

The ExtraCare Charitable Trust

ExtraCare Charitable Trust Verona Court

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

About the service

Verona Court provides personal care for people aged 55 and over. People receive care and support in their own individual flats in a purpose built complex. There are communal facilities including a dining room and activity room. At the time of our inspection, there were 31 people receiving personal care and support.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

People were protected from the risk of harm and abuse as staff knew how to identify and report safeguarding concerns. People's risks were assessed and managed in a safe way by a staff group who knew people well. Staff promoted the prevention and control of infection by wearing correct equipment and adhering to policy and procedures. Medicines were managed safely.

People's needs were assessed and planned for in line with legislation and good practice guidelines. People received support to maintain a balanced diet and had access to healthcare professionals and services as required.

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.

Staff were kind and caring and treated people in a way that promoted their independence, privacy and dignity.

Care and support was personalised to meet the needs, wishes and preferences of people. People were supported to take part in activities that were tailored to people's interests. People knew how to make a complaint if necessary.

There was a registered manager in post who was committed to meeting the service values through improving and sustaining good practice. The registered manager worked well with other agencies and professionals to provide quality care and support for people.

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 6 July 2016).

Why we inspected

This was a planned inspection based on the previous rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for ExtraCare Charitable Trust Verona Court on our website at www.cqc.org.uk.

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?	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.	



ExtraCare Charitable Trust Verona Court

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

ExtraCare Charitable Trust Verona Court is a service which provides domiciliary care services. This is provided in sheltered flat tenancies situated in a single building facility. The facility offers aspects of communal living.

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care [and support] service.

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

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started

and ended on 19 July 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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. This information helps support our inspections. We reviewed other information we held about the service. We used this information to plan our inspection.

During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke with the registered manager, a team leader and a care support worker. We reviewed a range of records. This included four people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.



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 the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us that they felt safe living at Verona Court. One person said, "I do feel safe here, very much so."
- Staff were able to demonstrate to us that they understood their responsibilities in relation to identifying and reporting safeguarding concerns.

Assessing risk, safety monitoring and management

- There were systems in place to identify and mitigate people's risks.
- Staff knew people well and could describe the actions they took to prevent the risk of avoidable harm occurring.
- Risk assessments were detailed and gave staff guidance to help keep people safe.

Staffing and recruitment

- There were sufficient numbers of staff to provide care and support for people.
- People received their care and support in a timely way in line with their assessed needs.
- The provider had a safe recruitment process in place. Staff were subject to Disclosure and Barring Service (DBS) checks. A DBS check helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicine in a safe and timely way.
- Protocols were in place for people who required medicine on an 'as needed' basis.
- Where people had specific health conditions, such as diabetes, information was provided for staff to support people to manage their health conditions in the most appropriate and safe way.

Preventing and controlling infection

- Staff knew how to help prevent the risk of the spread of infection by wearing Personal Protective Equipment (PPE). One staff member told us, "I always wear gloves and aprons when supporting people."
- We observed staff adhering to infection control practices during our inspection.

Learning lessons when things go wrong

- The registered manager kept records of incidents and accidents and analysed themes and trends.
- Action plans were in place to address identified issues and to avoid the likelihood of reoccurrence.



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 the same.

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 had their needs assessed before receiving care and support from staff at Verona Court. This ensured staff could provide support to meet people's needs.
- People's needs were continually assessed and reviewed. The registered manager said, "The professionals within the service will come together in a focus group to look at meeting the wider needs of the resident." We saw evidence of where this had happened in practice.
- Staff told us that they used the information contained within care plans to help them provide the most appropriate form of care for people.

Staff support: induction, training, skills and experience

- Staff received training to enable them to support people in the most effective way. A staff member said, "We have lots of training, both eLearning and face-to-face training."
- The registered manager kept a training record to ensure staff were up-to-date with training.
- Staff received supervision and personal development reviews throughout the year to discuss their own development, skills and practice.

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

- People were supported to maintain a balanced diet and had their dietary requirements met. One person told us, "The food is good. I go down to the dining room at lunchtime and we have a cooked meal. I always get a choice of what I want to eat."
- People were given two options at mealtimes and we observed people being offered alternatives to the menu.
- •A takeaway night had been recently introduced to encourage people to experience a variety of different foods encompassing different cultures.
- Advice was sought from relevant healthcare professionals where necessary to meet the needs of people who had specific dietary and nutritional needs.

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

• Staff worked well with each other and other agencies and organisations to provide effective care and support for people. For example, the provider employed a mental health worker to provide additional support for people where needed with the aim of keeping people independent for longer.

- People had access to a range of professionals as required such as psychologists and social workers. Advice and action plans were acted upon to improve outcomes for people.
- Staff shared information through structured handovers in order to provide consistent care. One staff member said, "We are a really good staff team and we work well together."

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty. We checked whether the service was working within the principles of the MCA.

- People told us that they were supported to make day-to-day decisions and were supported in accordance with their wishes.
- Where people needed increased support, mental capacity assessments were completed, and decisions were made in people's best interests following the principles of the MCA.



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 has remained the same.

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 told us they felt cared for by a kind and caring team of staff. Comments we received from people and their relatives included, "The staff are all so helpful and kind", "We only have to ask for something and the staff will help us" and "[Relative's name] is so happy at Verona Court because the staff are so accommodating".
- The provider took into consideration the needs of people with protected characteristics under the Equality act 2010, such as race and religion.
- The provider was a diversity champion member of a of lesbian, gay, bisexual and transgender charity. The registered manager told us, "We are going to do a 'Verona' pride to focus on diversity in general and as part of ExtraCare's commitment to improving diversity."

