

Mancroft Healthcare Limited

Redhouse

Inspection report

9 Redhouse Road
Wolverhampton
West Midlands
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Tel: 01902742428

Date of inspection visit:
03 March 2019

Date of publication:
19 March 2019

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

About the service:

Redhouse is a residential care home that was providing personal care to four people who had a learning disability and/or autism at the time of the inspection.

People's experience of using this service:

Staff understood their responsibilities to protect people from abuse and discrimination. They knew to report any concerns and ensure action was taken. The registered manager worked with the local authority safeguarding adults team to protect people.

Staff were supported in their roles and received an effective level of training. They told us they were happy with the level of training and support they received and we observed them supporting people in a competent manner.

People were protected from harm by the provider having effective systems in place to monitor medicine management, staffing, infection control and upkeep of the premises.

Staff promoted people's dignity and privacy. Staff provided person-centred support by listening to people and engaging them at every opportunity. Staff were caring and understanding towards people. People using the service appeared comfortable in the presence of staff working in the service.

The premises provided suitable accommodation for people with communal areas and bedrooms which were personalised to people's individual interests.

Support plans were detailed and reviewed with the person and their relatives when possible. Staff worked with and took advice from health care professionals. People's health care needs were met.

People had a variety of internal activities and external activities, which they enjoyed on a regular basis.

The registered manager ran a well organised service. Relatives' views were sought, and opportunities taken to improve the service. Formal supervision meetings were carried out and staff were also supervised informally. They told us they were supported and clear about what was expected of them. Audits and checks were carried out, so any problem could be identified and rectified.

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.

The care service supported people in line with the values that underpin the Registering the Right Support and other best practice guidelines. 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.

Rating at last inspection:

The service was rated as Good at the last inspection. The inspection report for the last inspection was published on 7 October 2017.

Why we inspected:

This was a scheduled inspection based on the previous rating.

Follow up:

We will continue to carry out ongoing monitoring and will inspect the service in line with its rating.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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 caring?

The service was caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

Redhouse

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.

Inspection team:

The inspection was carried out by one Adult Social Care inspector.

Service and service type:

The service is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement. CQC regulated both the premises and the care provided; both were looked at during this inspection.

The home accommodates four people in one adapted building. At the time of the inspection, four people were living in the home.

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:

The inspection was unannounced.

What we did:

We spoke with the four people living in the service. We spoke with two relatives, the registered manager, the service manager, a senior support worker and one support worker. We observed the care and support provided and the interaction between staff and people.

We looked at two people's care records and associated documents. We looked at previous inspection

reports, rotas, audits, staff training and supervision records, health and safety paperwork, accident and incident records, complaints and compliments. We also looked at records that related to how the home was managed, such as quality audits, fire risk assessments and infection control records.

Before our inspection we reviewed all the information we held about the home, including notifications of incidents that the provider had sent us. We looked at the 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.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

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

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place and staff had a good understanding of what to do to make sure people were protected from harm or abuse. Staff received appropriate training in this area. Staff told us "I have no concerns about anything in regard to the service". They were confident that any concerns would be taken seriously by the registered manager and the provider.
- People told us they felt safe at the service, one person said, "I like all the staff, they are all very nice, I like living here". Relatives also confirmed with us they felt their relatives were safe at the home, they told us "[name] is very happy there, he is always keen to come back after visiting me" and "it's a very nice home [name] is very happy there".

Assessing risk, safety monitoring and management

- Risks to people were assessed and measures put in place to reduce those risks. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- The environment and equipment was checked regularly and had been assessed for safety.
- Emergency plans were in place to ensure people were supported in the event of a fire.

