

Midland Heart Limited

Camoyo's Court

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

About the service:

Camoy's Court provides personal care to people who live in the community in an extra care housing complex. The extra care housing complex comprises of 32 flats. The service provides support to older people, including people with dementia, mental health problems and people with a learning disability.

The care service had been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. The values of choice, promotion, independence and inclusion, which the guidance promotes were being provided for people who used the service at Camoy's Court. This meant the people they supported with learning disabilities and autism were able to live as ordinary a life as any citizen.

On the day of our inspection 28 people were using the service.

People's experience of using this service:

People were safe, processes and practices protected people from abuse. There were enough staff to ensure people's needs were met. There were safe recruitment practices and the registered manager was recruiting staff at the time of our inspection. We observed staff had time to interact with people in a positive way. People's medicines were managed safely. Risks associated with people's care had been identified and were managed in a way that did not restrict their freedom. People were protected by the prevention and control of infection.

People were supported by staff to make their own decisions and choices. Staff were knowledgeable and understood the principles of The Mental Capacity Act. People were supported to receive a nutritious and balanced diet and their dietary needs and choices were met.

Staff received effective training to fulfil their roles and responsibilities and were supported.

People spoke positively about the care and support they received. People told us staff were kind and caring, maintained their dignity and respected them.

Care plans were developed with the people who used the service. People received personalised care that was responsive to their needs.

There was a complaints procedure available which enabled people to raise any concerns or complaints about the care or support they received. People told us they had no concerns but would not hesitate to talk with staff if required.

People's feedback was used to make changes to the service.

The home had a registered manager who conducted a range of audits in areas such as medicine management, health and safety, care plans and daily records documentation. Actions raised as part of the audits were addressed.

More information in Detailed Findings below:

Rating at last inspection:

This was the first inspection since the new provider registered with CQC in February 2018.

Why we inspected:

This was a planned inspection based on the registration date. The service has met the characteristics of Good in all key questions.

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 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.

Camoy's Court

Detailed findings

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 checked 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.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Camoy's Court is an extra care housing complex. The service provides care and support to predominantly older people, including people living with dementia, mental health problems and learning disabilities. It provides personal care to people living in their own flats in an extra care housing complex. 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 and support.

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.

What we did:

Prior to the inspection visit we gathered information from a number of sources. We also looked at the information received about the service from notifications sent to the Care Quality Commission by the registered manager. We had not requested the provider to complete 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. However, we spoke with other professionals who had involvement at the service, to gain further information about the service.

We spoke with ten people who used the service when they were together in the communal area of the extra care housing complex. We visited two people in their own flats, discussed their care plans and observed staff interactions. We also spoke with one relative.

We spoke with five staff including care support workers, the team leader, the wellbeing advisor and the registered manager. We looked at documentation relating to two people who used the service, two staff files and information relating to the management of the service.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they were safe. Comments included, "Staff are very good at reassuring me, this makes me feel safe." "The staff really help me, I am definitely safe here."
- The provider had a safeguarding policy in place. Safeguarding concerns had been reported appropriately following procedures.
- Staff understood the importance of safeguarding adult procedures. Staff we spoke with knew how to recognise and report abuse and were aware of the correct procedures to follow.

Assessing risk, safety monitoring and management

- Environmental risk assessments were completed to ensure staff safety in people's own flats. Regular safety checks took place to help ensure any equipment used was safe.
- People had evacuation plans in place and staff were knowledgeable on procedures to follow.
- Care plans contained assessments of risk to people and provided instructions to staff to reduce the likelihood of harm to people when being supported. People told us the staff were very good, one person said, "The staff know what I need and are very good."

Staffing and recruitment

- Appropriate recruitment checks were conducted prior to staff starting work, to ensure they were suitable to work with vulnerable people. Staff we spoke with confirmed this.
- There were enough staff on duty to support the needs of people and keep them safe. Although staff told us they had been covering some shifts as they had been short staffed. However, they knew the registered manager was recruiting additional staff.

Using medicines safely

- Medicines were managed safely. We looked at medicine management in two people's own flats when we visited them. We saw they were stored safely, appropriate documentation was in place. Staff recorded clearly when medicines were administered. Staff we spoke with understood how people liked to take their medicines.
- People told us they were happy with the support they received to take their medicines. People's comments included, "The staff support me with my medicines, that is what I prefer." "The staff ensure I take my medicines on time, I would forget if the staff weren't there."

Preventing and controlling infection

- The service had systems in place to manage the control and prevention of infection.
- Staff were observed using good infection control and prevention practices. Staff had personal protective equipment's with them at all times including, gloves, plastic aprons and hand gel to use if unable to wash

their hands with soap and water.

Learning lessons when things go wrong

- The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to prevent future occurrences.
- Risk assessments and care plans were reviewed following incidents to prevent re-occurrence.
- Staff we spoke with were aware of their responsibilities. Staff told us good practice and any errors or near misses were shared at team meetings and lessons learnt to improve the service.

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

Good: 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 assessed people before any service was provided, this was to make sure staff could meet their needs. People told us staff were very good, understood their needs and provided care and support in line with their needs.

Staff skills, knowledge and experience

- Staff were trained to be able to provide effective care. Staff told us the training was good. One staff member said, "We are encouraged to attend additional training to expand our knowledge. The company are very good."
- People we spoke with were confident in the abilities of staff. Their comments included, "The staff are very good." "The staff are patient, it is lovely here."
- Staff were supported and supervised. This ensured they had the skills and knowledge to support people. Staff said, "We are very well supported, we are a great team."

