

# City of Bradford Metropolitan District Council

## Wagtail Close

### Inspection report

23 Wagtail, 15-21 Wagtail Close  
Westwood Park  
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18 April 2019  
23 April 2019  
25 April 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: Wagtail Close comprises a number of service types. This includes a four bedded respite care unit where people receive residential care on a short-term basis.

In addition, the service provides care and support to people living in four specialist 'extra care' housing schemes located across Bradford. 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. Of the four Extra Care Housing Schemes, three were predominantly for elderly people and the fourth provided care and support to predominantly younger disabled adults.

The service also provided support to a number of people living in more individual properties close to one of the Extra Care Housing Schemes.

Not everyone using the Extra Care Housing Schemes receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

At the time of the inspection the service was providing care and support to 113 people.

People's experience of using this service:

People told us they were happy with the care and support they received. They said that regular staff knew them well and were good at their roles. Some people did say that the effectiveness of care and support was sometimes compromised by the use of agency staff who did not know their needs as well, but that this was not usually a regular occurrence, although the prevalence of this varied dependant on which scheme people lived at.

People were kept safe from abuse. Risks to people's health and safety were assessed and clear plans put in place for staff to follow. People received their medicines on time and when they needed them.

Staff received a range of training and support to undertake their roles. We found staff to be knowledgeable about the people and topics we asked them about.

People's care needs were assessed and the service worked with a range of professionals to meet individual needs. People were supported to eat and drink enough.

Staff treated people with kindness and compassion. We saw examples of people's independence being promoted by staff. People reported good outcomes whilst using the service.

Since the last inspection a number of improvements had been made. There was good management oversight of the service and the management team undertook a range of checks to ensure the service performed to an acceptable standard.

People's feedback was sought on a regular basis. This included at resident meetings, care reviews and although regular questionnaires. The management team were receptive to people's comments and complaints and acted on them.

Rating at last inspection: The last inspection report was published in April 2018 with a rating of Requires Improvement.

Why we inspected: This was a routine inspection to check whether the service had made improvements since the last inspection.

Follow up: ongoing monitoring;

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

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 ●

# Wagtail Close

## 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 two inspectors and an assistant inspector.

#### Service and service type:

The service comprises a three bedded respite unit for people with residential care needs, four extra care housing schemes and a number of people living in more separate properties close to one of the schemes. 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:

The inspection was announced. We gave the provider a few days' notice about the inspection site visit. This was because we wanted to make arrangements with the provider to speak to people who use the service. On the 18 April 2019, we visited people, spoke with staff and reviewed care and management records at two extra care housing schemes. On 25 April 2019 we visited the provider's offices to review management records. We also visited the third Extra Care Housing Scheme to speak with people, staff and review care and medicine related records. Between 23 April and 29 April 2019 we made phone calls to people and staff who lived and worked at a fourth Extra Care Housing Scheme.

#### What we did:

We reviewed information we had received about the service since the last inspection in February 2018.

We asked for feedback from the local authority and commissioning teams.

We spoke with the registered manager, three locality managers, two team leaders, 14 care workers and a housing provider manager.

We spoke with 15 people who used the service and three relatives.

We reviewed parts of seven people's care records and other records and audits relating to the management of the service.

# 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 in February 2018 we found appropriate monitoring arrangements were not in place to reduce the risk of financial abuse. This was a breach of Regulation 17, Good governance. At this inspection we found the service had improved, was no longer in breach of regulation and met the characteristics for 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 told us they felt safe living in the Extra Care Housing Schemes and being cared for by staff. One person commented, "I feel safe. I can call most of the staff and they'll be with me more or less straightaway."
- Staff had received safeguarding training and knew how to recognise and protect people from the risk of abuse. Staff told us they were confident people were safe and had not witnessed anything of concern whilst working in the service.
- Any allegations of abuse had been correctly reported and investigated by the service to help keep people safe.
- Where the service looked after people's money, financial records were kept of transactions, helping to mitigate the risk of financial abuse.

Assessing risk, safety monitoring and management

- People told us staff assisted them safely and appropriately. Staff knew people well and their individual needs and requirements which helped ensure they were kept safe.
- Risks to people's health and safety were assessed and risk assessment documents were available for staff to assist them in providing safe care. Most of these were sufficiently detailed and contained clear information to help keep people safe.
- The service undertook checks on people's living environments to help ensure they were cared for in a safe environment. Checks were also undertaken on equipment such as hoists to ensure they remained in a safe condition.
- The environment of the respite unit was safe with regular checks and maintenance undertaken.