Staffing and recruitment

- Staff told us about their recruitment and the induction process they went through before being able to support people on their own. We did not check the records in relation to staff recruitment as they were checked at the last inspection and we had no concerns about this area.
- People were supported by sufficient numbers of staff, our observations confirmed they could meet people's needs in a relaxed and unhurried manner.
- The registered manager told us how they worked out the staffing levels at the service and these were based on people's needs.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed when people refused to take them or they were no longer required.
- Where people were prescribed medicines to take 'as and when required' staff had information about when to administer them.
- The registered manager investigated any errors if any were found. Staff were re-trained and had additional supervisions to prevent errors from recurring.
- The service manager carried out a robust process to ensure staff were competent to administer medicines safely. These checks were repeated formally on an annual basis. The service manager and staff also told us competency checks would be carried out unannounced every now and then to confirm staff competency.

Preventing and controlling infection

- Staff followed good infection control practices and used personal protective equipment (PPE) such as aprons and gloves to help prevent the spread of healthcare related infections.
- We observed the premises were clean and free from unpleasant odours during our inspection.

Learning lessons when things go wrong

- The registered manager responded appropriately when things went wrong. Incidents were used as a learning opportunity.
- Staff reviewed peoples risk assessments and care plans following incidents.

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

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

- Assessments of people's needs were thorough and people's goals or expected outcomes had been identified. Care plans were regularly reviewed to assess people's progress towards these. Staff helped people make plans to achieve their goals.
- People, their relatives and where appropriate their advocates were involved in care planning. Their consent was sought to confirm they agreed with the care and support provided.

Staff support: induction, training, skills and experience

- Staff told us about their experience during their induction. They said the process had been comprehensive and equipped them to support people effectively.
- Staff were competent, knowledgeable and skilled and carried out their roles effectively.
- Staff received regular supervision meetings with their manager in line with the provider's policy. Staff also told us they could discuss any issues with the registered manager at any time and didn't need to wait until the next meeting.

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

- People were supported to have a healthy balanced diet. The staff ensured people were involved in choosing meals and they were aware of people's dietary needs and preferences.
- We observed people making their own drinks and people were not restricted from entering the kitchen.
- People's nutritional needs were assessed to make sure they received a diet in line with their needs and wishes.
- One relative told us their relative had benefitted from eating more healthily since living at the service. People told us they liked the food at Redhouse.

Staff working with other agencies to provide consistent, effective, timely care

- Where people required support from healthcare professionals this was arranged and staff supported people to attend appointments. Where people found it difficult to go to different environments for appointments, the healthcare professional came to the service.
- Information was recorded ready to be shared with other agencies if people needed to access other services such as hospitals.

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

- The service had been suitably adapted to meet the needs of people living there.
- People were involved in decisions about the premises and environment and individuals' preferences were

reflected in their bedrooms and the communal areas of the service.

- Risks in relation to premises were identified, assessed and well-managed.

Supporting people to live healthier lives, access healthcare services and support

- People had access to health and social care professionals. Records confirmed people had access to a GP, dentist and an optician and could attend appointments when required. People had a health action plan which described the support they needed to stay healthy.
- People received an annual health check as per best practice for people with a learning disability and/or autism.
- People's changing needs were monitored to make sure their physical and mental health needs were responded to quickly and appropriately. Staff were aware of the signs and symptoms people displayed when their mental health was potentially deteriorating.

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The provider followed the requirements of DoLS. Three people had authorised DoLS in place.
- No one had conditions attached to their DoLS.
- Staff ensured people were involved in decisions about their care; and where appropriate knew the process to make decisions in people's best interests. Staff had received training about the MCA and DoLS.
- Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives. Staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

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

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

Ensuring people are well treated and supported; equality and diversity

- From our observations it was clear staff knew people very well and were aware of their preferences and used this knowledge when supporting them.
- Where people were unable to express their needs and choices, staff understood their way of communicating. Staff told us they show the person the options available or pictures of activities so they can make choices.
- Staff showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way.
- Relatives told us, "The home is great, I can't praise them highly enough for what they do for [name of relative]."

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

- Staff enabled people to make decisions about their care and knew when people wanted help and support from their relatives. Where needed staff sought external professional help to support decision making for people such as advocacy.

