

Real Life Options

Real Life Options - Darlington Road

Inspection report

54 Darlington Road
Hartburn
Stockton On Tees
Cleveland
TS18 5EW

Date of inspection visit:
10 February 2023
14 February 2023

Date of publication:
27 February 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Real Life Options – Darlington Road is a residential care home providing care and support for up to 7 people with learning and physical disabilities and mental health conditions. There were 7 people living at the home at the time of the inspection.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support: People received the right support with their medicines. 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.

Right Care: Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe.

Right Culture: People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. Staff turnover was low, which supported people to receive consistent care from staff who knew them well.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 7 February 2022).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced inspection of this service on 7 February 2022. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance processes.

We undertook this focused inspection to check they had followed their action plan and to confirm they now

met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Real Life Options – Darlington Road 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.

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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

An inspector and a pharmacist specialist carried out this inspection.

Service and service type

Real Life Options – Darlington Road 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. Real Life Options – Darlington Road 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

This inspection was unannounced.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people and 3 relatives about their experience of the care provided. We reviewed a range of records. This included 4 people's care records and 7 medicine administration records, with accompanying documentation. We spoke with 6 members of staff, including the registered manager and support staff.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had failed to manage medicines safely. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Medicines were administered safely. People's preferences were clearly recorded and followed.
- Written information was in place to support staff in the administration of 'as and when required' medicines. There was no excessive use of as required medicines at the home.
- Medicines reviews had been documented in care records and care plans were reviewed frequently.
- Medicines training and competency assessments for staff had taken place regularly.
- The home had a structured audit programme of weekly and monthly audits. In addition, 3 monthly audits were completed by a member of staff from a sister home to provide a critical friend.

Preventing and controlling infection

At our last inspection the provider had failed to ensure effective infection and control systems were in place. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The home was clean and tidy, with regular cleaning taking place. Redecoration had recently taken place to allow more effective cleaning to take place.
- Staff received training in infection prevention and control and applied these principles when supporting people. This included through the appropriate use of personal protective equipment.
- The provider was supporting safe visiting to the home. One relative told us, "You can visit whenever you want."

Assessing risk, safety monitoring and management

At our last inspection we recommended the provider seek advice from a reputable source to ensure fire

drills were completed in line with current best practice. The provider had made improvements.

- Regular fire drills were taking place, including day and night staff. Plans were in place to support people in emergency situations.
- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. A relative we spoke with said, "I absolutely think she is safe there".
- Staff managed the safety of the living environment and equipment in it well through checks and action to minimise risk. Required test and safety certificates were in place.

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 when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were kept safe from avoidable harm. Staff knew people well and understood how to protect them from abuse. The service worked well with other agencies to do so. A relative told us, "I never have any worries about [named person] there."
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and visits how and when they wanted. During the inspection we saw people were able to spend time doing the things they wanted.
- The numbers and skills of staff matched the needs of people using the service. One relative said, "I always describe them (staff) as her family now. The staff know her so well."
- Staff recruitment and induction training processes promoted safety. The provider obtained references and checked employment histories before staff were employed.

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.

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

At our last inspection the provider failed to have good governance processes in place. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. Where issues were identified action was taken to address them.
- Staff delivered good quality support consistently with support of the registered manager. One member of staff said, "We get all the support we could want."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. One relative told us, "[Named person] is quite happy there, they work so hard to give him an amazing life."
- Management were visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say. A relative we spoke with said, "They are good at keeping in touch with anything at all."
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

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

- The provider sought feedback from people and those important to them and used the feedback to develop the service. During the inspection we saw staff taking time to communicate with people on their choices for the day. A relative told us, "[Named person] knows the staff just from their voices, they all engage with him."

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The service worked well in partnership with other health and social care organisations, which helped to give people using the service a voice and improve their wellbeing.