

Sir Josiah Mason's Care Charity

Alexandra 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:

This service is an extra care facility which provides personal care to people in 'supported living' accommodation within 21 purpose built flats in Alexandra Court. One of the flats is used for respite (short-term) care. At the time of our visit 16 people were being supported with personal care.

People's experience of using this service:

People supported by the service and their relatives consistently told us the registered manager and staff who supported them were polite, reliable, caring and professional in their approach to their work. They spoke positively about the quality of service provided. One relative told us, "This is a nice place to be. It is fabulous and we are never disappointed. Our relative is safe; cared for whilst remaining independent. The staff are good, caring people. We couldn't wish for any better."

People's care and support had been planned proactively and in partnership with them. People felt consulted and listened to about how their care would be delivered. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

The service worked in partnership with healthcare professionals and families to ensure people's health care needs were met. People were supported to attend healthcare appointments to ensure their health and wellbeing was maintained.

Each flat had its own kitchen area and people could be supported to cater for themselves within their flat. However we saw that everyone chose to prepare their own breakfast and attended the dining room for lunch and evening meals which had been prepared by the service.

Staff retention was very good and people told us they were supported by staff who knew and consistently met their needs. Staffing levels were continuously reviewed to ensure there were enough staff to provide a flexible and responsive care. People supported by the service and their relatives consistently told us they felt safe. One person told us, "Its peace of mind."

There had not been any safeguarding incidents or complaints since the last inspection. However policies and procedures were in place and the registered manager understood the actions to take should there be any incidents.

The registered provider and the registered manager used a variety of methods to assess and monitor the quality of the service. This enabled Alexandra Court to be monitored and improve areas that were identified through their quality monitoring processes.

Rating at last inspection: Good (Report published 19 March 2016)

Why we inspected:

This was a planned inspection based on the rating at the last inspection. Ongoing monitoring included information that quality had improved. We checked this in looking at the quality and safety of the service.

Follow up:

The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the 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?	Good •
The service was well-led Details are in our Well-Led findings below.	



Alexandra 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 (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:

One adult social care inspector carried out this inspection.

Service and service type:

This service is an extra care facility. It provides personal care to people living in their own flats within Alexandra Court. It provides a service to older adults.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit to be sure the registered manager, staff and people they supported would be available to speak with us.

What we did:

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with four people who were supported at Alexandra Court. We also gained

feedback from three visiting relatives during the visit. We spoke with three members of staff, the registered manager, the nominated individual for the service and the Chief Executive Officer for the organisation.

To gather information, we looked at a variety of records. This included care plan records relating to three people who used the service. We also looked at other information related to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.



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

- □ People we spoke with told us they felt safe. Comments included, "I always feel safe." And, "There is always someone here. I feel safe." A visiting relative told us, "We have peace of mind knowing our relative is safe."
- The service had safeguarding policies in place which were reviewed regularly to ensure they were current.
- There had been no safeguarding incidents since our last inspection. We spoke with the registered manager and they were aware of their responsibility to report concerns to the relevant external agencies should any incidents occur.
- □ People were supported by staff who understood safeguarding, what to look for and how to report concerns.

Assessing risk, safety monitoring and management

- We looked at how personal risk was managed and addressed to ensure people were safe. The registered provider had a variety of risk assessments in place including assessments that covered the environment, moving and handling and medication.
- •□Risk assessments viewed were person centred and individualised for each person. Information contained details of the person's level of independence and action to support them.
- Consultation had taken place with each person, their relatives and professionals to ensure risks were identified and managed in line with good practice. Risk assessments we saw had been reviewed regularly to identify if there had been any changes in peoples' risk and needs.

Learning lessons when things go wrong

• The number of incidents since the last inspection had been few and far between. However we were told about an incident where a person had fallen in their room. From reviewing how the accident may have happened, the registered manager had arranged with the agreement of the person, for their room to be reorganised. This had allowed for the environment to be free from unnecessary sources of danger and had resulted in no further incidents.

Staffing and recruitment

- — We looked at how the service was staffed and found appropriate arrangements were in place. People who were supported by Alexandra Court, staff and visiting relatives all told us there were no issues with staffing levels and deployment of staff at the service.
- •□We observed staff going about their duties and noted they had appropriate time to respond to people's needs.
- The staff at Alexandra Court had worked for the service for many years. No new staff had been employed since our last inspection. We discussed recruitment processes with the registered manager. Appropriate

processes were in place to ensure suitable checks were carried out for any new staff employed to work for the service.

