

Autism Initiatives (UK)

Redpoll Lane

Inspection report

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Ratings

Overall rating for this service	Requires Improvement ●
Is the service safe?	Requires Improvement ●
Is the service well-led?	Requires Improvement ●

Summary of findings

Overall summary

About the service

Redpoll Lane is a 2-storey residential care home. The service is registered for personal care and support for up to 2 people.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support: People were supported by their staff team who knew them well in a respectful way. Independence was promoted and people were encouraged to access the local community and engage in activities of their choice. Where people did not have capacity to make decisions for themselves, appropriate procedures were in place to ensure people's best interest was at the heart of everything people did.

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.

Right Care: Care was person centred and positive professional relationships were observed during the inspection. People received support from skilled staff who were able to meet people's needs and keep them safe. Staff promoted equality and diversity in their support for people.

Right Culture: There were concerns in relation to infection prevention and control, areas of the environment presented a health and safety risk due to poor maintenance of the service. This was discussed with the registered manager.

Support was tailored around meeting the individual needs of people they supported. Flexibility in the support provided ensured people had choice and control over support they received. Staff enjoyed working in the service and were supported by management.

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

Rating at last inspection

The last rating for the service was Good (published 28 October 2017).

Why we inspected

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

You can read the report from our last comprehensive inspection, by selecting the 'all inspection reports and timeline's link for Redpoll Lane on our website at www.cqc.org.uk.

Enforcement and Recommendations

We have identified a breach in relation to infection prevention and control. There were areas within the home that required maintenance as they were an infection risk.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement ●

The service was not always safe.

Details are in our safe findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well led.

Details are in our well led findings below.

Redpoll Lane

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 was carried out by 1 inspector.

Service and service type

Redpoll Lane is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Redpoll Lane is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

We gave the service 2 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We viewed the information we had received about the service since the last inspection.

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 contacted the Local Authority to see if they had any information regarding the service.

We used all this information to plan our inspection.

During the inspection

We reviewed records relating to the person's care and support, medicines management, staff recruitment and the management of the service, including policies and procedures. We spoke to 1 family member and 3 staff members including the registered manager.



Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection

- The service did not effectively monitor the environment to ensure there was no infection risk.
- Some areas of the service were not always clean and in a good condition, this included bathrooms and the kitchen. There were damp patches on the kitchen ceiling with paint peeling away, dirty grout in the bathroom, chips on the bath panelling and rust on some of the cupboards.

Effective systems were not in place to prevent and mitigate risks of infection control. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The service's infection prevention and control policy were up to date.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- All staff had completed their safeguarding training and there was evidence this was refreshed yearly.
- The service had a safeguarding policy in place and staff were aware of their own roles and responsibilities in order to safeguard people from abuse.

Assessing risk, safety monitoring and management

- Care plans and individual risk assessments were in place to ensure people were kept safe.
- All risks had been assessed and were reviewed regularly with the involvement of specialist services.
- Staff could recognise signs when people experienced emotional distress and knew how to support them.

Staffing and recruitment

- Staff were safely recruited, and checks were made with the disclosure and barring service. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The service had a full staff team, this ensured people were supported by people who knew them well.
- There was enough staff to ensure people, were able to access activities and visits when they wanted too. Rotas were flexible and could be adapted to address people's wishes, activities, and appointments.

Using medicines safely

- Medicines were administered and stored safely.

- Medicine audits were undertaken weekly by management to ensure any errors were identified in a timely way.
- If any medicine errors were identified, the provider responded immediately, seeking advice where necessary completing further medication training, and additional competency assessments with staff members.
- Medicines that were prescribed on a 'when required basis' were clearly documented.

Visiting in care homes

- There were no visiting restrictions in place.

Learning lessons when things go wrong

- When mistakes were identified, actions were taken and learning shared with staff members.
- People received safe care because staff learned from safety alerts and incidents.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

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.

At our last inspection we rated this key question good. At this inspection the rating has changed to 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

- Not all Health and safety concerns regarding the environment had been identified during internal audits.
- A family member had raised concerns regarding the home environment however, the provider had not addressed these concerns.
- The provider had raised some concerns regarding the condition of the property with the landlord however, this was not followed up in a timely manner to ensure people were living in a safe, clean environment.
- Staff were aware of the whistle blowing policy and were confident in utilising it, should it be required.
- Staff were knowledgeable about their roles and understood the needs of the people they supported. One staff member stated, "They [people supported] are like my family, I treat them like I would if they were my own."

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

- Staff were happy within their role, one comment included, "I love it here."
- Staff were aware of people's preferred method of communication this ensured people's needs were met in a way they wanted.
- Staff knew people they supported well.

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

- The registered manager was clear about their role and responsibilities in accordance with reporting notifiable incidents to CQC.
- The registered manager understood their responsibilities under the duty of candour to be open and transparent about incidents.
- Family members were informed of any concerns. One relative told us, "they [staff] always keep me updated and tell me if there are any issues."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service worked in partnership with external health professionals and the Local Authority to ensure

people's needs were met.

- Staff were provided with the opportunity to feedback any issues regarding the service during supervision, team meetings or anonymously if they wished. This allowed staff to be open and honest.
- Staff received regular supervision and were encouraged to progress within the organisation.

Continuous learning and improving care

- The senior carer and the registered manager completed regular audits, if any concerns were identified this was brought to the staff's attention and improvements made.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>Effective systems were not in place to prevent and mitigate risks of infection control. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>