

Manchester City Council

Short Breaks - 7 Edlington Walk

Inspection report

7 Edlington Walk
Newton Heath
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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

Short Breaks - 7 Edlington Walk, (Edlington Walk), is a residential care home that provides respite care for up to five people who have a learning disability and/or autism. There was one person using the service at the time of our inspection.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People were safe and protected from abuse. Risks to people's safety were well managed to protect them without limiting their choices about their lives. There were enough staff to support people. People received their medicines as they needed. The home was clean and people were protected from infection.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The staff were trained and skilled to support people. People were provided with meals and drinks they enjoyed. The registered manager assessed the support people required and people received good care that met their needs. People were supported to access healthcare services as they needed to maintain good health.

The service worked within the principles of the Mental Capacity Act 2005 and people's rights were protected. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The staff treated people in a kind and caring way. People were supported to gain independence and skills of daily living. The staff asked people for their views about the care they received. People were provided with care that met their religious, cultural, physical and emotional needs.

People were included in planning their care and support. People followed activities they enjoyed including

activities they attended when in their own homes. They were supported to keep in contact with their friends and families while staying for respite. The provider had a procedure for responding to complaints about the service.

The registered manager encouraged people who used the service and their families to be included in developing the service. The registered manager was very experienced and aware of her responsibilities. She and the staff were committed to providing people with high-quality, person-centred care.

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 (report published 4 November 2016).

Why we inspected: This was a planned inspection based on the previous rating.

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.

Short Breaks - 7 Edlington Walk

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

Short Breaks - 7 Edlington Walk is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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. 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

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

Before we inspected we reviewed the information we held about the home, including notifications of significant incidents the registered manager had sent to us.

We asked the registered manager to complete a Provider Information Return (PIR). This is a form that asks for key information about the service, what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

The focus of our inspection was to gather the experiences of people who used the service by speaking with them and observing how the staff interacted with them. During our inspection we spoke with one person who was staying at the home for respite care, two people who had previously used the service, two staff members, the registered manager and a social care professional from another service some people also used.

We looked at three people's care records, records showing how the registered manager sought people's views and included them in decisions about the home, staff training records, audits and other records related to the management of the service.

After the inspection

Following our inspection visit we spoke by telephone to one staff member and to the local authority commissioning team to gather their views 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 this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. One person told us, "I feel safe with the staff here." Staff were trained and knowledgeable about how to identify and report abuse.
- A staff member said, "I have no concerns, I am fully confident people are safe here." The staff were committed to protecting people from harm.

Assessing risk, safety monitoring and management

- People were safe because risks had been identified and managed. The registered manager had completed risk assessments to guide staff on how to provide people's care safely. Staff used the risk assessments positively to protect people without restricting their choices about their lives.

Staffing and recruitment

- There were enough staff to support people and to ensure their safety. One person who used the service lived in the local area. During our inspection they visited the home to talk to the staff. We saw the staff were able to stop the tasks they were carrying out to give the person their attention because there were enough staff on duty.
- The provider carried out checks on new staff to ensure they were suitable to work in the home.

Using medicines safely

- People received the support they needed to take their medicines safely. Medicines were stored securely to prevent their misuse. Staff had received training in handling medicines safely.

Preventing and controlling infection

- People were protected from the risk of infection. The home was clean and there were no unpleasant odours. Staff were trained in infection control and handling food safely.

Learning lessons when things go wrong

- The registered manager had systems to learn from incidents to improve the service. Lessons learnt were shared with the staff team to help protect people from harm.

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 this key question was rated as good. At this inspection this key question has remained 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 told us they received good care that met their needs. The registered manager carried out thorough assessments of people's needs to ensure they received the care and support they required. The staff reviewed people's needs assessments before each planned stay for respite care. This ensured people's care was planned to meet any changes in their needs since their last stay at the home.
- Where people had complex needs appropriate specialist services had been included in assessing and planning their care.

Staff support: induction, training, skills and experience

- People received good quality care because the staff were trained and skilled to meet their needs. The staff told us they completed a range of training. This included training specific to meet individuals' needs.
- The staff told us they felt well supported by the registered manager and senior staff. They told us there was "always" a senior person they could contact if they needed guidance or support.

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

- People were provided with meals and drinks they enjoyed and supported to make healthy eating choices. People told us they liked the meals provided. The registered manager identified if people had any food requirements related to their religion or culture and the service catered for these.
- People chose the meals and drinks they received. The staff gave people guidance and advice to help them to make healthy choices about their meals and drinks.