Using medicines safely

- •□Not all people using the service were supported with their medication.
- •□Where people were supported, we saw medicines were managed safely and in line with good practice guidance, "Managing medicines for people receiving social care in the community." (National Institute of Clinical Excellence, 2018.)
- •□Staff told us they had received regular training and competency checks to ensure they had the suitable skills to carry out the task safely. Records seen confirmed this.
- • We observed medicines being administered and saw good practice was followed.

Preventing and controlling infection

- The registered manager ensured infection control procedures were followed. Staff received effective training and regular audits were undertaken to ensure standards were maintained.
- Staff had access to protective personal equipment such as disposable gloves and aprons.



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

- Prior to using the service people were assessed by the registered manager to ensure the service could meet their needs and people were invited to visit to see the service before making a decision to move there. Information was also sought from professionals involved in the person's care to determine if the service would be appropriate for them.
- The registered manager continued to remain in contact with health and social care professionals. This supported them to provide effective, safe and appropriate care which met people's needs and protected their rights.

Staff support: induction, training, skills and experience

- □ People were supported by staff who had received training relevant to their roles. Staff told us they had access to a range of training which fully equipped them for their role. Comments we received about staff included, "They are very knowledgeable, they know their stuff." And, "I trust them, they know what they are doing."
- Staff told us they felt well-supported. They received regular supervision which included feedback about their performance and enabled them to discuss any concerns, training and development. One member of staff told us, "There is loads of training about everything we need to know. The support is fabulous. I feel very happy working here, that's why I have been here so many years."

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

- •□Each flat had its own kitchen area and people could be supported to cater for themselves within their flat. However we saw that everyone chose to prepare their own breakfast and attended the dining room for lunch and evening meals which had been prepared by the service.
- At the time of our inspection none of the people supported were on a special diet or required assistance with their food or drink.
- •□Staff had a good understanding of people's nutritional needs. They told us they would report any changes or concerns to the registered manager for further investigation by the appropriate health care professional.

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

- Where people required support from external healthcare professionals this was arranged, and staff followed guidance provided by such professionals. For example we saw one person was visited regularly by the district nurses to treat a skin condition. The person told us the staff had worked with the district nurses and their skin condition was improving.
- People were supported to manage their health and well-being. They were supported to attend health

appointments and records showed recent and regular contact had been made with health professionals to support the person when needed. These included the dentist, chiropodist, GP and opticians.

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

- •□Alexandra Court is a service that provides care and support to people living in their own flats. As such we did not inspect the premises.
- The service had systems to identify, record and meet people's communication and support needs. This was so they could adapt the service to ensure people received the best 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 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.
- We checked whether the service was working within the principles of the MCA. We established that all those who were supported at the time of our inspection were able to make decisions. Formal consent had been obtained from people, to ensure they were in agreement with the care and support they received. One person told us, "The staff always ask me first if I want to do something. They are good like that."



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

- Each person had their life history recorded within their care records which staff used to get to know people and to build positive, caring relationships with them. People told us staff knew them well and cared for them in the way they liked.
- We observed staff treated people with kindness and respect. We witnessed many positive interactions between staff and people they supported. One staff member told us, "It's a rewarding job being able to help put a smile on someone's face."
- □ People who used the service and their relatives were complimentary and enthusiastic about the registered manager and her staff. They told us all staff were very kind, compassionate and respectful. One person told us, "The staff are fabulous, always there for you. I always feel I can talk to them and they listen. We often giggle too."
- Relatives and staff spoke highly of the registered manager. They consistently praised their caring manner, personal values and dedication to making a difference in people's lives. Feedback from one relative included, "She really is great. She is here for the people and that makes a difference. It shows she cares. There is a family feel and we feel part of that deal."

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

- Staff recognised what was important to people and ensured they supported them to express their views and maintain their independence.
- □ Care records we looked at contained evidence the person who received care or a family member had been involved with and were at the centre of developing their support plans.
- □ People we spoke with and their relatives all confirmed they were supported to express their views. One person told us, "It is great our views are sought. I can remain independent with support when I need it. How wonderful is that?"
- The registered manager and staff documented people's diverse needs and assisted them to maintain their different requirements.
- Information was readily available about local advocacy contacts, should someone wish to utilise this service. An advocate is an independent person, who will support people in making decisions, in order to ensure these are made in their best interests.