Staffing and recruitment

- Overall we found there were sufficient staff deployed to ensure safe care and support. Both in the respite unit and Extra Care Housing Schemes we saw staff were available to assist people when they needed it.
- Most people in the Extra Care Housing Schemes told us staff came at agreed times unless staff had to attend to an emergency service call. One person commented, "Staff do what I need them to do." People said they were not rushed and staff stayed with them as long as they needed.
- We reviewed call times and rota's and found them to be consistent and appropriate.
- Safe recruitment procedures were in place to ensure only staff suitable to work in the caring profession were employed. However, the registered manager needed to ensure any reasons for gaps in staff previously

employment were consistently explored and documented.

#### Using medicines safely

- Medicines were managed safely and people were receiving their medicines when they needed them.
- Clear records were kept of the medicine support provided to each person.
- Medicines were given by staff who had received appropriate training. Their competency to give medicines was assessed every six months to ensure they continued to give medicine safely.
- Regular weekly and monthly audits and checks took place of the medicine management system to help ensure it remained safe.

#### Preventing and controlling infection

- We saw staff had access to personal protective equipment (PPE) and used it appropriately.
- The respite unit was kept in a clean and hygienic state

#### Learning lessons when things go wrong

- Accidents and incidents were logged, investigated and where appropriate learnt from. Analysis took place to identify any themes or trends.

# 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 in February 2018 we found training was not consistently kept up to date and information relating to consent and capacity needed better embedding into care plans. At this inspection we found overall improvements had been made and the service now met the characteristics for 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 said they received good care and support and had experienced positive outcomes whilst using the service.
- People's needs were assessed prior to using the service. People told us they were involved in this process and were offered choices as to how their care was delivered.
- The service networked with other providers and attended training events run by local health professionals to help ensure it worked to best practice guidance.

Staff support: induction, training, skills and experience

- People generally said staff had the right skills and knowledge to care for them. Some people expressed concerns about the use of agency staff and felt these staff did not know their needs as well as regular staff. However we saw the use of agency staff was kept as low as possible and regular agency staff were used wherever possible.
- People were supported by staff who received ongoing training. We reviewed training records which showed it was mostly kept up to date. Staff were knowledgeable about the people and topics we asked them about.
- Staff received regular supervision and appraisal to review their individual work and development needs. Observations and competencies were carried out to ensure staff continued to meet the required standards.

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

- Where required, people said they received appropriate support at mealtimes.
- Each Extra Care Scheme had a restaurant. Staff supported people to either prepare food in their flats or supported them to the restaurants as per their choices and preferences.
- People using the respite unit were offered a choice of food at the on-site restaurant. Staff supported people to eat either in the restaurant or brought the food back to the unit as per their preference. One person brought in their own food and staff helped them prepare this, showing a flexible and person-centred approach.
- People's nutritional needs were assessed, and clear plans put in place for staff to follow.

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

- Staff worked with a number of agencies and healthcare professionals to provide effective care and support. This included other care providers, district nurses and occupational therapists.
- Advice from healthcare professionals was recorded and used to develop appropriate plans of care.

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

- The service was adapted to meet people's individual needs. The respite unit had individualised flats which helped promote a person-centred service with people able to relax privately or in communal space. There was sufficient space for people and their equipment.
- People throughout the service had access to call buzzers which alerted staff should they need extra care and support outside of their pre-arranged call times.

#### 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. We checked whether the service was working within the principles of the MCA.
- The service was working within the principles of the MCA. At the time of our inspection, no Deprivation of Liberty Safeguards (DoLS) applications or applications to the Court of Protection had been made.
  
- Staff were trained and understood the requirements of the Mental Capacity Act in general. The registered manager understood their legal responsibilities under the Act.
- People consented to their care and support and were fully involved in their care on a daily basis.

# Is the service caring?

## Our findings

At the last inspection in February 2018 feedback about staff was mixed with some people saying they did not always care for people appropriately. At this inspection we found improvements had been made.

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

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 spoke positively about the staff who supported them. One person commented, "I feel happy living here...staff speak with respect." Another person said "Girls are 100% brilliant, always friendly and nice." A third person said "staff are all pleasant and sociable. This is really important to me."
- We observed staff interacting with people at the Extra Care Housing Schemes and in the respite unit. People looked comfortable and relaxed in the presence of staff. Staff treated people with kindness and compassion.
- People were treated fairly and equally and any diverse needs identified as part of care planning.
- Information on people's past lives was recorded to assist staff better understand people and promote person centred care. We saw, and people told us, staff knew them well, including their likes and dislikes.

