

Housing & Care 21

Housing & Care 21 - Rokeby Gardens

Inspection report

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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

Housing and Care 21- Rokeby Gardens is an extra care service that contains 52 self-contained flats. The service is registered with the Care Quality Commission (CQC) to provide personal care to people living in these flats. At the time of the inspection there were 18 people using the service who required support with their personal care needs. People who required this care had a range of support needs, including older people living with dementia and people with disabilities.

We previously inspected the service in August 2016 and found breaches of the regulations in relation to quality assurance and the lack of person-centred care planning. The overall rating for the service was, "requires improvement." We asked the provider to tell us how and when they would make the required improvements. These actions have now been completed.

There was a manager in place who was in the process of being registered with CQC. Registered managers have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service continued to provide safe care to people living in their own homes. Staff understood their responsibilities for safeguarding people from harm and followed the provider's policies to provide people's prescribed medicines safely. There were enough suitably skilled staff to meet people's needs. Staff had been recruited using safe recruitment practices.

The manager promoted a caring culture that was reflected in the comments made by people and the attitude of staff. Staff felt valued and well supported. The manager had good oversight of the service. Staff received training to ensure they had the skills and knowledge to meet people's needs and had access to development opportunities.

Staff had regular supervision and they had been trained to meet people's individual needs. They understood their roles and responsibilities to seek people's consent prior to care and support being provided. The requirements of the Mental Capacity Act 2005 (MCA) had been met.

People were supported by caring, friendly and respectful staff. They were supported to make choices about how they lived their lives. Where required, people had been supported to have enough to eat and drink to

maintain their health and wellbeing. They were also supported to access other health services. People's needs had been assessed and they had care plans that took account of their individual needs, preferences, and choices. People and their relatives had been involved in planning and reviewing people's care plans.

The provider had an effective system to handle complaints and concerns. They encouraged feedback from people who used the service, their relatives, other professionals and staff. They also acted on the comments received to continually improve the quality of the service.

There were effective quality assurance systems in place to help ensure any areas for improvement were identified and action taken to continuously improve the quality of the service provided. People told us they were regularly asked for their views about the quality of the service they received.

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 remains Good.

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service was Responsive.

People received person centred support and staff were responsive to their needs.

People's care plans were regularly reviewed and updated.

People were involved in their care planning and felt in control of the care and support they received.

People knew how to make suggestions and complaints about the care they received.

Is the service well-led?

Good ●

The service was well led.

There was a clear management structure in place which people using the service and staff understood. Staff knew their roles and accountabilities within the structure.

There was an open and positive culture in the service and people were asked for their views about the service.

There was an effective quality monitoring system to check that the care provided met people's needs.

Housing & Care 21 - Rokeby Gardens

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 19 September 2017 and was unannounced. The inspection was carried out by one adult social care inspector.

Before the inspection, we reviewed the information we held about the service including statutory notifications sent to us by the manager about incidents and events that occurred at the service. Statutory notifications include information about important events which the provider is required to send us by law. In addition we reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan the inspection.

During the inspection we spoke with four people who lived and received care at Rokeby Gardens. We also spoke with the manager, three members of care staff and a senior care worker.

We reviewed six people's care records including their medicines administration records. We looked at four staff files including recruitment, training, supervision and duty rotas. We read other records relating to the management of the service that included incident reports, safeguarding concerns, complaints and audits to monitor quality of the service.



Our findings

At the last inspection in August 2016 this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

People told us they felt safe and comfortable with the care workers who supported them and able to discuss any concerns with them. For example, people could choose if they preferred a male or female worker and this was respected. One person said, "They [care workers] make sure I am safe, they are very thoughtful." Another person told us, "Yes, I feel safe here and with every single member of staff."

People were protected against the risks of potential abuse. There were policies and procedures in place to help keep people safe from abuse. Staff spoke knowledgeably about their responsibilities to keep people safe and protect them from harm. They were aware of the signs to look out for that might mean a person was at risk. Staff had completed safeguarding adults awareness training, which was refreshed at regular intervals.

