

Housing & Care 21

Housing & Care 21 - Deighton 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

This announced inspection took place on 17 February 2016. At our last inspection visit in June 2013, the provider was meeting the regulations we looked at. Deighton Court is an extra care housing provision for people aged 55 years and over. It provides community support and personal care to people in their own homes living within the service.

There was a registered manager in post at the time of our inspection. 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.

People told us they felt safe with staff when staff were in their homes providing care. Staff knew how to recognise the signs of potential abuse and of the systems used to report any issues. People's individual risks had been identified and assessments had been completed to ensure people received safe care. People received calls from staff they knew, visits from staff were on time and for the full length of time agreed. The provider had systems in place to ensure people received their calls when staff were on leave or off sick. People were supported with their medicines where needed by staff who had received training.

People received care and support from staff who knew them well. Staff were provided with training and information to support people's care and health needs. The provider had safe recruitment processes in place to reduce the risk of unsuitable staff being employed.

Staff understood the need to gain people's consent to care before providing any support or assistance. Staff knew how to support people's choices. People told us staff were kind and caring and said that they received care from a consistent staff group which ensured a continuity of care. People said they were supported by staff to maintain their independence and their dignity and privacy was always respected by staff.

People said they received care that met their needs and felt fully involved in developing their care plan. People said any issues were responded to quickly by the provider. People were happy that their care needs were met by staff who knew them well. People knew how to raise issues with the provider and were confident any concerns would be addressed.

People and staff were positive about the service and said the service was well managed. The provider listened to people's views and feedback to continually improve the service. Regular checks were completed to review and monitor the quality of the care that people received; this included observing staff practice and reviewing records.

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.

People were protected from harm because staff understood their responsibilities to protect people from the risk of abuse. Risks to people were assessed and managed safely. People's needs were met by a sufficient number of staff. People were supported with their medicines where needed by staff who had been trained and had their competency tested.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who had the right training and skills to meet their needs. People's rights were protected because staff were aware of how to protect people's choices. People were supported to access healthcare professionals as required.

Is the service caring?

Good ●

The service was caring.

People told us staff were kind and caring. People were happy with the care they received which met their needs. They said that they felt fully involved in making decisions and choices about how their care was delivered and their dignity and privacy was respected.

Is the service responsive?

Good ●

The service was responsive.

Care plans were in place that showed people's care and support needs. Changes in people's needs were quickly identified and appropriate action taken. People had access to a wide range of different activities within the service and local community. People felt supported and confident to raise any issues or concerns.

Is the service well-led?

Good 

The service was well-led.

People were happy with the quality of the service and said it was well-led. People said the registered manager and her team were friendly and approachable. People and staff felt confident to share their opinion about the quality of the service, to enable the provider to make improvements. Quality audit systems were in place to monitor the quality of care people received.

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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 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 took place on 17 February 2016 and was announced. The provider was given 48 hours' notice because the location provides domiciliary care services we needed to be sure that someone would be in. The inspection team consisted of two inspectors. As part of the inspection, we reviewed the information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law. We also contacted the local authority for information they held about the service. We use this information to inform our inspection. Before the inspection, the provider completed 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.

We spoke with eight people who used the service, three relatives of people who used the service. We spoke with five members of staff and the registered manager. We looked at four people's care records, records relating to medicines, two staff files and records relating to the management of the home. We also carried out observations across the service regarding the quality of care people received.

Is the service safe?

Our findings

People we spoke with all said that they felt safe at the service. One person said, "I feel safe here, staff are always around and they are available during the night". Another person said, "I feel safe here the doors are locked at night and I know someone is about if I should need help". A third person said, "Staff check on me every-day, I truly feel very safe here everything about the service and care is marvellous, it's a very safe place." Relatives we spoke with confirmed people's views, one relative said, "I definitely feel the place is very safe, everything about it is good." Staff we spoke with told us they had received training in safeguarding and were knowledgeable in recognising signs of potential abuse. One member of staff said, "There are different types of abuse emotional, physical, financial and verbal. If I witnessed anything I would make sure the person was safe, record what I saw and report to my line manager." Staff were also aware how to escalate concerns about people's safety to the provider and external agencies such as the local safeguarding authority or CQC. We saw that where incidents had occurred concerning people's safety, staff followed the provider's procedure to protect people from the risk of abuse.

