

FitzRoy Support Hipswell Highway

Inspection report

130 Hipswell Highway Coventry West Midlands CV2 5FJ Date of inspection visit: 29 January 2019

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Ratings

Overall rating for this service

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

What life is like for people using this service:

People who lived in the home and relatives felt confident in the management team and how the service operated. Staff were deployed to ensure they afforded people responsive and dignified support. Staffing levels were suitable for the needs of people and staff we spoke with confirmed this. This enabled people to maintain continuity of care and provided support for people to follow their choices in day to day living and the local community.

The management team had safe recruitment procedures to ensure staff were suitable to work with vulnerable adults. However, no new staff had been recruited since the registration of Hipswell Highway.

Staff responsible for assisting people with their medicines had received training to ensure they had the competency and skills required.

Risk assessments provided instructions for staff members when they delivered care for people supported within the home and when out in the community.

Care records we looked at were detailed and personalised to the person's needs and wishes. There was evidence of a multi-disciplinary approach to create a detailed plan so that people who lived in the home had support from health and social care professionals.

People who lived at Hipswell Highway were treated with respect by caring staff. This was confirmed by people we spoke with who lived there and a relative. One person commented, "[Staff member] helps me get ready in my room when I am going out. They are so kind."

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. We discussed the principles of the MCA and consent with staff and found they had a good awareness.

We found the registered manager and the organisation had systems in place to ensure they met people's diverse and cultural needs. Those who lived at the home and relatives told us people respected their customs and their way of life. Care records we looked at evidenced people and where appropriate relatives were fully included in their support planning.

The registered manager used a variety of methods to assess and monitor the quality of the service. These included staff meetings and auditing of the service. This enabled Hipswell Highway to be monitored and improve areas that were identified through their quality monitoring processes.

The service worked in partnership with other organisations to ensure they followed good practice and

people in their care were safe.

There was a complaints procedure which was made available to people. Only one complaint had been received since their registration. We found this had been resolved to a satisfactory conclusion and in a timely approach.

More information is in Detailed Findings below.

Rating at last inspection:

This was a planned first inspection of the service since their registration with CQC.

About the service:

Hipswell Highway is a small home registered to provide accommodation for up to six adults with learning disabilities. The property is detached and provides single rooms for people. At the time of our visit there were five people who lived at the home.

Why we inspected:

This was a planned first inspection of the service since their registration with CQC.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our reinspection programme or if any issues or concerns are identified.

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 exceptionally 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 Responsive findings below.	



Hipswell Highway

Background to this inspection

The Inspection • We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection team • Consisted of an adult social care inspector.

Service and service type • 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.

Hipswell Highway is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Notice of inspection • This comprehensive inspection visit took place on 29 January 2019 and was announced. The provider was given 48 hours' notice because the location provided care to five adults and we had to ensure people were available at the home.

What we did preparing for and carrying out this inspection • Before our inspection we completed our planning; tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports.

We also checked to see if any information concerning the care and welfare of people supported by the

service had been received. We contacted the local authority commissioning department who used the service. This helped us to gain a balanced overview of what people experienced accessing the service.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection visit we spoke with a range of people about Hipswell Highway. They included three people who lived at Hipswell Highway, a relative of a person and the registered manager. In addition, we spoke with the deputy manager and three staff members.

We looked at records relating to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead Hipswell Highway in ongoing improvements. We also looked at staffing levels and recruitment procedures for staff and focussed on how staff provided care within the home.



Is the service safe?

Our findings

Safe - this means people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met

Systems and processes

• Staff demonstrated they had a good awareness about protecting people from abuse or poor practice. The service had procedures in place for reporting allegations of abuse. The registered manager provided relevant training to strengthen staff skills and staff confirmed this. Staff we spoke with demonstrated an awareness of identifying instances of abuse and how to report them appropriately.

• The registered manager and their deputy had processes to follow to complete risk assessments and identify potential risk of accidents and harm to staff and people in their care. Risk assessments provided instructions for staff members when they delivered care for people supported within the home and when out in the community.

Assessing risk, safety monitoring and management

• Staff understood where people required support to reduce the risk of avoidable harm. Care plans we looked at contained explanations of control measures and had indicators of what to look for that would identify a person at risk in certain situations. This helped staff to keep people safe and reduce risk of incidents. A staff member said, "We are a small place and are aware of personal risks to residents as we know them so well."

