
- Staff had received training in the MCA and DoLS and understood their responsibilities in these areas.
- People's care records included their capacity to make decisions and any support required if they lacked capacity. Records included decisions made with the appropriate professionals in their best interests. DoLS referrals had been raised to ensure any restrictions on people's liberty were lawful.

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

Good: 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

- Two people smiled and nodded their heads when asked if the staff were kind and caring towards them. Another person went to hold the hand of a member of staff and said, "Friends."
- Relatives were complimentary about the staff approach. One relative told us, "The staff are really superb. A lot of them have been at Kittens Lane for many years and you would not get a better bunch of carers who are loyal to both residents and management."
- Staff addressed people in an affectionate tone and displayed warmth towards people when they engaged with them. Staff knew people well and could adapt their communication and approach to meet the needs of each person.
- Positive and caring relationships between people and staff were seen throughout the inspection. People were comfortable in the company of staff.

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

- People and, where appropriate, their representatives were asked for their views on their care arrangements and decisions were reflected in the care records. One relative told us, "I am involved in what is going on. I have attended meetings to discuss the care and support in place." Another relative commented, "We feel that the service is safe, [family member] receives outstanding care, and we are delighted with how he is cared for – in every aspect."
- Staff understood it was a person's human right to be treated with respect and dignity and to be able to express their views. We observed staff putting this into practice during the inspection. Staff were polite, courteous and engaged with people. People were treated respectfully and were involved in every decision possible.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful in terms of informing people who we were and asking if they wanted to speak with us. They explained who we were and what we were doing, and this ensured people were comfortable in our company.
- Staff were discreet when asking people if they wished to use the toilet or, with their permission, adjusting their clothing to maintain their dignity.
- We observed staff involving people with everyday tasks where possible. One person was encouraged to take their dishes to the sink when they had finished their meal. Another person helped a member of staff to tidy up the kitchen area.
- People's records provided guidance to staff on the areas of care that they could attend to independently and how this should be promoted.

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Conversations with staff demonstrated they knew people well on a personal level. This was confirmed in feedback from relatives and community professionals regularly involved with the service. One relative said their family member was, "Well catered for with excellent 'key workers' who are always willing to discuss any issues we have and to go the extra mile to meet her needs."
- Feedback from community professionals involved with the service was complimentary. One professional stated, "I have only had positive experiences working with this provider, who is keen to support their residents with mobility and enabling them to live/maintain as fuller life as possible. The residents seem happy and access various community-based activities with staff adjusting their approach to suit individual needs."
- People's care plans were personalised and included information for staff on how best to support them with personal care, eating and drinking, medicines and other day to day activities. They also included detailed information about their health needs and the care people required to manage their long-term health conditions.
- The support people required from staff to engage and interact with them to reduce the risk of social isolation was set out in their care records.
- People had opportunities to maintain interests which were important to them to lead meaningful lives and to access the local community and day centres. Some people were attending a day service on the day of our inspection visit, whilst one person with the support of staff took the opportunity to enjoy the warm weather and go for a walk.

Improving care quality in response to complaints or concerns

- Records showed complaints and had been managed in line with the provider's procedure. One person's relative said, "If I have any problems or concerns, I would contact [family member's] key worker or if she's not available then the deputy manager."
- A copy of the provider's complaints procedure was on display and included information about how to make a complaint and what people could expect if they raised a concern.

End of life care and support

- People's end of life wishes were recorded, which assured us their choices would be respected at the end stage of life and following their death.
- No one at the time of the inspection was receiving end of life care. The registered manager explained how the service would work with other healthcare professionals such as, district nurses to ensure people had a comfortable and pain free death. Plans were in place to provide staff with end of life training.

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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- We found that improvements had been made to the systems and procedures used to monitor and improve the quality of the service provided. This included a programme of audits undertaken by the registered manager to assess the quality of the service and identify issues. These included regular management reports which covered areas such as staff training, supervisions, care plan reviews, staffing levels, incidents and complaints. These were reviewed by the registered manager and provider. Where shortfalls were identified, records demonstrated that these were acted upon, and action plans were in place.
- The registered manager understood their legal requirements. Notifications and referrals were made where appropriate. Services are required to make notifications to the Commission when certain incidents occur.
- There was a commitment to learning and development. The registered manager shared with us that when people using the service had specific needs, additional training was sourced to support staff. Records confirmed that end of life training, positive behaviour support and bowel care was planned.
- The registered manager understood the importance of keeping up to date with changes in the care industry.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- Relatives were complimentary with the quality of care provided. One relative said, "All the staff keep [family member] safe and well looked after." Another person's relative commented, "The care provided is superb and [family member] is very happy living there."
- We received mixed feedback from relatives about communication systems. One relative described being well informed and updated about arrangements in place, whilst another relative shared examples of not being aware when a key worker had changed, and arrangements not always being followed through. The registered manager advised us of measures being embedded to improve communication. This included a revised survey for relative's feedback, family meetings, providing families with their email/telephone details, formalising systems for how comments and concerns are documented and used to improve the service.
- Staff spoke positively of improvements in the culture and running of the service under the present management arrangements. Formal supervision and team meetings took place regularly and staff told us they felt able to speak to the management team if they needed guidance and support.
- The registered manager was proactive and acted when errors or improvements were identified and learnt from these events.
- Duty of candour requirements were met. This regulation requires safety incidents are managed

transparently, apologies are provided and that 'relevant persons' are informed of all the facts in the matter.

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

- Planned assessments checked that the service was able to meet people's needs. Ongoing reviews included people who used the service and their relatives where appropriate to identify how they wanted their care delivered.
- The registered manager and staff team were aware of people's individual needs and fully considered their equality characteristics to ensure they were involved in the service.
- Staff attended regular team meetings which gave them the opportunity to discuss any issues of concern and ideas for improvement with their colleagues and management team.
- Staff described feeling valued and listened to by the registered manager and that this contributed to good morale and team working.

Working in partnership with others

- The registered manager had developed positive relationships with health and social care professionals. Records and conversations with professionals demonstrated the registered manager had taken on board advice from external organisations and put this into practice. A community professional told us, "The staff are always very caring of these long-term residents. Annual reviews are arranged with the staff and GPs are contacted appropriately as necessary with follow up in place if requested."