

Making Space

Poppy Court Extra Care and Outreach

Inspection report

Poppy Court, Futures Walk
Coventry
CV3 3DN

Tel: 02475186925

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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?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Poppy Court Extra Care and Outreach is an extra care housing scheme which has five locations within Coventry that fall within the Poppy Court registration. These locations have one or two bedroom self-contained flats that can be rented by younger adults and older people. The service can support people with personal care which is provided by a team of care staff through pre-arranged care calls. At the time of our inspection there were a number of people receiving personal care across the locations within the service.

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

The provider had systems to monitor the quality and safety of the service to help identify any areas that required improvement. However, these systems had not identified areas for improvement we had found such as records management. Records related to safeguarding and complaints procedures were not sufficiently clear and medicine records did not consistently show how the medicines had been managed.

Quality assurance systems ensured people had opportunities to share their views about the service they received. The management team worked with other organisations including social workers and health professionals to benefit people.

The registered manager demonstrated a good understanding of their regulatory requirements. No complaints had been received about the service. Staff spoke positively about the culture of the service and morale. The provider demonstrated a commitment to sustaining a positive organisational culture to benefit people and their staff.

Staff completed training in a range of areas including training linked to some people's specific healthcare needs. This helped to ensure any potential risks were identified and acted upon.

People's needs were assessed before they started using the service and people told us staffing arrangements and the care calls they received were sufficient to meet their needs.

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. People and their relatives described staff as caring and approachable.

People told us they felt safe with the staff that supported them. People received personalised and responsive care. Staff knew people well and told us how they involved people in decisions about their care to ensure they received support in ways they preferred. Care records contained information to help staff provide the care and support people needed in line with their wishes.

Staff followed infection control procedures in line with national guidance for reducing the spread of COVID-19. People and relatives said staff wore personal protective equipment (PPE) during care calls.

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

Rating

This service was registered with us on 1 November 2019 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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?

Requires Improvement ●

The service was not always well led.

Details are in our well led findings below.

Poppy Court Extra Care and Outreach

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 Health and Social Care Act 2008.

Inspection team

The inspection visit was carried out by two inspectors and an Expert by Experience. An Expert by Experience is someone who has experience of using this type of service.

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 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 support at this service.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. 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 available to support the inspection.

Inspection activity started on 13 June 2022. Inspectors visited Poppy Court Extra Care and Outreach offices on 13 June 2022. The Expert by Experience telephoned people and relatives to obtain their views of the service also on 13 June 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used information gathered as part of monitoring activity that took place in December 2021 to help plan the inspection and inform our judgements.

We used all this information to plan our inspection.

During the inspection

During our visit we spoke with the registered manager and six care staff. We spoke with three people who used the service and eight relatives. We reviewed a range of records. This included policies and procedures, medicine records, three people's care records, four staff recruitment records, training records, quality audits and checks the managers completed to assure themselves people received a safe and good quality service.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- A safeguarding policy was in place but there was no clear reporting process procedure seen for staff to follow if needed. However, staff understood how to recognise signs of abuse and who to report these to. The registered manager understood their responsibilities of reporting any safeguarding concerns to the relevant agencies.
- People told us they felt safe with the staff that supported them and relatives felt their family members were supported safely. One person told us, "I am very safe here, they look after me and they have to use a keypad (with a coded lock) to get into my flat."
- A relative told us, "The care is exceptionally good, [Name of person] is very safe there. During Covid-19 we couldn't visit, and I knew they were safe. The front door is locked and there is a visitors book and the garden is very secure too, it's very safe."

Assessing risk, safety monitoring and management

- Risks associated with people's care had been identified and recorded in risk assessments and care plans to support staff in managing people's needs safely.
- Staff had a good knowledge of risks associated with people's care such as people at risk of falling or people living with health conditions. They knew how to manage risks to keep people safe.
- A falls policy was in place to support staff on how to respond if a person had fallen. A relative told us how staff had been quick to respond. They stated, "The paramedics were called and [Name of person] was in hospital for 48 hours and then discharged back to Poppy Court and the care was in place straight away."

Staffing and recruitment

- People were positive about the staff team and told us they received care calls when they expected them. One person said, "The carers come when they say they will, they are on time.... they stay as long as I need them and sometimes they sit and chat but they chat when they are here anyway."
- Recruitment checks including a Disclosure and Barring Service (DBS) check were completed for new staff to ensure they were safe and suitable to work with people. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff told us there were enough of them to support people's needs. One staff member told us, "If I need help then [staff member's name], who is a team leader comes on the floor to help us out".

