

# Olcote







## Olcote

### 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	

#### Overall summary

We inspected Olcote on 10 July 2015. The service is registered to provide support and accommodation for one person. The inspection was unannounced. At the time of our inspection, one person used the service.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like

registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last inspection of the service on 15 May 2014, the provider was compliant against all the regulations we inspected against.

The person who used the service told us they were safe and protected from harm. They told us they would not hesitate to raise any concerns with the provider if they felt

# Summary of findings

they were at risk of harm. The registered manager understood what constituted abuse and knew what actions to take if abuse was suspected. Risk assessments and management plans were in place to ensure the safety of the person who used the service.

The person who used the service told us the provider was always available to meet their needs. We saw that contingency plans were in place to ensure that the person's needs continued to be met by suitable trained and qualified people in the event of the absences of the registered manager. The person's medicines were reviewed regularly, managed safely and stored securely.

The needs of the person who used the service were assessed regularly to ensure that they were met appropriately. The registered manager received regular training to ensure they maintained the required skills and knowledge to provide care. The person who used the service told us they had lived at the home for several years; the registered manager knew them well and was skilled to provide them with the care and support they needed.

The freedom of the person who used the service was not restricted. The registered manager had an understanding of the relevant requirements of the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS). They told us these requirements did not apply to the

person who used the service. The MCA and DoLS set out the requirements that ensure where appropriate; decisions are made in people's best interest when they are unable to do this for themselves.

The person who used the service told us they had enough to eat and drink. They had a choice of meals and we saw that the registered manager kept a record of all meals they ate to ensure they had a balanced diet. They received regular reviews from health and social care professionals when needed.

Care was tailored to meet the individual needs of the person who used the service. Care plans detailed how they wished to be supported. They were supported and encouraged to live a very active life and to engage in activities in the community and within the home which they enjoyed. There were systems in place to support the person or their relative if they wished to complain or raise concerns about the service, although the person told us they had never had any reason to make a complaint.

The person who used the service told us the registered manager was approachable and always available. We saw records which demonstrated that the registered manager gave the person who used the service and their relative opportunities to give regular formal feedback about the quality of services provided. There were effective systems in place to review the quality of the service provided.

# Summary of findings

## 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 safe.

The person who used the service told us they felt safe and protected from harm. The registered manager understood safeguarding and knew what actions to take if they suspected abuse. There were risk assessments and management plans to ensure that the person received consistent and safe care. There were contingency plans in place to ensure that the staff were available to provide care in the event of the absence of the registered manager.

Good



### Is the service effective?

The service was effective.

The registered manager had the skills and knowledge to provide effective care. The person's freedom was not restricted. Food and drink were always available and the person was supported and encouraged to have a healthy diet. Regular reviews with health and social care professionals took place to ensure the person remained well.

Good



### Is the service caring?

The service was caring.

The person who used the service told us and we observed that the registered manager was kind and caring. They understood the needs of the person who used the service and respected their wishes and preferences. The person was treated with dignity and respect and was supported to express their views about their care.

Good



### Is the service responsive?

The service was responsive.

The person who used the service received care which was centred on their individual needs. The registered manager knew their likes and dislikes and provided care in line with the person's wishes. A summary of the complaints policy had been made available to the person who used the service. However, they told us they had never had any reason to make a complaint.

Good



### Is the service well-led?

The service was well-led.

There was a registered manager in place. People's care records reflected the care they received. The registered manager monitored the quality of the care provided and encouraged the service user to be involved in developing the service. They promoted an open culture within the home.

Good



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## Detailed findings

### Background to this 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 was 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.

This inspection was undertaken by one inspector on 10 July 2015 and was unannounced.

We reviewed the information we held about the service. Providers are required to notify us about events and incidents that occur including unexpected deaths, injuries to people receiving care and safeguarding matters. We refer to these as notifications. We had not received any notifications from the provider for over 12 months. We

reviewed additional information we had requested from the local authority safeguarding team and local commissioners of the service. Commissioners are people who work to find appropriate care and support services which are paid for by the local authority. We were informed that there were no concerns about the service.

We observed how care was provided and carried out and the person interacted with the provider. We spoke with the person who used the service and the provider. This helped us understand people's experiences of care.

We looked at the person's care records to help us identify if they received planned care and reviewed records relating to the management of the service. These records helped us understand how the provider responded and acted on issues related to the care and welfare of the person, and monitored the quality of the service.