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

- People told us that they were involved in the planning of their care. One person said, "All my information is kept in my file. All my details are in there and if I ever need any additional support, it will get put in my care plan." A relative said, "[Relative's name] is always kept involved with any changes and I always get a phone call; I am always kept up-to-date."
- Resident meetings were held monthly as a mechanism to obtain feedback from people about the care and support they received. Feedback was displayed on a notice board in a 'You Said, We Did' style to evidence the changes that had been made as a result of the meetings.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted the importance of respecting people's dignity and privacy. One person said, "The staff always ask me if they can help me and will always let me have the privacy I need."

 A staff member told us, "I always ask people if I can support them; just as I would expect the same to be asked of me. I shut curtains and always knock on doors before entering."
- We observed people maintaining their own independence and accessing the community as they required. People were helped to be as independent as possible. For example, one person had been supported to become a volunteer at Verona Court.



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 has remained the same.

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 individualised support to meet their preferences and choices. Care plans detailed people's life histories, likes and dislikes and support people received was delivered in line with what was identified as being important to them.
- Care plans were reviewed, and people and their relatives told us that they were involved in this process.
- The provider and the registered manager had worked in partnership with CRUSE Bereavement and Care who are a leading charity for bereaved people. Staff received specific training to enable them to deliver tailored care for people. A loss and bereavement group was facilitated bi-monthly to allow people to come together and share their experiences and receive relevant and appropriate support as required.

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.

- Adjustments were made for people who had specific communication needs. For example, people who had a sensory loss had access to visual aids such as a pictorial activity board.
- The registered manager informed us that they were seeking funds to install an audio induction loop system for the communal areas. A hearing loop is a specific type of sound system for use by people with hearing aids.

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

- There was an activity programme in place that had been developed with people who were living at Verona Court. One person told us, "We do get asked if there is anything we would like to do, and the staff do try and put it in place for us."
- The registered manager had a diversity calendar to which they referred to give people the opportunity to take part in events that were culturally relevant to them. People attended a non-denominational church service that was held inclusively for everyone.
- Relatives we spoke with told us that they were able to visit Verona Court as and when they chose, without any restriction. This supported people to develop and maintain relationships with people that mattered to them.

Improving care quality in response to complaints or concerns

- People understood how to make a complaint and feedback we received evidenced that people and their relatives felt confident any issues they raised would be dealt with accordingly.
- Where complaints had been made, these were addressed and actions had been taken in line with the written, formal provider policy.

End of life care and support

- At the time of the inspection, there was no one in receipt of end of life care and support.
- People were asked about their end of life wishes and preferences and these were recorded in people's care files.
- Staff we spoke with told us that they were being trained in this area to be able to support people in a dignified way in line with people's wishes.
- The provider was working towards the Gold Standard Framework (GSF) accreditation. The GSF is a programme designed at improving end of life care by offering staff training and a framework to help identify, assess and deliver care.



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 has now remained the same.

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 provider's vision to create better lives for older people was an integral part of the culture at Verona Court. The registered manager told us, "I will assess staff competency around our values and set staff targets and objectives in line with the values, so staff are able to provide high-quality care."
- People, their relatives and staff felt the registered manager was approachable and had a visible presence throughout the service. Comments we received included, "I like the registered manager; they are very helpful", "The registered manager is very nice, and I can always approach them if I need to" and "[Registered manager's name] is probably the best manager we have had. I am glad they are the manager and I know I could go them about anything."

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 their responsibility in relation to the Duty of Candour. The registered manager told us, "We are open and honest. If something is wrong, we say so and apologise. By creating that type of culture, people and staff know they can always approach me."

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

- The registered manager met their registration requirements. The previous inspection ratings were on display at the service.
- There were systems in place to monitor the quality and safety of the service. Audits were completed at regular intervals by the senior staff team and this was overseen by the registered manager.
- Team leaders observed staff supporting people and provided feedback on areas of good practice or areas for development. This helped staff to deliver and maintain a high quality of care.

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

- Relatives confirmed they were issued with surveys to provide feedback on the running of the service.
- There was an electronic feedback system in place so that people, and all visitors to Verona Court could comment about anything at any time. This information was collated and acted upon as necessary. This

demonstrated the provider had recognised the importance of gathering views to improve the quality of care being provided.

• The registered manager had developed good community links. Verona Court participated in an intergenerational project whereby the local school and nursery visited the service to meet and engage with people. The registered manager shared stories of effective collaborative working that improved outcomes for people. For example, one person had become more socially active following the visit and interactions they had from one student.

Continuous learning and improving care

- The registered manager kept up-to-date with changes within the health and social care sector and used best practice initiatives to drive improvement. For example, the registered manager attended a leadership meeting where good practice was discussed and shared and then information disseminated amongst staff.
- The registered manager utilised support from organisations to improve care for people by seeking training, advice and support. For example, training was given to staff on care planning around the Care Quality Commissions' regulations.

Working in partnership with others

• The registered manager worked alongside other organisations to enhance the quality of care for people. The provider had internal experts working within the service such as registered nurses and mental health workers to support people with specific needs and we saw examples of how the partnership working had improved the lives of people living at Verona Court.