Staff working with other agencies to provide consistent, effective, timely care

- The registered manager worked with other agencies to ensure people received coordinated care that met their needs. She shared information with other services to ensure people received appropriate support if their needs changed.

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

- The home provided people with comfortable accommodation that was suitable to meet their needs. The service was small in size and homely. People had their own bedrooms and there were enough shared spaces to meet people's needs. The registered manager encouraged people to bring their personal items into the home and to personalise their rooms as they wanted.

Supporting people to live healthier lives, access healthcare services and support

- The staff gave people the support they needed to maintain good health. The registered manager gathered

information about the healthcare services people used and this was recorded in their care records. If people required the support of healthcare services while staying at the home the staff arranged for this.

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 when this is in their best interests and legally authorised under the MCA.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's rights were respected. They were asked for consent to their care and the decisions they made were respected. The registered manager and staff were aware of the MCA and how to protect people's rights. They gave people information and support to make decisions about their care.
- Where people needed restrictions on their liberty, to ensure their safety, the registered manager had applied to the local authority for appropriate authorisation under DoLS.

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.

At the last inspection this key question was rated as good. At this inspection this key question remained 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

- The staff provided people with good care that met their needs and respected their diversity. The registered manager gathered information about people's religious, cultural, physical and emotional needs. The staff provided support to take account of people's needs, religion, culture and choices.

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

- People told us the staff asked for their views about the support they received. The staff knew how people communicated and gave people information to make choices in a way they could understand. The staff respected the choices people made about their support and lives.

Respecting and promoting people's privacy, dignity and independence

- The staff protected people's privacy and dignity and supported them to gain greater independence. The staff spoke to people with respect. They called people by their preferred name and knocked on doors to private areas before entering.
- The staff encouraged people to carry out tasks themselves and to gain independence and daily living skills.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained 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 care that met their needs. They had been included in planning and agreeing to the support they received. People had been asked what was important to them, so their care could be planned and provided to take account of their wishes and preferences.

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 registered manager had identified how people communicated and the staff supported people to express their views and wishes. Information was provided in formats to meet people's communication needs. The staff gave people individualised support to help them to understand information and to make choices about their care.

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

- The staff supported people to follow activities they enjoyed. People were able to continue to follow activities they attended when they were in their own homes such as day services or visiting local facilities. One person told us it was important to them to attend the same activities at the service as they did when they were at home.
- The staff knew the relationships that were important to people. They supported people to keep in touch with their families and friends while they stayed at the service. People were supported to maintain relationships that were important to them.

Improving care quality in response to complaints or concerns

- The provider had a procedure for receiving and responding to complaints about the service. The registered manager had shared the complaints procedure with people who used the service and their families and carers. People told us they would be happy to speak to a member of the staff team if they had any concerns about the service they received.

End of life care and support

- At the time of our inspection there was no one in the service who required support at the end of their life. The registered manager had links with appropriate services that could support people if they required end

of life care. People had been asked if they wanted to share their wishes for care at the end of their life.

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 this key question was rated as good. At this inspection this key question remained 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

- People received good quality care and were placed at the centre of the service. They told us this was a good service and said they liked visiting the home for respite care. People knew the registered manager and were confident speaking to her.

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 registered manager was aware of her responsibilities regarding the duty of candour. She had notified us of significant incidents which had occurred in the home, as required. The notifications received showed the registered manager had been open and honest when incidents happened and had met her obligations under the duty of candour.

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

- The provider had arrangements in place to ensure the service was well managed. The registered manager was very experienced and understood her responsibilities. The registered manager was also responsible for managing another two of the provider's services. She was supported by care coordinators to ensure effective oversight of the services. The staff told us there was always a senior person available to provide advice and support if they required.
- The staff told us the registered manager was committed to providing a good quality service to people. They said the registered manager set high standards for the service and had shared these with the staff.

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

- The registered manager asked people who used the service, their families and carers and the care staff for their views about the service. We saw people were asked how they wanted the service to be developed. The registered manager used a range of methods to seek people's views, taking account of people's preferred ways of communicating.
- The service provided respite care. People usually stayed for short, planned stays and the people using the service changed regularly. The registered manager took account of individuals' needs and preferences to adapt the service, where possible, to meet the preferences of different people.

Continuous learning and improving care; Working in partnership with others

- The registered manager had systems to learn from incidents to further improve the service provided to people. Where appropriate learning was shared with other services that supported people to ensure they continued to receive care that met their needs.
- The staff worked with other services people attended to ensure they received care as they required.