Respecting and promoting people's privacy, dignity and independence

•□Staff we spoke with had a sensitive and caring approach when talking about the people they supported. They understood the importance of protecting and respecting people's human rights. Care records seen had documented people's preferences and information about their backgrounds and considered the support needed to maintain their individuality and independence.

•□We saw staff respected people's privacy by ringing people's door bells before being invited into their flat.
Staff also asked people if they would be willing to speak with us in their flats during the inspection and
asked us to wait until they had spoken with the person.



Is the service responsive?

Our findings

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

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

- People were empowered to have as much control and independence as possible. The care files we saw were person centred and individualised documents. They contained detailed information, providing staff with clear guidance about people's specific needs and how these were to be best met.
- The registered manager and staff understood the importance of responsive care. A visiting relative told us their relative had lost a hearing aid. They explained that the service had responded and sorted it out without the need to involve the family. The relative told us, "It was actioned. Sorted. Can't ask better than that."
- □ People told us they enjoyed the range of activities on offer which included opportunities to access the community. The service had a communal room which meant people could choose to meet socially if they wished to and some activities were arranged there. There was a notice board in the main foyer with information about upcoming activities and church services. One person told us, "There is usually something going on. I can sit quietly if I want to and can join in if I fancy it."

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this. This included regular reviews of their care and arranged meetings for people who were supported by the service.
- The service had had no formal complaints since the last inspection. The people we spoke with were all happy with the service they received and had no complaints. They told us they knew how to make complaints. They felt confident that these would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service.
- We saw there were several compliments made to the service in the form of cards and letters from relatives praising the staff for care they had provided to their family members.

End of life care and support

• We reviewed systems for end of life care for people supported by the service. Although none of the people supported were end of life, we were informed the service would work alongside the person, their relatives and other health professionals to coordinate end of life care.



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.

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

- •□The service was well-organised and there was a clear staffing structure. People spoke positively about how the service was managed. They informed us the registered manager was visible about the service and had a good understanding of people's needs and backgrounds. One person told us, "I like the manager, she is lovely. I trust her, she knows what she is doing and I can talk to her at anytime."
- The registered manager told us Alexandra Court followed all current and relevant legislation along with best practice guidelines. The registered manager understood their role in terms regulatory requirements. For example, when notifications should be sent to CQC to report incidents that had occurred and required attention.

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

- We found the registered manager was open and transparent. They focused on the needs of the person and on their wellbeing and strived to give them the best life possible. One person told us the registered manager was, "One in a million."
- During our inspection, the nominated individual for the service and the Chief Executive Officer (CEO) for the organisation visited Alexandra Court to support the registered manager and to introduce themselves to the inspector. Since the last inspection the registered provider had introduced positive values and staff culture within the organisation. These values were honesty, innovation, personalised, fun, excellence and dignity. The CEO said these values were kept alive through discussions at team meetings, supervisions and appraisals. From speaking with people supported at Alexandra Court, staff and relatives, it was evident these values were embedded within the service.
- Policies and procedures provided guidance around the duty of candour responsibility if something was to go wrong.

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

- □ People told us they were encouraged to comment on care plans and feedback to the management team through regular review meetings. People also told us they could simply speak with staff if there was anything they wished to discuss or change.
- The service had sought the views of people they supported through annual satisfaction surveys. The last survey had been summarised and the results were on display in the foyer of Alexandra Court. The results were extremely positive with a 97.5% satisfaction rate. Actions had been addressed for any areas where

people felt improvements could be made. This showed the service listened and responded to the views of the people they supported and their family members.

•□Staff spoke positively about the support they received from the management team. They told us senior staff were approachable and available for advice and support. One member of staff told us, "The manager is good at listening and will always try to sort anything out."

Continuous learning and improving care

• The registered provider continued to actively seek and act upon the views of people they supported. There was a strong emphasis on continually striving to improve their service in order to deliver the best possible care for people supported by Alexandra Court. This was supported by a variety of systems and methods to assess and monitor the quality of the service. We found regular audits had been completed by the service. These included medication, complaints, financial records, training, staff supervision arrangements and reviewing care plan records. Any issues found on audits were quickly acted upon and any lessons learnt to improve the service going forward.

Working in partnership with others

• The service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. We saw Alexandra Court had liaised with health care professionals and specialist teams to ensure timely referrals were made and where necessary additional support had been sought. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.