

# Orwell Housing Association Limited

# Steeple View

### **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

Steeple View provides care and support to people living in an 'extra care' housing setting. Extra care housing is purpose built or adapted single household accommodation in a shared site or building. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care provided by the service.

Not everyone living at Steeple View received the regulated activity of personal care. On the day of our inspection 28 people were receiving this service. Steeple View consists of 36 one and two-bedroom self-contained apartments over two floors. The service is situated in a quiet rural area on the edge of the town of Stowmarket in Suffolk. The service provides support to people to live in their accommodation, with their own tenancy agreements.

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

People felt safe with the care and support provided by the service. All staff had received safeguarding training and knew how to protect people from potential harm. Safeguarding policies and processes were in place.

People were supported by a staff team who were safely recruited and who had the relevant training and qualifications to safely support them. Staffing and recruitment was a challenge, particularly considering the impact of the COVID-19 pandemic. Despite this, staff worked hard to ensure that people received their care calls as planned and no one missed any care.

People's care plans were detailed and person-centred. They included information on people's family, history, skills and interests.

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.

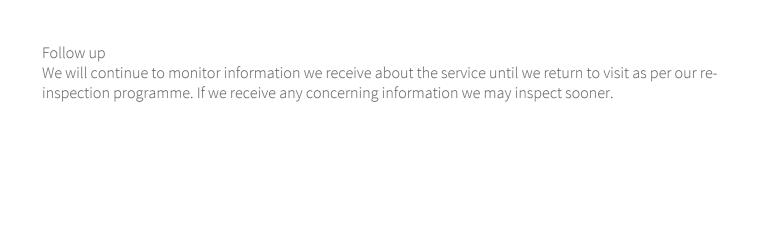
Systems to monitor the quality and safety of the service were in place. Quality monitoring systems allowed for effective monitoring of the service by the provider.

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 (published 4 September 2018).

Why we inspected

This was a planned inspection based on the previous rating.



# The five questions we ask about services and what we found

We always ask the following five questions of services.

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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.	



# Steeple View

**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

This inspection was carried about by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. The Expert by Experience made telephone calls, off site, to obtain feedback on the service from people and their relatives.

#### Service and service type

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 bought [or] [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 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 on 1 November 2021 and ended on 15 November 2021. We visited the office location on 1 November 2021.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require

providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We visited the office location on 1 November 2021. We reviewed a range of records which included risk assessments, medication records and care plans for two people. We also viewed accident and incident records and management monitoring and oversight records.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We had contact with two people who receive care and support from Steeple View about their experience and seven relatives. We also had electronic feedback via email from seven staff members.



### 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

- A person we spoke with, and numerous relatives, felt safe with the care and support provided by the care staff at Steeple View. One person said, "I feel safe when the carers visit as they chat with me and they make me feel like a valued human being. The carers are excellent I can't fault them. They make themselves known when they come in and always lock the door when they leave."
- People were supported by care staff who had received safeguarding training and were able to describe the types of abuse, and what could be done to help protect people if they were at risk. One care staff said, "The whistle blowing policy and safeguarding procedures are on the notice board in the staff room, I am aware of how to identify and report any harm or abuse to [people]. Thankfully I have never had to do this."

Assessing risk, safety monitoring and management

- Risks people faced in their daily lives had been considered, and measures were in place to mitigate them where possible.
- People's support plans showed risks, such as those associated with equipment or risk of falling had been assessed. There was guidance for care staff to enhance safety.

#### Staffing and recruitment

- People told us care staff were always there when they needed them. "My carers arrive more or less on time and stay for as long as they should. I see several carers who look after me. I don't have a rota I have just got to know who visits at certain times. They have never missed a call or had reason to phone me up to tell me they are running late."
- People who use the service, their relatives and care staff told us of intermittent challenges over the past year with staffing levels due, in part, to the COVID-19 pandemic. Attempts to recruit care staff were an ongoing challenge. Where possible agency staff were used to fill any staffing gaps however, there were also challenges with sourcing agency staff at times too. Despite this no care calls had been missed. The registered manager and many relatives attributed this to the commitment of the staff team who worked hard to ensure people's needs were met.
- The provider continued to use robust recruitment checks and processes to ensure only staff suitable for the role were employed. Pre-employment checks still included obtaining references and checks with the Disclosure and Barring Service (DBS). The DBS helps employers make safer recruitment decisions and help prevent unsuitable people from working in care services.

#### Using medicines safely

• People were safely supported with their medicines were required.

- Records showed people had received their medicines as prescribed.
- Staff had received training in the safe administration of medicines, and regular audits took place.

#### Preventing and controlling infection

- Systems were in place to minimise the risk of infection and its transmission.
- Care staff took part in a weekly testing programme to minimise the risk of spreading COVID-19.
- Plentiful supplies of personal protective equipment (PPE) were available for staff to use.

### Learning lessons when things go wrong

• There were systems in place to record, review and learn from incidents and accidents including monitoring to help prevent the possibility of reoccurrences.



### 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's needs continued to be assessed before they were offered a service. This ensured the care team at Steeple View could meet their needs and preferences effectively.
- Records showed the assessment process covered areas such as general health, mobility and nutrition. This information was used to develop the person's support plan.

