

Heathcotes Care Limited

Heathcotes (The Ark)

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

Heathcotes (The Ark) is a residential care home that provides accommodation and personal care to a maximum of seven younger adults with a learning disability, some of whom may also have needs associated with autism. Seven people were living in the home at the time of the inspection.

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

People were happy with the care they received, they felt safe and well looked after. The provider safeguarded people from abuse. Staff recognised and reported concerns. Relevant risk assessments were completed. Accidents and incidents were monitored to identify and address trends and reduce risk. There were enough staff on duty who were provided with the appropriate training and support to enable them to carry out their roles effectively.

People received care and support that was developed to meet their individual needs as reflected in their care plans.

People were supported to have their medicines safely.

People's communication preferences were supported, and they made their own decisions. People spent their time doing the things they enjoyed, which maximised their time spent in the local community.

People felt consulted about their wishes and they knew how to make a complaint if they wished to.

People had access to health care and support from other health and social care professionals, which ensured good health outcomes.

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.

A system was in place which was used to monitor the quality and safety of the service. The registered manager carried out regular checks and analysis of incidents to ensure learning from events was shared with staff and actioned appropriately.

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.

The service was able to demonstrate how they were meeting the underpinning principles of Right support,

right care, right culture.

The model of care and setting maximised people's choice, control and independence. People's dignity, privacy and human rights were promoted. The ethos, values, attitudes and behaviours of care staff ensured people using the service led confident and inclusive lives.

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

Rating at last inspection

This service was registered with us on 9 August 2019 and this was their first inspection.

Why we inspected

This was a planned inspection based on when the service was registered.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Heathcotes (The Ark)

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.

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 one inspector.

Service and service type

Heathcotes (The Ark) is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 CQC. 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 unannounced.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. We used this information to plan our inspection.

During the inspection-

We spoke with two people who used the service about their experience of the care provided. We spoke with four members of staff including, care staff and the registered manager. We also spoke with two health professionals.

We reviewed a range of records. This included two people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. We looked at a variety of records relating to the management of the service.

After the inspection

Following our visit we spoke by telephone with the relatives of two people who used the service about their experience of the care provided. We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us, "Staff make me feel safe."
- The provider had policies and procedures in place to safeguard people from abuse.
- Referrals were sent to the local authority safeguarding team when required and outcomes followed up.
- Staff were trained to safeguard adults from abuse. They understood their responsibility to identify and report safeguarding concerns to the local authority, police or CQC if needed.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff recorded all incidents. The registered manager monitored and analysed accidents, incidents and safeguarding concerns to aid learning and reduce the risk of them happening again. De-brief sessions for people and staff were completed to help make sure any lessons were learned.
- The service was well maintained. Regular checks of the environment were undertaken to make sure it was safe. For example, checking the fire panel, fire exits, security and water temperatures to minimise risks to people. There was an ongoing programme of servicing, repairs and maintenance.
- Learning was shared through discussions and handovers between staff and at staff meetings.

Staffing and recruitment

- Staff had been safely recruited.
- Pre-employment checks were completed to make sure staff were suitable before they started working with people.
- Staffing levels were safe and the option to increase staffing in specific circumstances was considered, for example if specific increased support was required.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed if they were no longer required.
- Staff received medicine management training and competency checks were carried out regularly.
- Medicines management was audited regularly with systems in place for investigating any potential medicine errors.
- Where people were prescribed pain relieving medicines, on an 'as required' basis, clear guidance was in place to ensure staff had information about when these medicines should be given.
- Where people were unable to communicate, staff used comprehensive information to assess and identify if they suspected a person was in pain.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using personal protective equipment effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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.

This is the first inspection for this newly registered service. This key question has been rated 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's needs, preferences and wishes were effectively assessed and care and support regularly reviewed.
- Staff followed best practice guidance, which led to good outcomes for people and supported a good quality of life.

Staff support: induction, training, skills and experience

- People received their care and support from staff who were suitably trained to carry out their roles and responsibilities.
- Staff told us they were satisfied with the training they received. One member of staff explained, "There is so much training available." Another said, "During your induction and probation you are well supported which allows you to get to know the residents well."

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

- Arrangements were in place to support people to receive a healthy and balanced diet, and ensure they received the individual support and encouragement they required to meet their nutritional and hydration needs.
- People enjoyed their meals and snacks. Comments included, "I love the food" and "Staff are good cooks."
- People were supported to maintain their skills and independence with their meals. For example, people were encouraged to plan, shop and prepare their own meals.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Information was shared with other agencies if people needed to access other services such as hospitals or specialist healthcare services.
- Care files contained information about each person's health needs and the support they required to remain as independent as possible.
- People benefited from staff monitoring their wellbeing and health.