Risks associated with people's care needs had been assessed and informed plans of care to ensure their safety. These included risk assessments for maintenance of skin integrity, choking, falls, nutrition and moving and handling. A system was in place to ensure any incidents and accidents would be reported, recorded and investigated in a way which ensured any actions or learning was completed and shared with staff.

Sufficient numbers of staff were employed to meet the needs of people using the service. Care workers told us their visits were organised and they had adequate time to carry out the required tasks and care needs for people. Records in people's care plans showed that staff stayed with each person for the allocated amount of time. One person said, "Staff are always on time."

People were protected from the risk of receiving care from unsuitable staff. Applicants for jobs had completed application forms and been interviewed for roles within the service. New staff would not be offered positions unless they had proof of identity and written references. All new staff had been checked against the Disclosure and Barring Service (DBS) records. The DBS helps employers make safer recruitment decisions and prevents unsuitable people from working with vulnerable groups, by disclosing information about any previous convictions a person may have.

People who required support with their medicines received support from care workers who had received

training in this area. Each care worker had their competency to administer medicines assessed and could only support people with medicines when they had been deemed competent. There were regular spot checks and observations to make sure their practice remained safe. Care plans gave details of the level of support people needed with their medicines. This ranged from reminders/prompts to full administration. Where staff administered medicines they recorded when they had carried out this task.

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

People felt staff were well trained and had the right knowledge and skills to support them effectively. One person told us, "They [staff] are here every day, never late and always giving me what I need." Another person said, "Staff all seem to be well trained, they always record what they have done in my file."

The service continued to provide care workers with training and support to meet people's needs effectively. Records showed that training provided to staff included safeguarding, infection control, health and safety and medicines. Before they started working in the service care workers were provided with an induction which provided them with the training they needed to meet people's needs and shadowed more experienced care workers. Staff training courses were recorded in a database that showed the due date for completion and the date it was completed.

Systems were in place to provide supervision and support. Staff received regular supervision sessions which allowed them to put forward suggestions for specific training courses or additional support where they may need further guidance. Staff meetings were conducted throughout the year. Staff meeting minutes were clear and detailed and made available for all staff to view. This ensured staff who had not been able to attend the meeting were kept informed of all actions agreed.

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. We checked whether the service was working within the principles of the MCA.

People's care records identified their capacity to make decisions and included signed documents to show that they consented to the care provided in the service. Care workers had been trained in the MCA. People told us that they felt that the care workers asked for their consent before they provided any care or support. One person said, "They [care workers] always ask for my consent and check before they leave if I require anything further."

The staff at Rokeby Gardens supported some people with meal preparation. One person said "They're very

good with meals. They always check what I fancy and they do the washing up."

People were supported to maintain good health and had access to health professionals where required. People's records included information about treatment received from health professionals, such as district nurses and any recommendations made to improve their health were incorporated into care plans.



Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

People told us the staff who worked for the service were kind and caring. One person said, "I get on really well with all the staff, they are all very good". Another person told us, "I enjoy them coming, they are good at their job and are great company." Other comments included, "Nothing is too much trouble for them," and "They do everything for me and more."

Staff spoke knowledgeably about people and told us how they preferred their care and support to be given, which showed they knew them well. People told us staff supported them well and care and support was offered in a friendly and caring way.

Care workers understood the importance of preserving people's dignity, independence, privacy and choices. Care workers were also provided with guidance on how people's rights were respected in their care plans. One person told us, "They never take over, they always check if I can do it myself before asking if I want help and how I'd like it done." A staff member said, "We do a lot of personal care so preserving dignity is vital."

People and those important to them were involved in making decisions about their care and support. They were involved in the admission and assessment, providing information about people's day to day lifestyles and backgrounds. People and their relatives were involved in annual reviews of the care and support provided.

