

Housing 21

Housing 21 – Bransdale View

Inspection report

Bransdale View
Ashwood Close
Helmsley
North Yorkshire
YO62 5FE

Date of inspection visit:
17 February 2020

Date of publication:
26 March 2020

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Housing 21 – Bransdale View provides care and support to people living in specialist 'extra-care' housing. People using the service lived in 64 self-contained apartments across a shared site. There were nine people living at Housing 21 – Bransdale View who received personal care at the time of the inspection.

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.

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

Staff were well-trained and experienced to protect people from the risk of abuse and avoidable harm. They administered medicines on time and as prescribed and followed good infection control practices.

People's needs were thoroughly assessed to ensure they received the right care and support and those who required support to eat and drink received the help they needed. Systems were in place to refer people to other healthcare professionals when necessary.

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 and their relatives were positive about the caring nature of staff and staff spoke fondly about the people they cared for. They knew how to provide feedback about their experiences of care and the manager responded to any concerns raised.

There was a strong governance framework in place to support the delivery of high-quality, person-centred care and support. There was good managerial oversight of the service; there was a registered manager in post, supported by a regional manager and assistant care managers.

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

Rating at last inspection

This service was registered with us on 06/03/2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the service registered with us.

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 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.

Housing 21 – Bransdale 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 Care Act 2014.

Inspection team

The inspection was carried out by one 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 bought or 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.

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 we needed to be sure that the provider or registered manager would be in the office to support the inspection and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 17 February 2020 and ended on 17 February 2020. We visited the office location on 17 February 2020.

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 two people who used the service and two relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, housing and care manager, assistant care manager and five care workers. The housing and care manager was responsible for the day to day running of the service.

We reviewed a range of records. This included two people's care 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 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People kept were safe from the risk of abuse and ill-treatment.
- Staff had received training in this area and had a good understanding of the different types of abuse. They knew how to report any concerns and were confident managers would take appropriate action.
- The manager took a proactive approach to safeguarding and dealt with concerns in an open, transparent and objective way.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff took measures to reduce the risk of avoidable harm.
- Risk assessments were person-centred, proportionate, and regularly reviewed.
- There was an open culture of learning from incidents, accidents and other adverse events.
- Staff were aware of on-call arrangements should they need assistance outside of office hours.

Staffing and recruitment

- There were enough, competent staff on duty to meet people's needs and keep people safe.
- Appropriate recruitment checks were carried out to ensure only suitable people were employed at the service.

Using medicines safely

- People received their medicines on time and as prescribed.
- The manager regularly reviewed practice and took appropriate action in response to any errors that had occurred.

Preventing and controlling infection

- Staff understood their responsibilities for maintaining high standards of cleanliness and hygiene to prevent the spread of healthcare-associated infections.
- Staff recognised the importance of food safety, when preparing or handling food and followed required standards and practice.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- People received care and support based on a thorough assessment of their needs.
- Staff consulted with people and their relatives throughout the assessment process to ensure people received the right care. One relative described their experience of moving their relation to Bransdale View. They told us, "[Staff] have been absolutely fantastic."

Staff support: induction, training, skills and experience

- People benefitted from the care of well-trained and well-supported staff.
- Staff received a thorough induction in preparation for the role and ongoing training.
- Staff were provided with regular supervision and opportunities for professional development. We spoke with one member of staff who had received support to pursue their interest to deliver training.

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

- People who required support to eat and drink as part of their care package, received the help they needed to maintain a balanced diet.

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

- Staff teams worked together to maintain continuity of care and support. One relative described the support their family member received as "absolutely seamless."
- There were clear systems and processes in place to ensure appropriate and timely referrals to other relevant professionals occurred.

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. Move the next line up or down.

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.

- Staff had a thorough understanding of MCA and DoLS and were confident about using the Act.
- Where people lacked the capacity to make specific decisions about their care, decisions made were always made in accordance with legislation and people's wishes.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- Staff always treated people with kindness and respect.
- We received positive feedback from everyone we spoke with about the caring nature of staff. Comments included, "[The staff] are so friendly and have made us feel so welcome" and "[Staff] are very kind."
- Staff spoke fondly about the people they supported and were-passionate about providing good care. Can you add appoint about E&D please.

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

- Staff had the time they need to provide care and support in a compassionate and person-centred way. One member of staff told us, "We are good listeners."
- Staff did not rush people to complete tasks or make decisions. One relative told us, "[Staff] have endless patience."

Respecting and promoting people's privacy, dignity and independence

- People were always treated with dignity and respect.
- Staff supported people to be as independent as possible and only provided support when it was required.
- Staff anticipated people's needs and recognised distress and discomfort. They tailored their response to provide the right support for the person.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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 received personalised care and support, specifically tailored to meet their needs and preferences. For example, one person told us they liked to get up very early in the morning and received support at a time which suited them.
- Staff continually assessed people's needs to ensure care and support remained appropriate. One member of staff told us, "We are assessing all the time...and we are passing that information on."

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 provider complied with the Accessible Information Standard by identifying, recording, flagging, sharing and meeting the information and communication needs of people with a disability or sensory loss.

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

- Staff encouraged social contact and companionship to protect people from the risk of social isolation and loneliness.
- Staff facilitated a number of different activities on-site and encouraged people to attend these. Recent events had included Christmas dinner, religious services, a dementia workshop, sporting events and other celebrations.

Improving care quality in response to complaints or concerns

- People knew how to give feedback about their experiences of care and support, including how to raise any concerns or issues.
- The manager took complaints seriously and responded quickly to any concerns raised. They made improvements where possible.

End of life care and support

- Staff supported people to make decisions about their wishes for end of life care. They were aware of their responsibilities to respect people's religious beliefs and preferences.

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.

This is the first inspection for this newly registered service. This key question has been rated 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;

- There was a warm, welcoming culture within the service.
- Managers and staff shared in the providers aim to deliver high-quality, person-centred care and support. One relative told us, "We are very happy with the service."

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

- There was a strong governance framework in place, with clear lines of accountability and processes to drive quality.
- The service benefitted from a manager who understood the importance and responsibility of their role, and who was well-supported by the provider.
- Staff were clear about their roles and responsibilities. They supported each other to make sure people experienced good healthcare outcomes and a good quality of life.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The manager routinely met with people and their relatives to ensure people received the right care.
- People and their relatives received regular updates from the provider. One relative told us, "We know exactly what is going on."
- There were good links with local community resources. Staff had invited other agencies to provide activities which reflected the needs and preferences of people who use the service.