# Is the service safe?

## Our findings

The person who used the service told us they felt safe and protected from harm. They told us they ensured that they “kept away from trouble” and if they had any concern, they would report it to the provider to bring it to the attention of another service they attended on regular basis. The provider told us that they had no concerns about the person’s safety however; they had carried out risk assessments to ensure that the person was protected from harm whilst they were out in the community. We saw records which confirmed this. The provider said, “[Person’s name] is not confrontational and is keen to keep out of trouble. However, if I had any concerns, I will go to [name of day service provider] and have a word and I will contact the local authority”.

The person who used the service told us they cycled regularly to attend day services at another provider in the community. They told us they accessed the local community independently on most days and when they wished to. We saw that the provider had carried out risk assessments to ensure that the person could use the roads safely and to cycle safely to various locations of their choice. The provider told us, “We went together to choose their bike. We wanted to make sure they got the correct

one. I have risk assessments and [Person’s name] has a copy for themselves and we go through it regularly because we want to keep them safe”. This showed that the provider had a positive attitude to risk and took appropriate steps to support the person to enjoy their freedom whilst keeping safe.

The registered manager was the sole employee of the service. The person who used the service told us they felt their needs were met adequately by the registered manager. The registered manager told us they had not required extra staff because the person was able to attend to most of their needs independently and did not require extra support.

Medicines were managed appropriately and safely. The person told us they had their medicines regularly and had no concerns about the effectiveness of their medicines as they had regular reviews and had not experienced any health problems for a significant period of time. We saw records which showed that the registered manager ensured that the dispensing pharmacy signed to ensure that the appropriate medicines had been dispensed. We saw evidence that the provider had completed training in medication administration to ensure that they administered medicines safely.

# Is the service effective?

## Our findings

The person who used the service told us the service was effective. They felt that the registered manager was sufficiently skilled to meet their needs. We observed that the registered manager communicated well with the person who used the service and knew how to meet their needs. The registered manager gave us examples how the person presented when they were anxious, and described how they responded to the person's feelings of anxiety. They told us they kept up to date with training to enable them to provide effective care. We saw records of training they had undertaken recently to ensure they kept up to date with their roles and responsibilities as care provider.

The freedom of the person who used the service was not restricted. The person told us they were free to go out in the community when they wished. They told us they did not feel restricted in any way. They said, "I get up at about 9am, have a shower and then go and get a paper. I cycle to the [name of day service provider] almost every day". The registered manager told us the person who used the service made all decisions for themselves and had the capacity to make decisions about their safety. The provider told us, "[Person's name] cycles to [name of day service provider] regularly. They go there as and when they want to". The registered manager demonstrated an understanding of the Mental Capacity Act (2005) and Deprivation of Liberty Safeguards (DoLS) and told us they did not think it applied to the person who used the service.

Consent was obtained from the person before care was provided. The registered manager told us that various care plans were discussed and agreed with the person who used the service and the person was encouraged to sign to indicate that they had consented to the care being provided. For example, the registered manager said,

"[Person's name] doesn't manage their medicines. They get confused, so they have consented for me to manage it for them". We saw records of the consent form signed by the person for their medicines to be managed by the registered manager.

The person who used the service told us they enjoyed all the meals at the home. They were involved in deciding what they would like to eat. We saw that adequate amounts of food and drink were available and the person could help themselves to these. The registered manager told us they prepared a healthy packed lunch for the person to take to the day service they attended. They showed us a packed lunch they had prepared for the person for the day and we saw that the registered manager had ensured the contents were healthy. The person told us they liked their packed lunch and the registered manager always made sure they had their favourite fruit. The registered manager told us they had a hot meal in the evening and they ate together. They maintained a daily record of the person's meals and we saw these. The registered manager had received training in food and hygiene and this helped them ensure that appropriate procedures were followed during food preparation.

Other professionals were involved in ensuring the person remained well. The person said, "I go to see the doctor. They keep me well". The registered manager told us, "We're very lucky. [Person's name] they very rarely need to go to the GP. They have their annual diabetes review and they were given a personal diabetes self-management plan which they follow". We saw records of the self-management plan which had been provided and records of visits to other health and social care professionals and we noted that the advice given was followed. This showed that the person had access to other healthcare services when they needed it.

