

Disability Action Yorkshire

Disability Action Yorkshire - 34 Claro Road

Inspection report

34 Claro Road
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09 December 2022

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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

About the service

Disability Action Yorkshire – 34 Claro Road is a residential care home providing personal care to up to 22 people. The service provides support to younger adults who have a physical disability. At the time of our inspection there were 17 people using the service.

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

There were enough staff to provide people with safe care. Minimum safe staffing levels were in place. The provider had identified that people would benefit from more staff to support them to pursue their interests in the local area. The provider was actively trying to recruit to increase staffing.

People were safe from the risk of abuse and people told us they felt safe. Risks to people were appropriately assessed and managed. Appropriate support plans were in place for people. Maintenance and safety checks were up to date. People received their medicines as prescribed. The service was clean and hygienic. Lessons were learnt when things went wrong.

The service was well-led. There was a positive atmosphere within the home. The registered manager and provider had good oversight of the service. They understood their regulatory requirements. The registered manager engaged staff, people and relatives well. Staff were able to give suggestions, and these were listened to. People were regularly asked for their views. Staff worked well with other professionals.

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 requires improvement (published 25 October 2019).

At our last inspection we recommended that the provider reviewed staffing levels to ensure there were enough staff to keep people safe and meet their needs. At this inspection we found there were enough staff to keep people safe.

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 Disability Action Yorkshire – 34 Claro 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.

Disability Action Yorkshire - 34 Claro Road

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 an Expert by Experience carried out this inspection. 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

Disability Action Yorkshire – 34 Claro 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. Disability Action Yorkshire – 34 Claro 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.

Inspection activity started on 9 December 2022 and ended on 22 December 2022. We visited the service on 9 December 2022.

What we did before the inspection

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

During the inspection

We spoke with 6 people who used the service and 2 relatives about their experience of the care provided. We spoke with 5 members of staff including the registered manager, the deputy manager, 2 support workers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We received written feedback from a further 5 support workers. We spoke with 1 professional who worked with the service.

We reviewed a range of records. This included 3 people's care records, 2 staff recruitment files and 3 people's medication records. A variety of documents relating to the management of the service, including policies, audits and training records, 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 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.

Staffing and recruitment

At our last inspection we recommended the provider reviewed staffing levels to ensure there were enough staff to keep people safe and meet their needs. At this inspection we found there were enough staff to keep people safe.

- There were enough staff to keep people safe. Minimum staffing levels to ensure people's safety were calculated and fulfilled. Management worked on the floor when needed to ensure there were enough staff to keep people safe.
- The provider had identified people would benefit from more staff so people could be supported to take part in additional activities and pursue their interests in the local area. The provider was actively trying to recruit to facilitate this. One person told us, "I like to go out, but they are not always available to take me." To mitigate this, staff carried out more group activities and worked hard to engage people with daily activities in the service as much as possible.
- Safe recruitment procedures were in place. The provider carried out appropriate pre-employment checks to ensure suitable staff were working at the service.

Systems and processes to safeguard people from the risk of abuse

- Staff kept people safe from the risk of abuse. Staff had received safeguarding training and knew what to do if they had any concerns. One staff member told us, "I would speak to an appropriate member of my management team, if that wasn't an option I would take it to the chief executive, and if I thought there was an immediate threat I would contact emergency services."
- Staff were confident that management would act on any concerns. One staff member told us, "Management would respond appropriately; I have no doubt about that."
- People told us they felt safe. Comments from people included, "I like living here. I feel safe and it is because they care. They speak to me nicely" and, "I love it here. My independence has improved a lot. It is a really friendly place here and the staff are all working for our interest. I am 100% safe."

Assessing risk, safety monitoring and management

- Risks to people were appropriately assessed and managed. Recognised tools to aid in the assessment and response to risk were used and up to date.
- Appropriate plans were put in place in response to risks relevant to each individual person. Detailed guidance was available for staff to help them to support people safely. For example, information was provided about people's medical conditions and signs and symptoms to look out for if someone were becoming unwell.
- Maintenance of the building and health and safety checks were up to date.

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. No-one was subject to a DoLS at the time of our inspection.

Using medicines safely

- Medicines were managed safely. People received their medicines as prescribed. One person told us, "I always get my medicines promptly and on time."
- Detailed guidance was in place for staff for medicines prescribed on a 'when required' basis.
- Staff carried out regular medicine checks such as audits and stock counts.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed
- We were assured that the provider's infection prevention and control policy was up to date.
- There were no restrictions on visiting at the time of our inspection.

Learning lessons when things go wrong

- The provider had robust systems in place to ensure lessons were learnt when things went wrong. Accidents and incidents were discussed at leadership level to discuss what could be done differently.
- Lessons learnt were discussed and relayed to staff in team meetings, supervisions and handovers.

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.

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

- The service was well-led, and the registered manager promoted a person-centred culture. Staff knew people well and support plans were individual to each person.
- Staff were encouraged to further their careers and progress within the company. One staff member told us, "I have learnt a safe way to work and many new skills here. I would always recommend Disability Action Yorkshire as a place to work."
- People and relatives told us there was a positive atmosphere within the home and they would recommend the service. People told us, "The staff are like family" and, "There is a great support network between residents and staff."

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

- The registered manager and the provider had good oversight of the service. Regular quality assurance audits were carried out. These identified areas for improvement which were then acted upon.
- The provider had identified that, whilst minimum safe staffing levels were met, providing additional hours would allow people to better pursue their interests in the local area. The provider was trying to recruit for these additional hours. Whilst recruitment was ongoing, the provider had not accepted any new admissions to the service. The registered manager kept people up to date about the staffing difficulties and communicated with people and professionals about this regularly.
- The registered manager understood regulatory requirements. Notifications were submitted appropriately to CQC and other organisations when required.
- The registered manager understood the duty of candour and was open and honest when things went wrong. There was a culture of continuous learning and improvement, and lessons learnt were relayed to staff.

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 staff, people and relatives well. Staff told us the registered manager was approachable and they had plenty of opportunities to provide feedback. Staff comments included, "[The registered manager] is visible and makes sure we know where she is if we need her" and, "Staff meetings are

useful, and everyone has their say. Staff suggestions are acted on."

- People were regularly asked for their views through questionnaires, support plan reviews and 'resident meetings.'
- The registered manager and staff worked well with other professionals. Appropriate referrals were made when needed, and advice from professionals was incorporated into people's support plans. One professional told us, "[The registered manager] is always available, always wants to work with us and wants the best for people."