People we spoke with said that they had been involved in all aspects of developing their risk assessments. One person told us, "I discussed any potential risks I have or may have and if there were any risks to the carers when I came into [Deighton Court] it was to make sure I was cared for safely." Relatives we spoke with confirmed any potential risk to their relative's well-being had been identified and staff used appropriate methods or equipment to make sure people were safe. We looked at people's care records and saw that risk assessments had been completed. For example, where people had restricted mobility we saw information was available for staff to refer to; such as how to support the person when moving around their home and transferring in and out of chairs and bed. Staff told us about how they managed risks to peoples and they knew how to minimise these. For example, staff were able to explain the process for assessing the use of slings for those people who required the use of a hoist.

People told us that they received visits from staff that they knew and visits were usually on time. They said staff stayed the expected length of time for the visit. One person said, "The staff are great, nothing is too much trouble and they generally keep to time. I have not had a call missed. I am very happy with the care I receive." This was confirmed by the timekeeping records. People we spoke with and records we looked at confirmed that there was enough staff to care for people living at the service. Staff and the registered manager confirmed that during periods of sickness or annual leave additional hours were offered to existing staff. The service had an additional contingency plan of using staff from different sites if required to ensure consistency of staff and people did not experience missed calls.

We looked at two staff member's files. One member of staff said, "I completed an application form, had two employment and two character reference checks along with a DBS check before I started my job here." Files confirmed the provider had completed the appropriate pre-employment checks before the staff members started work. These included criminal records, references and proof of ID checks.

People were happy with the support they received with their medicines. One person said, "I have had no problem with my medicines I always get them when I need them." Staff we spoke with gave an accurate

description of how they should prompt medicines. They also confirmed that they had received appropriate training and had their competency checked by management to ensure that they were competent to administer medicines. Records we looked at confirmed this.

Is the service effective?

Our findings

People spoke positively about the care and support they received. They said staff were skilled and competent in their role. One person said, "They [staff] know me very well, they know exactly how to meet my needs." Another person said, "They [staff] know what they are doing."

Staff we spoke with said that they had received training which enabled them to feel confident in their job. They told us additional training was provided when it was required or identified as an area that needed improving. For example, medicine training to ensure staff had the appropriate skills to administer medicines. Staff said when they started in their job they completed an induction which included shadowing experienced members of staff. One person said, "When I first joined I had a meeting every week with the registered manager and also had a discussion every day this enabled me to learn the role and be competent in my job." At the time of our inspection we saw newer staff were completing the care certificate award which provided them with training and knowledge to carry out their roles. Staff we spoke with said that they felt very supported by the registered manager and the management team and that they were "Always available to speak with." One staff member said, "The registered manager is very supportive and I receive regular supervisions [registered manager] has brought the best out of me." Staff said that they had regular opportunities to discuss any concern or their practice at one to one meeting or team meetings and had spot checks completed. Any issues that were identified through these checks were discussed with staff during their one to one meeting. Staff said that they felt supported and encouraged to develop their skills by the registered manager.

People we spoke with said staff always asked them for consent before carrying out any care or support. One person said, "Staff always check with me before they do anything and I will say yes or no. They always ask." People were supported to make choices and decisions and we saw that staff demonstrated an awareness of the importance of respecting people's choices and how they enabled people's decision making. A member of staff said, "If people refuse care that's ok, I might try to encourage them, offer a different option or just have a chat and ask again. I would let the manager know if I had any concerns though."

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 interest 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. We checked whether the service was working within the principles of the MCA and found that it was. We found that the management team and care staff we spoke with demonstrated knowledge about people's rights and knew what steps they should take if it appeared that someone's ability to make decisions was declining.

