

United Response

United Response - 2 William Street

Inspection report

2 William Street
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Wiltshire
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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

United Response – 2 William Street is a residential care home providing personal care to three people with a learning disability. The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People were happy with the support they received and felt safe living at William Street. Staff knew what to do to keep people safe and were confident any concerns would be taken seriously.

Risks to people's well-being and safety were assessed, recorded and kept up to date. Staff supported people to manage these risks effectively. People received support to take their medicines safely.

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.

People were supported to maintain a good diet and access the health services they needed.

The manager provided good support for staff to be able to do their job effectively.

The provider's quality assurance processes were effective and resulted in improvements to the service.

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 12 April 2019). 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 a comprehensive inspection of this service in February 2019. A breach of legal requirements

was 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.

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, Effective and Well-led which were rated requires improvement.

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 coronavirus and other infection outbreaks effectively.

The ratings from the previous comprehensive inspection for those Key Questions not looked at on this occasion were used in calculating the overall rating at this inspection. 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 United Response – 2 William Street 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 re-inspection 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 well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

United Response - 2 William Street

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide 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 team consisted of one inspector.

Service and service type

2 William Street is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 Care Quality Commission, although they were not present during the inspection. The provider had appointed a new manager for the service, who was in the process of registering with CQC. The registered manager 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 announced. We gave the service short notice of the inspection. This was because we needed to be sure that arrangements were in place to maintain infection control procedures during the

inspection.

What we did

Before the inspection we reviewed the information we held about the service and the service provider. The registered manager completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law.

During the inspection

We looked at three people's care records. We looked at a range of other records about how the service was managed. We spoke with all three people, who use the service, the manager and two support workers.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At the last inspection the provider had failed to ensure risks were assessed and managed effectively. This was a breach of Regulation 12 (Safe care and treatment) 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.

- Risk assessments were in place to support people to be as independent as possible. The plans balanced protecting people with supporting them to make choices about how they lived their life.
- People had been involved in assessing risks and their views were recorded. The assessments and action plans had been regularly reviewed and updated. The plans contained clear information about the support staff needed to provide to enable people to manage the risks they faced. Staff demonstrated a good understanding of these plans, and the actions they needed to take to keep people safe.
- People had positive behaviour support plans in place where needed. These set out the support people needed to manage behaviours that challenged staff and other people. The plans included clear information about signs for staff to look out for and actions needed to de-escalate situations.

Preventing and controlling infection

At the last inspection the home was not clean and there were not effective cleaning schedules in place. This was a breach of Regulation 12 (Safe care and treatment) 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.

- All areas of the home were clean and there were clear cleaning schedules in place. The provider had introduced additional cleaning measures as a result of the COVID-19 pandemic.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider's infection prevention and control policy was up to date.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at William Street. They said they would speak to staff if they had any concerns
- The service had safeguarding systems in place and staff spoken with had a good understanding of their responsibilities. Staff had access to information and guidance about safeguarding to help them identify abuse and respond appropriately if it occurred.
- Staff had completed safeguarding training and were confident action would be taken if they reported any concerns.

Staffing and recruitment

- There were enough staff to meet people's needs safely. The registered manager ensured staff deployed had the appropriate skills to meet people's needs.
- We observed staff responding promptly when people needed assistance. Staffing levels were sufficient to support people to take part in activities they enjoyed.

Using medicines safely

- People were supported to take the medicines they had been prescribed in a safe way. Medicine administration records had been fully completed, which gave details of the medicines people had been supported to take. Medicines were securely stored in a locked cabinet.
- Where people were prescribed 'as required' medicines, there were clear protocols in place. These stated the circumstances in which the person should be supported to take the medicine.
- Staff had received training in safe administration of medicines and their practice had been assessed, to ensure they were following the correct procedures.

Learning lessons when things go wrong

- Systems were in place for staff to report accidents and incidents. Staff were aware of these and their responsibilities to report such events. Action was taken to reduce the risk of similar incidents happening again.
- Staff took part in reflective practice where necessary following incidents. This was used to reflect on what had happened and assess whether different actions would have resulted in better outcomes for people.
- Accidents and incidents were reviewed by senior managers to ensure appropriate actions had been taken.