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

- People said they felt able to express their views and were listened to by staff. One person commented, "I'm able to make my own decisions as much as possible here."
- Staff supported people to make decisions about their care. Staff were able to give positive examples of how they did this on a daily basis, for example showing people a number of items of clothing to help them make an informed choice.
- People were encouraged to express their views through meetings and taking part in care reviews.

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with dignity and respect.
- People were encouraged to maintain their independence as much as possible and maintain links with the local community. For example, staff supported people to go shopping either independently or with a staff member. One person said "Gives me the independence I need, but fulfils the needs I have."
- People would benefit from having clear support goals which were evaluated on a regular basis. We spoke with the registered manager who told us they would look to introduce this.
- People's privacy was respected. For example, we saw communication regarding the registered manager wishing to speak with a person and going to their flat. However, they could hear they had a visitor so returned later, rather than disturb them at that time.

# Is the service responsive?

## Our findings

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

At the last inspection in February 2018 we found care planning was not sufficiently robust and care plans did not reflect people's needs or evidence their involvement. This was a breach of regulation 17. At this inspection we found improvements had been made.

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

- People said that they received high quality care and support. One person described the care as 'fantastic' and another as 'superb.'
- People's care needs were assessed and a range of care plans put in place to assist staff. These were largely appropriate and person-centred containing people's likes, dislikes and what was important to the person. Staff knew people's care needs well.
- Any changes to people's care and support was documented and information communicated to staff through regular team meetings, handovers and the service communication book.
- The service was flexible and responsive to individual needs. For example care visits had been changed to accommodate people who wished to go to bed earlier/later. We saw people received calls at the times they needed them.
- People's religious and spiritual needs were taken into account. One person said they occasionally attended night-time religious services and staff were accommodating to fit visit times around these.

Improving care quality in response to complaints or concerns

- People told us they knew how to complain. Complaints and concerns were taken seriously, investigated and action taken as a result. Where concerns had been raised, these had been resolved to the person's satisfaction.
- A number of compliments had been received by the service. These included, 'One thing I value highly is being treated with dignity...that was what I always got from your staff', 'Your kindness has been excellent and gone beyond expectations' and 'My mind has been at rest knowing (relative) has been in such capable hands.'

End of life care and support

- At the time of the inspection nobody was receiving end of life care.
- Limited information was recorded about people's end of life wishes. The registered manager told us this was an area they would be working to further develop.

## 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 in February 2018, we found governance systems were not sufficiently robust in ensuring a high performing service. At this inspection improvements had been made.

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

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

- People praised the care experience they received. They said they received personalised care and support and experienced good outcomes.
- There was a registered manager in post who provided leadership and support. They were also supported by locality managers at each of the service sites.
- Staff praised the service and said they would recommend it to others. They said they felt able to make suggestions and were involved in how the service operated. For example staff were consulted about rota's and asked to suggest any changes which would support improved care delivery.
- People, and staff told us they felt supported and able to approach managers with any concerns. One staff member commented, "Management are very supportive, easy to talk to, they will always make time. If we've concerns about anything, I can approach them." A person said "[Locality Manager] is always available should you need anything, if not she gets straight back to you."
- The registered manager had sent statutory notifications to the Commission as required.

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

- Staff and management were clear as to their roles and responsibilities and said the service was well organised. There was a clear management structure in place which included locality managers at each Extra Care Housing Scheme to oversee care and support.
- We saw systems and processes were well embedded throughout the service with the required checks and audits being undertaken in a consistent way. These were effective in identifying areas for improvement and acting on them.
- The service had worked hard to improve its performance following the last inspection and had been effective in achieving this. Resources had been focused on areas and locations where improvement was needed to go effect.

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

- Since the last inspection the service had asked people for feedback on an increased basis to try and address any negative experiences people had. We saw this had been effective in driving improvement in

people's sentiment.

- We reviewed surveys which showed that overall people were happy with their care and support, this matched our own findings.
- Regular staff and service user meetings were held. Actions were taken from these where required.

Working in partnership with others

- The service worked with the housing providers of the Extra Care Housing Schemes to help ensure people's needs were met. This included attending joint meetings.
- The service worked with and shared information with other care provider's where joint care and support was provided.