People we spoke with told us they did not require support from staff with their diet. This was because they maintained it themselves or support was provided by their family. People told us they used their own equipment in their homes and were able prepare meals of their choice. Some people told us they enjoyed

the restaurant facilities at the extra- care service. One person said, "The food [from the restaurant] is beautiful every-day." Some staff we spoke with said they supported people with food preparation and assisted them with shopping. Staff said people would tell them what they wanted to eat and staff would sometimes prepare and cook for them. People said that staff made sure that they had sufficient to drink. We looked at care records and saw that where people had specific dietary requirements these were recorded and guidance was provided on how to support people in this respect.

People told us they were supported by staff if required to access a range of different healthcare provision within the community. People said if they were unable to access community based healthcare provision they were able to request for it to be delivered within the extra-care service. One person said, "[Staff] will call the doctor if required and if it is an option will take you." People's care records showed that where contact had been made with healthcare professional's advice given was reflected within the care record. Staff we spoke with said that they monitored people's needs and informed their manager if they "noted any change in a person's health or support need." Staff told us they understood the need to seek emergency help when people needed this

Is the service caring?

Our findings

People told us staff were kind and caring. One person said, "[Staff] look after us well and are happy to help us anytime." Another person told us, "Staff are golden and [I am] very happy living here." A third person said, "The staff are marvellous so very kind they will do anything for you." A relative we spoke with said, "The staff are very good and very caring to [person's names] needs I am very satisfied." People we spoke with told us that they knew the staff by name that cared for and supported them and felt comfortable with them. One person said, "We have a good laugh and [staff members name] sings to me we also go out shopping the staff are lovely and very kind." Other people we spoke with told us about staff spending time talking with them and making sure they were happy with the way their care was being provided. Staff we spoke with said that they knew the people they supported very well and they were able to give examples of how they supported people. One member of staff said, "I know [person's name] very well and know what they can and can't do and I am led by them."

People said that they felt involved in the way their care was provided. They told us that they had information from the service in their homes. We saw that information about the service such as notice of tenant meeting dates and complaints policy was also available in the reception area of the extra-care service. People confirmed that they had the information they needed to make informed choices and said if they had any issues they said they would contact the office. One person said, "We are very well informed all the information is available and if you are uncertain about something all you need to do is ask." People we spoke with said that they were able to make choices regarding their daily lives. One person said, "I make a choice in everything that I do what I eat, drink, what I wear and what I do with my time. Staff help me if it is needed."

People told us that the extra-care service supported them to maintain their independence along with providing support to ensure people remained safe. One person said, "I do as much as I can for myself. That's what so good about living here if you don't want to cook there is a restaurant and a separate laundry room." We saw that staff supported people to remain independent by supporting people with their shopping trips or accessing the local community.

People said that staff delivered care in a respectful way. One person told us, "Staff always allow me time and will close the curtains for my modesty." People lived in individual flats within the extra care service and had their own keys to their homes which ensured their right to privacy. We observed in the communal areas of the service staff treated people with dignity by talking to people in a polite and respectful manner, listening and responding appropriately to any requests.

Is the service responsive?

Our findings

People and relatives we spoke with said that they were involved in all aspects of their care planning. Everyone we spoke with said that their care was planned with them and they were asked questions about their preferences and what care and support was required. One person said, "They [staff] sat with me to develop what help I might need and explained things to me. They [staff] will phone every day as well." One relative told us about a change in the health of their relative receiving support from the service. They said staff talked to them about the different options available which included input from outside agencies to ensure the person's needs continued to be met at the service.

Assessments were undertaken to identify people's support and care needs. Care plans were developed outlining how these needs were to be met. We saw that care plans were reviewed if people's needs changed or any changes were made to the times of visits. People received care that was responsive to their individual needs; the registered manager told us about a person who required the support of two staff for a period of time; and how the service was accommodating in meeting this requirement. People told us and we saw from records that people received support from a consistent group of care staff. People said that staff knew their individual preferences and these were accommodated. One person said they preferred their care to be provided by female staff and this was met. Staff we spoke with were knowledgeable about the people they supported and were able to describe to us people's preferences as well as their care and support needs. One staff member said, "I know [Person's name] likes and dislikes and how they like things done." We spoke with the person who was receiving care from this member of staff who confirmed this. Staff explained to us how information was shared about changes to people's individual needs. This was done during a daily handover. Staff told us they had specific communication systems to document any changes in a person's health or behaviour. This information was used to assess what action was to be taken such as contacting family members or external healthcare professionals.

