

Consensus Support Services Limited

The Heathers

Inspection report

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

The Heathers is a residential care home providing personal care to up to 12 people. The service provides support to older people and people who have a learning disability. At the time of our inspection there were 8 people using the service.

People's experience of the service and what we found

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. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Right Support

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 received care and support to maintain an environment suited their needs and preferences.

Staff supported people to make decisions following best practice in decision-making. Staff supported people to access health and social care services. Staff supported people with their medicines safely and in their preferred way.

Right Care

Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it. The service employed skilled staff to meet people's needs and keep them safe.

People's care plans reflected their needs and wishes and promoted their wellbeing. Risks that people may face were appropriately managed.

Right Culture

The ethos, values, attitudes and behaviours of the registered manager and staff team ensured people lead confident, inclusive and empowered lives

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 09 November 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

The Heathers

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of one inspector.

Service and service type

The Heathers is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Heathers is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The Inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with two people who used the service. We also spoke with three staff members, the registered manager, and the area manager. We reviewed multiple records including care plans, risk assessments and staff files.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- People were supported to receive their medicines safely.
- Some records we looked at required some extra detail, to ensure they fully reflected the medicines administration process. The registered manager told us they would be adding the extra detail, including body maps where appropriate, immediately following the inspection.
- Medicines were stored securely within people's own rooms, and staff received training to ensure they could support people safely in this area.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- People told us they were safe. One person said, "Yes I feel safe here, no worries."
- Staff were trained in safeguarding adults, and knew the signs of abuse. One staff member said, "If I was worried I would immediately speak with the manager, or adult safeguarding team. I have never had to though, people are well cared for here."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Appropriate risk assessments were in place to ensure staff understood how to support people. This included assessments on the environment, people's eating and drinking, and how to support people who may express distressed behaviours.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- Safe recruitment procedures were in place. All staff employed had previous employment references, ID checks, and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Any incidents or accidents that occurred were recorded and investigated by management. People's care plans and risk assessments were reviewed, and measures put in place to reduce the risk of recurrence.

Is consent to care and treatment always sought in line with legislation 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 MCA 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 Safeguarding (DoLS)

The provider was working in line with the Mental Capacity Act.

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 our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

- At the previous inspection, audits had not always identified issues within the service including failures to review care plans and risk assessments. Improvements had been implemented and checks and audits in place were effective.
- The provider had created a learning culture at the service which improved the care people received.
- We saw that where improvements were required, this was discovered and acted upon promptly. The registered manager was open to our feedback, and responded promptly with any improvements required.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People and staff felt the service was open, and well run. People were able to approach managers, and appeared comfortable to do so. There was a good rapport between management staff and the people using the service.
 - Staff spoke positively about people, what they could achieve, and how they could promote independence.

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 provider understood their responsibilities under the duty of candour.
- The registered manager maintained records of accidents and incidents, and responded to complaints appropriately. Information and learning was shared with staff to reduce the likelihood of recurrence.
- The registered manager understood information sharing requirements. We saw that information was correctly shared with other agencies, for example, when the service had identified concerns, and the registered manager sent us notifications about events which they were required to do by law.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Staff felt well supported. One staff member said, "The registered manager and the area manager are excellent. Both very hands on." Another staff member said, "I can't fault the support from the managers. I had a difficult time recently personally, and the support I got was great."

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

People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.

- People told us they felt engaged with, and that staff knew them well. One person said, "I get on well with the staff, they are respectful. They ask me what I want."
- Formal feedback was sought from people and their relatives in the form of questionnaires. We saw that feedback was positive on the care received.
- Staff felt engaged with and told us that communication was good. One staff member said, "We have team meetings and all the team are happy to express themselves. The team morale is good."

Working in partnership with others

- The provider worked in partnership with others.
- The service had worked in partnership with various outside agencies and health and social care professionals.