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

- The premises were adapted to meet people's needs.
- The layout of the service enabled people to move around the service freely. People had access to communal rooms where they could socialise.

- The service involved people with decision making. For example, easy read surveys supported people to make suggestions about menu choices and activities.
- People's bedrooms were personalised with their own belongings and family photographs.

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.

- MCA and associated DoLS were in place for people, authorisations were correctly obtained, and any conditions complied with.
- Staff ensured people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- People and their relatives confirmed they were treated in a kind, respectful and supportive way. Comments included, "The staff are very kind and pleasant" and "The staff are amazing".
- People shared positive interactions with staff. They were supported in a polite and patient manner.
- Staff told us that although there had been busy and emotionally difficult times due to COVID-19, they always enjoyed their contact and close connections with people living at the service. One staff member said, "Seeing our residents achieve is so rewarding."

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

- People were supported to participate in the planning and reviewing of their care and support, if they were able to and wished to.
- People were encouraged to express their views. They chose how they spent their day and where they went. We observed staff involving people, asking their views and offering choices.
- Staff were kind and compassionate with people and had positive relationships with them. A staff member reassured one person who was anxious and spent time sitting with them comforting them.

Respecting and promoting people's privacy, dignity and independence

- The provider demonstrated a clear commitment to supporting people in a dignified and respectful manner. For example, staff addressed people by their first name or more formally if this was their preference. They respected people's privacy and knocked on people's doors before entering their bedrooms.
- People were supported by staff to maintain important relationships with their relatives and friends, which was particularly important to the people we spoke with as part of this inspection.
- Staff supported people to maintain contact with their loved ones through telephone calls and through video calling.
- People's independence was promoted. They were encouraged to participate in daily activities in the community and to undertake activities of daily living with support from staff when needed. For example, people were encouraged to make drinks and meals.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- Staff knew people well and used this knowledge to provide personalised care. They gave detailed histories of each person, including likes, dislikes and the best way to approach and support the person.
- Support plans were in place for people. They contained personalised information about people's need, and the things they could do themselves.
- People were involved in developing and reviewing their care plans. Goals and aspirations were identified and people's progress towards these were monitored and supported.

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.

- People's communication needs had been assessed and recorded in their care plan.
- Information was produced in different formats to promote wider accessibility. This included various easy read versions of documents.

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

- People were offered opportunities to engage in social activities. This promoted community engagement for people.
- People were encouraged to pursue activities that interested them. For example, one person had a keen interest in rugby, so staff organised going to matches.

Improving care quality in response to complaints or concerns

- Systems were in place to support people and their representatives to voice any complaints or concerns.
- The registered manager responded to complaints promptly and maintained an overview of complaints received.
- Relatives knew how to make a complaint and told us the provider was approachable.

End of life care and support

- The service was not supporting anyone with end of life care at the time of the inspection.
- People were offered the opportunity to express their future wishes in end of life care plans. Some people

had chosen not to which had been respected.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

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

- Joint communal meetings with people using the service continued to take place. Topics discussed ranged from menu planning to raising concerns. This promoted inclusion within the service.
- Staff described the objectives of the service and understood the changes that had been made and what this meant in their day to day work. They embraced change that was occurring.
- The values of the service promoted personalised support, dignity, privacy and anti-discriminatory practice.
- The service was welcoming, and the atmosphere was warm and supportive. People were treated with respect and in a professional manner. A professional told us, "The home is very responsive and quickly adapt to any recommendations."

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 committed to providing good quality care to people.
- Staff told us they felt listened to and that the registered manager was approachable. A staff member said, "There is an open door approach and [registered manager's name] is always there to speak to."
- The registered manager was clear of their role and responsibilities to be open, honest and apologise if things went wrong.
- The registered manager used local safeguarding procedures appropriately. CQC and the local authority safeguarding team had been notified appropriately of all incidents.

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

- The registered manager, and staff were clear about their roles and responsibilities and the lines of reporting within the home and provider organisation.
- Regular checks and audits were used to monitor the quality and safety of the service. Following these audits, action had been taken. Following these audits, action had been taken to rectify any deficiencies noted.

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

- The registered manager worked closely with relatives and staff to make sure people received consistent support. One relative told us "We are well informed and consulted."

- People were consulted and involved in day to day decisions about the running of the home through regular meetings. For example, people developed their own menu's and activity choices.
- Staff were consulted and involved in decision making and were encouraged to contribute ideas and raise issues at regular staff meetings.

Continuous learning and improving care; Working in partnership with others

- The registered manager was supported by the provider to continuously develop their own knowledge and skills.
- The registered manager analysed accident and incident reports to identify trends, make changes and improvements to prevent recurrence.
- People benefitted from partnership working with other local health professionals. For example, GPs, community nurses and a range of therapists.