People told us they undertook a range of different activities within the extra-care service or in the community. People told us about the 'bric a brac' shop which was run by people who lived at the service. One person told us, "I work in the shop and the money we raised last year was used for people to plant hanging baskets and trips." People told us they enjoyed the many activities arranged including coffee mornings, knitting groups and bingo." Another person told us about the hobbies room and the different things people enjoyed doing such as board games, darts, reading and crafts. We spoke to one person living at the service who was running painting sessions for people to take part in. Other people we spoke with accessed community facilities such as swimming baths and bowling. We saw that the registered manager had built links with the community and a day centre was opening on the site which could be accessed by people living at the service.

People told us that they felt comfortable to approach and speak with staff about any concerns or worries. People we spoke with said that if they had any need to make a complaint they would speak with staff or the managers of the service. One person said, "I have not got any complaints with this place, if I did I would speak with the manager or come down to the office. The complaint's policy is on the notice board." Staff we spoke with were able to explain how they would handle complaints. They said that they would inform the

registered manager or a member of the management team. They said that they felt confident concerns would be fully investigated. One member of staff said, "I would inform the manager straight away. I know they would take any concerns seriously and deal with them." We saw that the complaints policy was clearly displayed on the notice board in the reception area along with a suggestion/comments box. We looked at the complaints received and saw that these had been investigated and responded to appropriately.

Is the service well-led?

Our findings

People, relatives and staff spoke positively about the service and the management team. One person said, "It's very well run could not ask for better. Everything about [Deighton Court] is great." Another person said, "Staff are always available to speak to should you need to and the manager is very approachable, I see her about often."

People and staff told us that there were opportunities to discuss any concerns, issues or make suggestions about how to improve the service or do things differently. One person said, "We have tenants meetings and questionnaires are also sent out from the organisation [provider] for us to complete asking for our views." The registered manager told us and we saw that regular meetings with people living at the service took place and also feedback was given in relation to the questionnaires completed. People and staff told us the atmosphere and culture of the service was open and transparent and everyone felt that the registered manager encouraged all to be involved in the design and delivery of services.

People and staff spoke positively about the registered manager and said they "spent time listening and talking and knew them [people] well." Everyone we spoke with felt confident to approach the registered manager or a member of their team at any time. A person we spoke with said, "The manager is very easy to talk to, really listens, you can approach her anytime and know things will get sorted." A relative said, "The manager is very approachable not had a lot of issues here but she has been very responsive." One member of staff said, "[registered manager] brilliant, always there for you she is visible and approachable." Another member of staff said, "[registered manager] cares about the people who live and work here."

The culture of the service supported people and staff to speak up if they wanted to. Information about raising concerns or whistle-blowing was clearly displayed within the reception areas. Staff we spoke with demonstrated a clear understanding of their role and responsibilities and were aware of the provider's whistle-blowing policy including raising any concerns to external agencies if required. Whistle-blowing means raising a concern about a wrong doing within an organisation. Staff told us they had regular one to one meetings and attended staff meetings. These were an opportunity to share information and address any areas of concern that was relevant to their roles and responsibilities. The management team at the service also undertook spot checks to review the quality of service and assess staff competencies within their role.

The registered manager demonstrated good knowledge of the people using the service, staff members and their responsibilities as a registered manager. This included the requirement to submit notifications when required to CQC when certain events occurred such as allegations of abuse. We saw that the management team regularly audited the records to ensure the safety and quality of the service provided. These included medicines and staff training. We looked at the audit systems and saw that they were completed regularly and where action was needed we saw evidence of action being taken for example, the registered manager had developed a system to monitor medicines which had resulted in medicine errors being identified sooner. We saw that there was a system in place to identify patterns and these were used to improve the quality of service people received. One member of staff said, "The service is improving all the time due to the

management and new recording and reporting system." Another staff member said systems and processes "Have changed for the better."