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

- People's care files contained information about their dietary requirements. This included what they liked, disliked and any foods which should be avoided. Staff supported people with meals where required and ensured any concerns were highlighted and advice sought.
- People told us the staff supported them with their meals. Some people had their meals in the communal areas provided from the kitchen in the extra care housing complex. We sat with people during the lunch time meal. We saw people were supported to receive a balanced, nutritious diet.

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

- Staff were aware of procedures to follow if they identified a person was unwell or had deteriorated. They explained how they would ensure it was reported and that relevant health care professionals were contacted. We found if someone needed to go to hospital a system was in place to ensure all of the relevant information would be sent with them.
- Health care professionals we spoke with told us the staff worked well with other organisation to ensure people's needs were met.

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

- People were supported in their own flats; therefore, the design and decoration were not relevant to this service as CQC do not regulate the accommodation.
- Staff ensured specialist equipment was available when needed in people's own flats to deliver safe, effective care and support.

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

- When people required support from healthcare professionals this was arranged by staff with the person they were supporting. The provider employed a well-being advisor who liaised with health care professionals to ensure people were appropriately supported. On the day of our inspection they were working with a person's GP to ensure effective end of life care and support.

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

- The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 registered manager and staff were aware of their responsibilities in respect of consent and involving people as much as possible in day-to-day decisions. Staff were also aware that where people lacked capacity to make a specific decision then best interests would be considered.

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

Good: 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

- Staff were kind and spoke to people in a friendly manner. It was clear from speaking with staff and people they supported that staff knew people well. We observed staff took time to explain things to people in a calm and patient way. One person said, "The staff are so patient with me, they are lovely."
- People told us staff respected them. We saw staff spoke to people in a respectful manner and knew how to communicate effectively to meet people's communication needs.
- People told us they were very happy with the staff. People we spoke with all told us the staff were kind and caring. One person said, "It is lovely here, you can't beat it. The staff take their time they don't rush it is good care."

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

- Staff supported people to make decisions about their care. We saw staff asking for consent from people before supporting them, they clearly explained to people what they wanted to do and why. People told us they were always involved in decision making. One person said, "The staff ask me what I want, they wait for me to decide, I have no concerns what so ever."
- People's diverse needs were recorded and staff we spoke with demonstrated a good knowledge of people's personalities, individual needs and what was important to them. One staff member said, "We get to know people, we are given time, it is important to know people well to be able to meet their needs."

Respecting and promoting people's privacy, dignity and independence

- All people told us that staff respected their privacy and dignity. One person said, "staff respect me, give me time to do things, there is no rush." We observed staff respecting people's privacy, they closed curtains and doors in their flats while providing personal care and support.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that services met people's needs

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

Personalised care

- People's care plans recorded their likes, dislikes and what was important to the person. The plans were being further improved and updated at the time of our inspection so they were more person-centred. This was being carried out with the involvement of individuals.
- Staff we spoke with were knowledgeable about people's preferences and could explain how they supported people in line with this information. Staff told us the care plans were in people's flats to follow and were kept updated.
- People received information in accessible formats and the registered manager knew about and was meeting the Accessible Information Standard. From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard. The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss. Staff were aware of how to present information to people for them to understand. People's communication needs were known and understood by staff. People's care plans included details about their communication needs. We observed staff communicating effectively with people they supported.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place. People who used the service told us they would feel able to raise any concerns with staff. People we spoke with told us they had no concerns.
- The provider and registered manager had put systems in place to make sure any concerns or complaints were brought to their attention. This was because they were committed to listening to people to ensure continuous improvement of the quality of the service.

End of life care and support

- People were supported to make decisions about their preferences for end of life care if they wished. Care records showed discussions had taken place with people and their relatives. Their wishes had been recorded. One person had been placed on their end of life pathway on the day of our inspection, we saw staff liaising appropriately with professionals to ensure the person was comfortable, pain free and their wishes were respected.

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

Good: 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

- The registered manager and staff were passionate about providing care and support that achieved positive outcomes for people.
- The quality assurance systems which were in place to monitor the service had been effective in identifying areas for improvement.
- The home was well run. The provider and the registered manager were committed to providing high quality, person-centred care.

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

- There was a registered manager who was supported by team leaders. The registered manager was registered at two locations.
- People who used the service received good quality person centred care.
- There was an open and honest culture in the service. People spoke highly about the registered manager and staff. One person said, "All the staff are lovely."

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

- People who used the service were involved in day to day decision about the service and their support.
- The registered provider sent out quality monitoring questionnaires every three months. People using the service and relatives had completed these surveys. We saw the last returned surveys and all the feedback was very positive.
- The registered manager told us that feedback was used to continuously improve the service.
- Staff meetings were held to get their views and to share information. Staff told us the meeting were held regularly and were very effective.
- The registered manager made themselves easily available to people using the service, relatives and staff.

Continuous learning and improving care

- The registered manager understood their legal requirements.
- The registered manager demonstrated an open and positive approach to learning and development.
- Information from the quality assurance systems were used to inform changes and improvements to the quality of care people received.

Working in partnership with others

- The registered manager had developed links with others to work in partnership to improve the service. This included commissioners, health care professionals and relatives.