Preventing and controlling infection

- People were protected from the risk of infection by processes in place.

- People told us staff always wore the appropriate personal protective equipment (PPE).
- The service followed current COVID-19 guidance, including regular staff testing.

Using medicines safely

- People were supported to take their medicines where required but where codes were used on the MAR these were not always clearly defined with an explanation of what they meant so it was clear how the medicine had been managed. The registered manager investigated this and explained what had happened with the medicines. They acknowledged the need for records to be made clearer.
- People who wished to have support with their medicine were supported by staff during care calls. A relative told us, "They are very on the ball with tablets. [Name of person] was holding tablets in their mouth and sometimes refusing and the carers noticed and so they spoke to the doctor and the medication has been changed from tablets to liquid."
- Staff had received training on how to manage medicines safely and had access to a detailed medicines policy if needed.

Learning lessons when things go wrong

- The provider ensured when anything went wrong events were investigated and action taken to prevent them reoccurring. They were able to provide examples of this which included improved communication amongst staff.
- Staff were informed about any learning through regular communication from their management team and in supervisions

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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 were assessed when they started to use the service so that any care and support needs were identified, and arrangements made to ensure they were addressed.
- People told us they had been involved in decisions about their needs and care calls.
- Staff knew how people wished to be supported and told us, "We talk a lot to our residents, we ask them to find out what they need."

Staff support: induction, training, skills and experience

- People and their relatives felt staff had the skills they needed to provide effective care. One person said, "My carers encourage me to walk and they help me, sometimes I have very bad pain in my legs but I still need to walk and they make sure I do."
- A relative told us, "The carers are brilliant... I have trusted them totally to look after [the person's name]. I know that they would make sure [Name of person] was OK."
- The registered manager said, "We have got a system that does flag when staff training is due to be updated." Staff told us they had access to regular training and support to update their skills.

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

- People were supported with their food and drink needs through pre-arranged care calls, this included any support to take them to the restaurant located within the building if people wished to access this.
- A relative told us, "There is a dining room (restaurant) and [Name of person] has a hot meal at lunch time and then sandwiches brought up to their room at tea time." Another stated, "[Name of person] prefers their own food (microwave meals) but the carers always offer them tea or coffee and they always have a drink. The carers are trying to encourage them to eat."

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

- Staff provided examples of how they worked with other professionals, such as district nurses and GP's to help support people's needs. For example, staff told us how they monitored people with sore skin and kept in touch with the district nurses to ensure any risks of additional skin damage were effectively managed.
- People living at Poppy Court had access to a range of social activities they could choose to attend to support their health and wellbeing needs.

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 MCA 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

- The management team demonstrated an understanding of the requirements of the MCA and action had been taken to ensure people agreed and consented to their care and support.
- People and relatives confirmed staff sought consent before providing any assistance. Relatives confirmed their involvement where people had requested this. One relative said, "We have had to have a lot of meetings (with Poppy Court) in the last few months as [Name of person] has deteriorated. We've had regular reviews with the social worker involved too."
- Staff had completed MCA training and demonstrated some knowledge and understanding in this area. One staff member said, "We ask them (people) if its ok to do whatever such as shower or medication. We are constantly talking to them. People with dementia are still at the point they can make their own decisions. Even if it was an important decision such as operation, they could still make that decision. Families are involved."

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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 told us they were treated well by the staff who supported them and relatives were positive in their comments of care staff. Comments included, "The care team are all really nice. I know them all" and "The carers are kind [Name of person] likes them and they will sit and have a chat when they visit."
- Staff knew people well and were able to explain people's likes and dislikes to help ensure they supported people how they preferred.
- Staff spoke kindly of the people they supported. We asked care staff what made them caring, one said, "I just think it comes within your heart, you need to be smiley, you need to be there for them. I like to go in smiling and happy, things like that. If you are not caring, you do not need to be here."

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

- People said they had been involved in developing their care plan about how they wished to be supported when they started to use the service. Some recalled this being updated.
- One person said, "We have been invited to the care plan meetings and we are involved in all the discussions." Another said, "We had a care plan in the beginning with the social worker but I don't recall anything since, I think they just keep it up-to-date as they go along"
- Staff assured us they understood the importance of promoting equality and treating people equally. Staff spoke of supporting people when they needed help with decisions. One staff member said, "On a bad day, I have to give suggestions for food and help [Name of person] decide. I show them the different foods."

