

HICA

Isaac Robinson Court - Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

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.

About the service

Isaac Robinson Court is a residential care home providing personal care to up to a maximum of 40 people with a learning disability and/or autism. There were 31 people living at the service at the time of the inspection. The service had 3 bungalows for people who lived there permanently, and 1 bungalow for people who required respite care. In addition, there were 2 flats for people who were more independent.

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

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. The service gave people care and support in a safe, clean, well-equipped, well-furnished environment that met their sensory and physical needs. Staff communicated with people in a way that met their needs and people were supported to take their medicines to achieve the best possible health outcome.

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. People's care, treatment and support plans reflected their range of needs, and this promoted their well being and enjoyment of life.

Right Culture:

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of management and staff. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. People and those important to them, including advocates were involved in planning their 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 (published 30 September 2019)

Why we inspected

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions 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 Isaac Robinson Court 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.

As part of this inspection, we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by 2 inspectors and an Expert by Experience. An Expert by Experience also spoke to relatives the following day. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Isaac Robinson Court 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. Isaac Robinson Court 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

We gave a short period of notice for the inspection because some of the people using it could not consent to a visit in their home from an inspector. This meant that we had to arrange for a 'best interests' decision about this.

What we did before the inspection

We reviewed the information we had received about the service. We sought feedback from the local authority and professionals who work with the service. 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. We used all this information to plan our inspection.

During the inspection

We spoke with 10 people who used the service and 6 relatives to ask about their experience of care provided. We also spoke with the operations and compliance manager, the registered manager, the deputy manager, the director of operations, the activities co-ordinator, 4 care staff and 1 professional visiting the service. We looked at 4 care files along with a range of medication administration records (MARs). We looked at other records relating to the management of the service including recruitment, supervisions, and systems for monitoring quality.

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. The rating for 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 kept safe from avoidable harm because staff knew them well and understood how to protect them. People told us they were happy and felt safe in the service.
- Staff had training to recognise and report abuse and they knew how to apply it.
- People and those who matter to them had a safeguarding information in a form they could use, and they knew how and when to raise a safeguarding concern.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were assessed appropriately.
- People, including those unable to make decisions for themselves, had as much freedom, choice, and control over their lives as possible because staff managed risks to minimise restrictions. One person said, "I am very happy here, I can do what I want and they [carers] always help me."
- Staff managed the safety of the living environment and equipment in it well, through checks and action to reduce risk.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment; Learning lessons when things go wrong

- There were enough staff to ensure people received safe care. We observed staff providing support and engaging with people in a meaningful and positive way. People told us there were plenty of staff around to support them.
- The provider had appropriate recruitment procedures in place for the recruitment of staff.

- The registered manager had a process in place to review all accidents and incidents, they were responded to appropriately and lessons were learnt to drive improvements.

Using medicines safely

- People received their medication as required.
- Staff ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over medication of people with a learning disability and/or autism).
- Staff were trained and supported in their role to administer medicines. Records showed staff had their competencies reviewed. Staff told us they received annual updates.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was supporting people living at the service to minimise the spread of infection.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

People were supported to have visits from family and friends and appropriate precautions were followed to prevent the spread of infection.

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 good. The rating for this key question has 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

- 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.
- Staff felt respected, supported, and valued by senior staff which supported a positive and improvement driven culture. A relative said, "It is a homely environment, peaceful and calm."
- Management and staff put people's needs and wishes at the heart of everything they did. Comments from people included "It is a nice atmosphere, and they [carers] take you out to the disco in the minibus on a night," and "There is nothing more I could want, they [carers] take you out, I like to go to the seaside."

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

- The provider had an effective system in place which monitored the quality and safety of the service through a robust audit system. This information is used to improve the service.
- The registered manager had the skills, knowledge, and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed.
- The staff had a clear understanding of their roles and how this contributed to the good level of care people received.
- The registered manager had a clear vision for the direction of the service which demonstrated ambitions and a desire for people to achieve the best outcomes possible. Relatives told us the service was managed well.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager engaged and involved people and their relatives in the service. A relative said, "The registered manager is excellent, she will always get back to you, we have every faith in her."
- Staff had regular team meetings and felt supported and listened to. They told us it was a great place to work and felt valued as a team member.
- The service regularly worked in partnership with other health care professionals to ensure people received on-going support to meet their needs. A health professional visiting the service said, "Staff are very proactive and will ring me if there is a problem, they [carers] are excellent, people are safe and well cared for."

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 service apologised to people, and those important to them, when things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.