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected and all personal care was provided in private.
- People were enabled to maintain and develop relationships with those close to them, social networks and the community.
- People were supported to focus on their independence in all areas of their lives. They were supported to be independent in their ideas and choices and this meant people enjoyed freedom and control of their life.
- People were prompted and reminded of their responsibilities with regards to housework and living together and this enabled harmonious shared living. They were also offered the opportunity of staff support if they wanted this.
- People being in control and independent demonstrated the provider's values were embedded in staff culture. A member of staff told us, "We keep the guys informed about what's going on let them choose activities they want to do". They told us about different activities people were supported with, such as attending Marvel Universe live and trips to the seaside.

Is the service responsive?

Our findings

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control including end of life care.

- Relatives told us; "I am very pleased with the home" and "The home is great for [name] I can't praise them enough".
- People's needs were assessed before they began to use the service and reviewed regularly thereafter. People's assessments considered all aspects of their individual circumstances their dietary, social, personal care and health needs and considered their life histories, personal interests and preferences.
- People at the service had their care and support plans reviewed regularly. We noted everyone living at Redhouse had their placement reviewed by the local authority in the last two months.
- People and their relatives were involved in developing their care and support plans. Care plans were personalised and detailed daily routines specific to each person. Staff told us they enjoyed working at Redhouse as they enjoyed "helping the guys to live their lives, the progress they make gives me fulfilment in my job".
- The service identified people's information and communication needs by assessing them. Staff understood the Accessible Information Standard. People's communication needs were identified, recorded and highlighted in care plans. We saw on persons care plan had guidance on how staff should go through their letters with them to ensure the person understood the information in the letter. We observed staff communicating effectively with people throughout the inspection visit.
- Relatives we spoke with were all positive about the communication they received from the service. They told us "The staff will let me know how [name] is getting on and whether there are any issues."
- Staff knew people's likes, dislikes and preferences. People were encouraged and supported to be independent. One person regularly went out in the community on their own, accessing public transport to go shopping. Staff had a good understanding of people's needs and could make suggestions to people around how they could develop their skills and independence.
- People were supported to prevent ill health and promote good health.
- No-one living in the home was near the end of their lives. However, information was available in people's care plans.
- People were supported to choose activities they wished to participate in. A range of activities were available, including long walks, bowling, cinema, disco's and regular trips to events or places in the community. One person told me about a recent visit to the cinema and showed me the next film they wanted to see.
- Staff supported people to develop and maintain friendships and relationships with relatives and loved ones.

Improving care quality in response to complaints or concerns

- People were supported to provide feedback to the management team at their monthly meetings with

their keyworker. We viewed the minutes of these meetings which demonstrated people's views and opinions were acted on.

- People and relatives knew how to make complaints should they need to. Relatives told us they had never had to complain about anything but believed any concerns would be listened to and dealt with.
- There had not been any complaints. The registered manager told us about the process in place to act upon any complaints they received. They told us complaints would be used as an opportunity to improve the service.

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

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

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- Leaders and managers demonstrated a commitment to provide person-centred, high quality care by engaging with everyone using the service and stakeholders.
- Staff and the registered manager involved people and their relatives in all aspects of the service and their care.
- Staff told us the registered manager listened to them and was keen to hear ideas on how the service could be improved. They told us the registered manager was always available and approachable. Staff told us, "The registered manager and service manager are very supportive and we can discuss things at any time".

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

- The provider and registered manager demonstrated a commitment to ensuring the service was safe and high quality.
- Regular checks and audits were completed by the registered manager and service manager to ensure people were safe and were happy with the service they received.
- The registered manager had ensured they had communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.

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

- People and staff were engaged and able to speak up freely, raise concerns and discuss ideas.
- People had completed a survey of their views and they met frequently with their key worker to discuss the service they received. The feedback had been used to continuously improve the service.

Continuous learning and improving care

- All the feedback received was used to continuously improve the service.

Working in partnership with others

- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.