Staffing levels

• We looked at how the service was staffed and found appropriate arrangements were in place. Staff told us there were no issues with staffing levels and deployment of staff in the home. One staff member said, "We do at times need one to one support however it is managed very well and we all muck in together. We don't have issues with shortages of staff."

• Systems were in place for recruitment of staff however none had been recruited since the registration process had been completed.

Using medicines safely

• We looked at medication records and found people's medicines were managed safely. Staff who administered medication did so at the correct time they should and had received appropriate training. Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance. This showed the registered manager had systems to protect people from unsafe storage and administration of medicines.

• Where people were prescribed medicines to take 'as and when required' there was detail to guide staff on when to administer them. The registered manager had good systems and up to date records in line with current good practice.

Preventing and controlling infection

• If required there was sufficient personal protective equipment, such as disposable gloves to maintain good standards of infection control within the home.

Learning lessons when things go wrong

• We looked at how accidents and incidents were managed by the service. There had been few accidents/incidents. However, where they occurred any accident or 'near miss' was reviewed to see if lessons could be learnt and to reduce the risk of similar incidents.

Is the service effective?

Our findings

Effective – this means people's care, treatment and support achieved good outcomes and promotes a good quality of life based on best available evidence.

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.

• Staff applied learning effectively in line with best practice. This led to a good service for people who lived at Hipswell Highway and a good quality of life.

• Care records for people who lived at the home were reviewed and updated when changes occurred. This meant people's support was up to date to ensure they received the right care and staff were aware of any changes.

Staff skills, knowledge and experience

- We spoke with staff and found they had a good knowledge and experience of supporting people they cared for. This was enhanced by training courses relevant to their roles. In addition, a lot of staff had been together since the service's registration, this helped build effective relationships. One staff member said, "It does help when we have supported these residents for a long time, we have great relationships and are like a family." Another staff member said, "A good staff team that is well trained."
- The registered manager had a wide-ranging training programme to enhance and develop staff skills, in addition to support them in their roles. Training events included, safeguarding, fire safety, food and hygiene and infection control. One staff member said, "No other place better for training opportunities than here."

Supporting people to eat and drink enough with choice in a balanced diet

- Mealtimes at Hipswell Highway were a relaxed informal event. As we arrived people were having breakfast in the lounge and dining areas with different choices. One person who lived at the home told us what they had for breakfast and said, "I love my breakfast before I go out to [activity]." At lunchtime all but one person was out, however they chose what they wanted to eat and sat with staff whilst they had lunch. Staff told us people who lived in the home were involved in preparation and shopping for food and they had meals and snacks together and planned menus. One person who lived at Hipswell Highway said, "We have some great food."
- Care records we looked at contained nutritional assessments and relevant guidance to assist staff to reduce the risks of malnutrition.

Staff providing consistent, effective, timely care

- We found evidence the registered manager was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes.
- People received effective support from staff at Hipswell Highway because they were supported by trained staff who had a good understanding of their needs.

Ensuring consent to care and treatment in line with law and guidance

• People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The registered manager knew the process to safeguard people who did not have capacity. Records we reviewed included an assessment of capacity and best interest decisions. Throughout our inspection, we observed people were supported to make their day-to-day decisions.

• Records we reviewed contained evidence to demonstrate care planning was discussed and agreed with people and their representatives. Consent documentation was in place and signed by the person receiving care or their relatives if appropriate. When we discussed the principles of consent with staff, we found they had a good level of awareness.

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

• We had a walk around the premises. It was appropriate for the care and support provided. Lighting in communal rooms was domestic in character, sufficiently bright and positioned to facilitate reading and other activities. Aids were in place to meet the assessed needs of people with mobility needs.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect and involved as partners in their care.

Ensuring people are well treated and supported

• Staff were kind and patient with people and this was noticeable throughout the day of our inspection visit. People expressed positive views on how they were treated by staff. One person who lived at Hipswell Highway said, "[Staff member] helps me get ready in my room when I am going out. They are so kind." We noticed staff knocked on doors before entering people's rooms or when they were told to enter by the person.

• Care records reflected important information in relation to each person's dignity and privacy. It was clear care records and the attitude of staff was to ensure support given to people who lived at Hipswell Highway was personalised. In addition, staff focused on retaining and promoting people's independence as much as they could within a care home setting. This was confirmed by our observations during the inspection visit and comments from people we spoke with about their community activities.