Staff support: induction, training, skills and experience

- People were cared for by care staff who were well trained, experienced and had the skills needed to provide them with effective care.
- care staff had a good understanding of people's care needs. One person said, "I think the staff are all well trained to look after me."
- Care staff felt supported by the registered manager to carry out their role effectively. One care staff member told us, "I have always felt supported at work. Team leaders and the [registered] manager alike are always supportive. Any queries or training needs are recognised and acted upon."

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

- People were supported to eat and drink where they required this support.
- Where people were at risk of malnutrition, support was in place to make referrals to the dietetics team as well as additional support with nutritional supplements monitoring.
- Information about the assistance people required with eating and drinking was clearly identified in their care plan.

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

- People continued to be supported to access a range of services to meet their healthcare needs.
- Details about health conditions, and any support people required, were detailed in their support plan.
- Where other agencies were involved with people's care, care records were amended to ensure any guidance given by them was implemented by the care staff.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- We were told that everyone living at Steeple View were able to make day to day decisions for themselves. This included how they would like to have their personal care provided. One person commented, "[Care staff] always ask permission before they do anything, they are very respectful."
- People signed their care records to indicate agreement with the content.
- We continued to see in multiple care records that care staff documented seeking consent from people before providing their care and where people had declined this was also recorded and respected.



# 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 we spoke with told us they were supported and treated well by care staff. One person told us, "The carers are wonderful; I can't fault them. They are very kind and helpful. They have got to know me well. I have got [family] and they know them well too. They take interest in me as I like [my hobbies] so they like to talk about what I am doing. They respect me at all times, and they are very polite."
- People's relatives were complimentary about the care provided, one relative told us, "The quality of life [family member] enjoyed from moving into Steeple View from their family home of [many] years was immediately apparent. Having regular care staff visits and, more importantly, social contact with other [people] brought back our [family member of old happy, outgoing, and smiling."
- People were involved as much as they wanted to be in shaping their care and outcomes.

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

- People were able to make their own decisions and their views were recorded in their care records. People told us care staff always respected their opinions and acted on them. One person said, "When [care staff] visit, they are always cheerful and friendly and make me feel that I am not a nuisance. [Care staff] talk to me each day and ask my opinion about how I would like things done."
- Care records showed the service learned about the person's needs and their history, background and preferences. Care notes were person centred -, likes, dislikes, interests, wishes, aspirations and key relationships in order to provide genuinely person-centred care.

Respecting and promoting people's privacy, dignity and independence

- Many people's relatives were complimentary about the care provided, one relative told us, "The staff always appear to be efficient, caring and understand their role, suggesting that they are well-trained. Moreover, they always treat [family member] with respect and dignity."
- Staff respected the fact they were visiting people in their own home and were respectful of their right to privacy always knocking on people's front doors and waited to be invited in.
- People's personal information was stored securely and held in line with the provider's policy.



## 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 continued to have detailed care plans in place. The information was up to date and regularly reviewed and covered areas such as health conditions and medication, life history as well as physical and mental health.

#### 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.

• People had access to information that was accessible to them and their communication needs. For example, meeting minutes were available in large print. The registered manager told us that any information could be provided in formats needed such as audio recordings should these be required.

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

• People were supported to join social groups and undertake activities, organised by the staff, that met their interests.

Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to raise a concern or make a formal complaint.
- There continued to be a complaints policy and procedure in place. Records showed all complaints received had been responded to in a timely manner

End of life care and support

- The service was not providing end of life care at the time of the inspection however, the manager told us appropriate plans would be put in place should the need arise.
- The registered manager described where end of life support had been given previously. The service worked in conjunction with the GP and community nursing team to ensure people were well supported in their own home.



### 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 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.

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

- Care staff understood their roles, responsibilities and duties, and there was an established leadership structure in place.
- The registered manager told us they were supported by the provider through monthly site visits.
- The registered manager understood their responsibilities to meet regulatory requirements. Statutory notifications of deaths, other events and incidents at the service had been submitted to the Care Quality Commission (CQC) and the local authority, as required.
- care staff performance was monitored through regular one to one supervision and competency checks. Care staff understood their roles and responsibilities.

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

- We received lots of positive feedback from people's relatives about the leadership of the service.
- Care staff were complementary about the support of the registered manager and their experience of working at the service. One care staff member told us, "I have always maintained that Steeple View is a really great place to work. I have never found any issues with the management of the scheme and our current manager has always operated an open-door policy which is so important when working in such an environment as this. Any suggestions, positives or criticisms are always followed up and changes made accordingly, or feedback given."
- The registered manager had clear values about the way care and support should be provided and the expectations of staff.
- A range of governance and quality assurance systems continued to be in place to ensure that care being delivered was safe, effective and compassionate.
- There were a range of audits, which assessed the quality and safety of the service. These included medicines, notifications, people's support plans and daily communication records.

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 continued to understand their duty to be open and transparent if something went wrong. They described how they would provide an apology, explain how things would be done differently and document actions taken.
- Records showed the registered manager had communicated with families regarding any accidents and

incidents, and actions taken to mitigate the risk further.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others;

Continuous learning and improving care

- People could give their views informally through discussion, within reviews, or annual surveys.
- The majority of people's relatives were positive that they were communicated with and felt involved. One relative told us, "The last goodness knows how long has been a real nightmare for us all but I can honestly say that we have been a formidable team. Steeple View staff along with management support.... we got through the last year together! We all supported each other one hundred percent and kept everyone as safe as we could. We're all really proud of that!"