# Is the service caring?

## Our findings

The person who used the service told us the registered manager was nice and treated them kindly. They said, “It’s my family home. I can’t think of how life would be without this place. I’m very happy here and settled. All my worries are taken away by [Registered manager and registered manager’s partner’s names]”. The registered manager told us that the person had lived with them for several years and was considered as a family member. They said, “[Person’s name] is our family. Where we get invited, they get invited too”. The person told us, “I’ve watched all their grand kids grow”. We saw photographs of family events they had been invited to and pictures that had been taken over the years with various family members. We observed positive interaction between the registered manager and the person who used the service and noted that care was person-centred and not task-led.

The person told us they were encouraged to express their views about how they received their care. They told us they spent time regularly with the registered manager to discuss various aspects of their care. We saw records which indicated that regular care plan reviews took place with the person who used the service and changes were made based on the person’s needs and views about how they wished to receive care and support.

The person’s privacy and dignity was respected. The person told us they had their own bedroom which they could lock if they wished to. The registered manager told us they only went into the bedroom when they were invited in. We observed that the person was spoken to in a kind and respectful manner and in a non-patronising manner that reflected their age.

The person told us they lived an independent life as much as possible. They told us they took part in household tasks such as gardening, looking after the household pets, going out to the local shops and making themselves drinks if they wished to. They told us they enjoyed doing these as it kept them active.

The registered manager told us they discussed funeral arrangements with the person. They told us they talked about the type of music they would like to be played during the person’s funeral. The registered manager said, “You don’t want anybody making these decisions for them. You need to discuss these things because they are about the person’s wishes”. The person told us they had told the registered manager their wishes in the event of their death and it had been documented. This showed that the person had been supported to make end of life plans.

# Is the service responsive?

## Our findings

The person had comprehensive assessments of their health and social care needs to ensure that the service was suitable and could meet their needs. The person's care records contained information about their individual likes, dislikes and care preferences and the person told us that their wishes were respected always. The registered manager knew the person's likes and dislikes and provided care in line with these. For example, they said, "[Person's name] enjoys writing. They pick out stories from the newspaper and writes new stories out of these". The person showed us copies of stories they had written and told us they enjoyed writing.

The person told us they had regular reviews of their health with a professional. They had a 'wellness plan' in place which they had been involved in developing with a health professional. The plan identified various activities and aimed at keeping the person well. The registered manager told us they worked in collaboration with the person who used the service to ensure that the plan was followed and this had helped ensure the person remained physically and mentally well. This meant that the registered manager had arrangements in place for the individual needs of the person to be reviewed regularly.

The person who used the service was supported to engage in activities in the community which they enjoyed. They said, "They [registered manager] take me out. We go to [name of local shopping village] every Sunday and we have a cup of tea together". The registered manager commented, "It is our Sunday morning ritual". The person told us they went on day trips to other towns, with other members of the day service they attended. The registered manager told us that the person enjoyed football and supported a local team, so they supported the person to obtain a season ticket for the team so that they could attend football matches. This showed that that the registered manager supported the person to engage in activities they enjoyed.

The person told us they had not had any reasons to complain about the service but said they would not hesitate to raise any concerns with the proprietors. The registered manager told us they always asked the person if there was anything they were not happy about and the person had never complained. There was a complaints policy in place and a copy of the complaints procedure had been put on the wall in the bedroom of the person who used the service to support them should they wish to complain about the service.



# Is the service well-led?

## Our findings

The registered manager told us that the person who used the service and their relative were encouraged to give feedback about how the service was run. They told us they carried out regular surveys to obtain their views, and although they were a very small service, they said they were not complacent in obtaining the people's views about the service. They said, "I don't stand over them, I just leave them to it". We saw records of six monthly surveys completed by the person who used the service and annual survey completed by the relative of the person who used the service and we saw that their response was positive over the years.

The person who used the service told us the registered manager was always available and they could approach them with any concerns. The registered manager

demonstrated an understanding of their CQC registration requirements and other legal requirements such as the submission of notifications and reporting of safeguarding concerns.

There were contingency plans in place for how the person who used the service would continue to receive appropriate care in the event of their absence. We saw that the plan provided a summary of the person's needs, wishes and how they liked to receive care and support.

We saw records which indicated that the registered manager carried out regular maintenance check of the service. These included fire and alarm checks, electricity and gas checks. They said, "I keep things simple and [person who used the service] knows what to do in an emergency". The provider had a system in place to record and review any accidents and incidents. This meant that the provider could follow up on any issues that affected the welfare of the person who used the service.