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

- Care records we looked at contained evidence the person or a family member had been involved with and were at the centre of developing their care plans at Hipswell Highway.
- The registered manager and staff documented people's diverse needs and assisted them to maintain their different requirements. For example, they recorded each person's religious preferences. We saw equality and diversity was extended to all personnel and training was provided for staff. Records we saw confirmed this.
- There was information available about access to advocacy services however the registered manager explained how difficult this was in the area. This was due to lack of support services available.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff supported people to maintain their lawful rights as set out in the Human Rights Act 1998. For example, they assisted those who lived at Hipswell Highway House to retain their 'Freedom of thought, conscience and religion', Article 9 of the act. They achieved this through recording each person's spiritual needs and helping them to access relevant services.
- Staff respected people's choices around privacy and dignity. For example, people had their bedroom doors closed if they chose to and staff told us their relatives were offered private space to visit them. This was confirmed by a relative we spoke with.
- We observed during the day of our visit staff had an appreciation of people's individual needs around privacy and dignity. We observed they spoke with people in a respectful way and were kind, caring and patient when supporting people. For example, a staff member we observed was supporting a person to get ready for the day ahead and was brushing their hair and discussing what the routine was for the day ahead. The person was relaxed and told us they enjoyed the interaction and help from staff.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

End of life care and support

• People's end of life wishes had been recorded in care records we looked at. At the time of our inspection visit, none of those who lived at Hipswell Highway were on end of life care. However, records we reviewed contained information about each person's preferences in the event of their death.

Personalised care

• Records we looked for people who lived at the home were detailed and showed that staff used a personcentred approach to plan and support people. For instance, care records contained physical, mental, social and personal needs. In addition, care documentation contained the individual's history and preferences. This was so staff were aware of people and this helped to develop meaningful relationships.

• Staff told us they were encouraged to spend time socialising and were encouraged to sit and talk with people. Staff responded by telling us this was what the management team wanted them to do.

• Each person who lived at Hipswell Highway had their own activity planner which they had been involved in developing based on their likes and dislikes. Each person had their own interests which they liked to follow. For example, this included, hobbies, shopping, going out for meals and going on trips and walks. One person who lived at the home said, "I am going to my knitting club today I love it."

Improving care quality in response to complaints or concerns

• The registered manager provided information in documentation to inform people about how to make a complaint if they chose to. In addition, the complaints process was available in documentation for people to access. The policy included details about the various timescales and steps to take, as well as contact details for the Local Government Ombudsman and CQC. The registered manager told us they had received one complaint over the last 12 months. We saw this had been resolved to a satisfactory conclusion and in a timely approach. The registered manager acted, where required, to maintain the quality of care delivery in response to people's comments.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, personcentred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed well led. Leaders and the culture they created promoted high-quality, person centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- People who lived at Hipswell Highway and staff commented positively about the registered manager. They informed us the registered manager was visible about the home and had a good understanding of people's needs and backgrounds. One staff member said, "We are such a small home everybody is involved, [registered manager] is always around."
- Comments we received about the management of Hipswell Highway were positive and complimentary in the way the home operated. A staff member said, "The place is organised and we all get along very well."

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- We found the service had clear lines of responsibility and accountability. The registered manager, the deputy manager and staff were experienced and familiar with the needs and wishes of people they supported.
- The registered manager understood their role in terms regulatory requirements. For example, notifications were sent to CQC when required to report incidents that required had occurred and required attention.
- Discussion with the registered manager, deputy manager and staff on duty confirmed they were clear about their role and between them provided a well run and consistent home. We spoke with relatives who confirmed this.

Engaging and involving people using the service, the public and staff

- Surveys were given out to relatives/residents annually. As yet these had not been completed however were in the process of distributing to relevant parties.
- With Hipswell Highway being a small home, informal discussions with staff and people who lived there were ongoing. A relative said, "We talk all the time with them and discuss things together."

Continuous learning and improving care

• The registered manager completed a range of quality audits to ensure they provided an efficient service and constantly monitored Hipswell Highway. These included, medication, care records, the environment and infection control. This demonstrated improvements could be made to continue the home to develop and provide a good service for people who lived there.

Working in partnership with others

• The registered manager at Hipswell Highway worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. For example, local social services told us they have a good relationship and communication with the service.