Respecting and promoting people's privacy, dignity and independence

- Staff completed training so that they understood how to maintain people's privacy, dignity and independence when delivering personal care.
- Relatives told us, "The carers always encourage [Name of person] to do whatever they can do" and, "They encourage [Name of person] to be independent and do things and [Name of person] is so much more positive."
- Staff gave examples how they supported people's independence, for example, one staff member said, "Even if it's just making a cup of tea and you say, come and help me." They went on to explain how they encouraged people to pick out their own clothes and wash areas they could reach during personal care.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated Good. 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

- Overall, people told us they received a good standard of care and support which was personalised and met their needs and preferences. People received care calls at the times they had agreed.
- Individual care files contained a range of person-centred information to support staff in delivering personalised care.
- Staff confirmed they visited the same people which helped them become familiar and confident to support people in the way they preferred.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager told us that information was available to people in an easy read format if needed to enable people to easily access information. They stated most people had requested information about the service to be either face to face or in writing to them.
- Care plan records indicated people's communication needs so these could be supported, for example, one stated, "I am able to express my needs and wishes, likes and dislikes." Another stated they preferred information in an easy read format.

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

- A range of activities were available to people living at Poppy Court to help maintain people's wellbeing and reduce social isolation.
- A relative told us, "[Name of person] went to the Jubilee party. I asked the carers to take [Name of person] specifically and they did".

Improving care quality in response to complaints or concerns

- People told us they had no complaints about the service. Complaints records showed there had been no recent complaints from people receiving a personal care service.
- A complaints procedure was available, but we noted this lacked specific detail to support people if they wished to raise a complaint. The registered manager said they would address this.

- People told us if they had any concerns, they would speak with the staff that supported them. One person said, "The manager is [Name], well she might be the senior carer. She's very helpful, and if there was an issue, I would phone straight away, I can always talk to her."

End of life care and support

- Staff told us they would be guided by end of life care plans in relation to any support people wished to receive at this time. They told us they would talk to people and involve them in any decisions made.

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.

This is the first inspection for this newly registered service. This key question has been rated Requires Improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Audits had not identified that some of the provider's procedures were not sufficiently clear. For example, the procedures to manage complaints and safeguarding concerns lacked sufficient detail to support people and staff in understanding the processes to follow.
- Audit systems to check staff recruitment was managed safely had not been fully effective. Not all staff recruitment records were available on staff files to demonstrate they were in place such as two written references. The registered manager told us some information was held by their Human Resources (HR) department. The registered manager obtained information to confirm checks were in place during our visit.
- Medicine audit checks had not identified records were not consistently clear to show how medicines had been managed. The registered manager acknowledged the need to ensure records reflected practice to demonstrate safe management.

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

- Whilst people told us they experienced person centred care, staff had not always completed training linked to people's healthcare needs to help support this. For example, training related to Chronic Obstructive Pulmonary Disease (COPD) and diabetes.
- People felt involved in their care and people and their relatives spoke positively of the staff. They felt at ease to approach staff with any concern they had. One person said, "[Staff name] is lovely I can always talk to her. She will do anything for you."
- Staff spoke of a positive culture at Poppy Court. One staff member said, "It's a lovely place to work, people are well cared for and everyone is a happy team."

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; Continuous learning and improving care

- The registered manager demonstrated a good understanding of their role and regulatory requirements. In addition, they recognised the importance of being open and honest when things went wrong. Learning had been identified and shared with staff following incidents, to prevent reoccurrence.
- Audits and checks completed by the provider enabled them to have some oversight of the service, continually learn and make any necessary improvements. For example, staff told us audits of their competence were completed following training to check their learning. Checks were also made that staff completed everything as instructed in people's care plans.

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

- People were able to share their views of the service through the completion of an 'Experience Survey'. The results of this survey showed a high level of satisfaction by people who used the service. Most people we spoke with said there was nothing they would improve. One person said, "I think they could improve the communication between carers when they change carers through the day, but I would give the care eight out of ten."
- People's care and support was reviewed regularly to ensure the service continued to meet their needs effectively.
- Staff told us they regularly involved people in decisions about their care to ensure their needs were met. One staff member said, "We have a person who we went to see at 16:30 and they said it was too early, so I changed the times to later to help them."

Working in partnership with others

- The management team worked with other organisations including social workers and health care providers to support people's needs.