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 requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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.

At the last inspection the provider was not working within the principles of the MCA. This was a breach of Regulation 11 (Need for consent) 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 11.

- Staff had completed training on the MCA and were aware who lacked capacity to consent to their care and treatment.
- Staff checked with people before providing any care or support. They asked people questions in different ways to help ensure they understood the decisions they were making.
- Applications to authorise restrictions for people had been made to the local authority where necessary and were being assessed at the time of the inspection. Staff understood the importance of assessing whether a person had capacity to make a specific decision and the process they would follow if the person lacked capacity. These assessments had been clearly recorded.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People had been living at William Street for a long time and were settled in the service. Their needs were regularly reviewed to ensure any changes were identified and support plans updated.
- People were supported to set goals to help them develop their skills and become more independent.
- People told us staff understood their needs and provided the support they needed

Staff support: induction, training, skills and experience

- Staff said they received good training, which gave them the skills they needed to do their job. The manager had a record of all training staff had completed and when refresher courses were due.
- Staff completed assessments to demonstrate their understanding of training courses.
- Staff had regular meetings with their line manager to receive support and guidance about their work and to discuss training and development needs. Staff told us they received good support.

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

- People were supported to be involved in meal planning and food preparation. Staff supported people to plan a balanced diet.
- Staff supported one person to consult a nutritionist for guidance and advice on meeting their specific dietary needs.

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

- The service had systems in place to plan referrals to external services and support people to attend appointments. Staff worked with local health services to ensure people received the support they needed. Examples included their GP, psychiatrist and community nurses.
- People told us they were able to see their doctor and other health professionals when needed.
- Staff had recorded the outcome of appointments in people's care records, including any advice or guidance.

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

- People were involved in decisions about the premises and environment. People had decorated their rooms to their individual taste.
- The manager had involved people in decisions about the décor and furniture of the shared areas of the home. Work was planned to redecorate the shared areas.
- People told us they were frustrated at the time it had taken for repairs to be completed in one of the bathrooms. After a long delay, work had started on this at the time of the inspection. The management team had been in extensive contact with the landlord to ensure they fulfilled their responsibilities.

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 requires improvement. At this inspection this key question has now improved 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; Continuous learning and improving care

At the last inspection the provider did not have effective quality assurance and management oversight systems. This was a breach of Regulation 17 (Good governance) 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.

- The provider had effective quality assurance systems in place. These included, reviews of care records, medicine records, support plans, staff records and quality satisfaction surveys. In addition to checking records the management team completed observations of staff practice. This was to assess whether staff were putting the training and guidance they had received into practice.
- Incidents were reviewed by senior managers within United Response and were discussed as part of staff meetings. This helped to ensure lessons were learnt and practice changed where necessary.
- The results of the various quality assurance checks were used to plan improvements to the service.
- The manager was aware of the need to notify CQC of certain important events. Records demonstrated these notifications had been submitted when necessary.

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 provider and manager had promoted a person-centred approach in the service. This was evidenced through the feedback from people who use the service, the training staff received and the way records were completed. Staff told us the manager had worked to ensure people received individual support to meet their needs.
- Staff we spoke with praised the management and told us the service was well run. Comments included, "We have good support from the management team, they have a good understanding of what is happening at William Street. We are able to get hold of them at any time, including out of hours. I feel very well supported."
- The manager understood their responsibilities under the duty of candour.

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

characteristics; Working in partnership with others

- The service involved people and others effectively in a meaningful way. The manager responded to issues raised in quality surveys and let people know what action they had taken.
- The manager worked well with the local health and social care professionals. They had established good links and working relationships.
- Staff told us they felt listened to, valued and able to contribute to the running of the service.
- People were supported to be active members of their community and participate in local events.
- The provider was a member of relevant industry associations to ensure they were updated in relation to any changes in legislation or good practice guidance.