The service had a variety of systems to make sure people were able to say how they felt about the service they received. People's views were sought through regular visits from a manager, care reviews and annual surveys. All the people we visited told us they felt they were always listened to.



Our findings

At our last inspection in August 2017 we found this domain to be 'Requires Improvement'. At this inspection we rated the domain as 'Good', an improved care planning system had been introduced and record keeping had improved. People were supported to receive personalised care that was responsive to their individual needs.

People's individual needs were being met by the service because staff continually reviewed the level of support people required. Each person had personalised care plans that took into account their needs, choices, views and preferences. We saw that staff worked closely with people, people's relatives or friends and other professionals to ensure that the care provided to people was appropriate and continued to meet their needs.

Records of regular consultations with people showed that they were happy with how staff supported them. People told us that staff were responsive to their needs and always supported them quickly when they called for assistance. One person said, "If anything were to happen the staff would be here like a flash. Another person told us, "I haven't used my alarm much, but staff have arrived quickly when I needed to."

The staff we spoke with had an in depth knowledge of people's care and support needs and how these had changed over time. Staff told us they were provided with sufficient information about people's needs and were updated when anything had changed.

Daily care records, kept in the folders in people's homes, were completed by staff at the end of each care visit. These recorded details of the care provided, food and drinks the person had consumed as well as information about any observed changes to the persons care needs. The records also included details of any advice provided by professionals and information about any observed changes to people's care and support needs.

We saw that the service had a formal complaints policy and procedure. The complaints procedure clearly outlined what a person should expect if they made a complaint. There were guidelines as to how long it should take the service to respond to and resolve a complaint. People said they would not hesitate in speaking with staff if they had any concerns. People knew how to make a formal complaint if they needed to. People told us they were able to tell the service if they did not want a particular care worker. Management respected these requests and arranged permanent replacements without the person feeling uncomfortable about making the request.

People told us that they had access to activities. One person said, "The staff often comment on the progress I am making with my jigsaw. They also tell me about other things that are going on in the building like group activities."

Our findings

At our last inspection in August 2017 we found this domain to be 'Requires Improvement'. At this inspection we rated the domain as 'Good'. We found audits and quality checks were robust.

The service had a manager in place who had worked at the service for a number of years. They were in the process of registering with the Care Quality Commission. The people and the staff we spoke with said the service was well managed. People said that they had frequent contact with the office and the manager and that staff were approachable and committed to providing a good service for them. One person said, "The door is always open to the manager's office, I often stop and chat."

A staff member told us, "There is an open and transparent culture here." Staff also said the service provided was person centred and met the needs of the people they supported. If they had a concern they felt they would be listened to and responded to appropriately. Staff told us that they enjoyed working at Rokeby Gardens. They said it was professional and well managed.

The manager was in control of the service day-to-day and had good oversight of the service. There was a clear staff and management structure which people and staff understood. People knew who to speak to if they needed to escalate any concerns. Staff knew their roles and responsibilities within the structure and what was expected of them by people using the service and the manager.

Staff meetings took place and other forms of communication, such as, supervision and spot checks enabled close contact between staff and management. Such contact provided a forum for staff to share information and review events with the management. We looked at the minutes of staff meetings and saw that the areas discussed included care delivery, staff training and developments within the service.

The registered provider had effective systems in place to assess and monitor the quality of the service. The manager and the senior care staff completed regular audits and took appropriate action to rectify any shortfalls in a timely way.

We requested a variety of records relating to the people using the service, staff and management of the service. People's care records, including their medical records were comprehensive, fully completed and up to date. People's confidentiality was protected because the records were securely stored and only accessible by staff. The staff files and records relating to the management of the service were well organised and promptly located.

The provider had sent us written notifications telling us about important events that had occurred in the service when required. They are legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale. This meant that CQC were able to review the notifications and decide whether any action was needed on their part.