

Speciality Care (Rest Homes) Limited

Oxford Road

Inspection report

39 Oxford Road
Southport
Merseyside
PR8 2EG

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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: Oxford Road is part of Arden College that provides specialist further education for young people aged 16-25 years of age with learning disabilities. Oxford Road can provide accommodation for five young adults aged over 18 who attend the college. There are support staff present in the home 24 hours per day. Accommodation can be term time only and outside of term time if required. At the time of our inspection there were two people living at the home, and one person attending a couple of days a week for respite care.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service:

There was a person-centred culture and staff knew the needs and preferences of people living in the home well. Staff had developed positive relationships with people and were seen to display kind and respectful support to people.

People received care and support which was in line with their support plan. People's privacy and dignity was respected and independence promoted. The service had developed community links to reflect the needs of people. It worked with Arden college as well as health and social care professionals to deliver improved outcomes and experiences for people.

People were supported to ensure that the home was clean, personalised and the environment was well maintained.

Staff showed a good understanding of their roles and responsibilities for keeping people safe from harm.

Medicines were managed safely and people received their prescribed medicines at the right time. Health needs were understood and met.

There were sufficient numbers of safely recruited and suitably qualified and skilled staff in place to meet people's individual needs.

Staff received a range of training and support appropriate to their role and people's needs.

The registered provider complied with the principles of the Mental Capacity Act (MCA) 2005. Staff understood and respected people's right to make their own decisions where possible and encouraged

people to make decisions about the care they received. Consent had been sought before any care had been delivered in line with legal requirements.

People knew how to make a complaint and they were confident about complaining should they need to.

The registered manager demonstrated a good understanding of their roles and responsibilities as a registered person. They worked in partnership with other agencies to ensure people received care and support that was consistent with their assessed needs.

Rating at last inspection: At the last inspection (16 October 2016) the service was rated good.

Why we inspected: This was a planned comprehensive inspection based on the ratings at the last inspection.

Follow up: We will continue to monitor this service and plan to re-inspect as part of our inspection schedule. For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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 remains safe

Details are in our Safe findings below

Is the service effective?

Good ●

The service remains effective

Details are in our Effective findings below

Is the service caring?

Good ●

The service remains caring

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service remains responsive

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service remains well-led

Details are in our Well-Led findings below.

Oxford Road

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:

The inspection was carried out by one inspector.

Service and service type:

Oxford Road is a 'Care Home'. People in care homes receive accommodation and personal care. CQC regulates both the premises and the care provided, and both were looked at on this inspection. 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 notice of the inspection visit because it is small and people are often out during the day. We needed to be sure that they would be in.

What we did:

Before the inspection, we looked at the Provider Information Return, which includes information from the provider about how the service is run and where they will make improvements. We also looked at notifications received from the home, which tell us how events that happen in the home are dealt with and requested feedback from the local authority. We used this information to populate our 'planning tool'. This helps us to plan how the inspection will be carried out.

During the inspection, we spent time with people living in the service to observe how staff communicated and interacted with people. We spoke to one visiting relative, two staff and the registered manager. We looked at three support plans for the people who lived or stayed at the home, two staff files, medicine administration processes, complaints and other records relevant to the quality monitoring of the service.

Following the inspection we spoke to two more relatives to gather their views on the care provided. We also received further information from the registered manager confirming that the current rating was clearly displayed on their website.

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 living at Oxford Road continued to be protected from the risk of abuse. There was a policy in place and safeguarding information was provided to all visitors.
- Staff completed training in safeguarding, demonstrated a good awareness and understood the actions they must take if they felt someone was being harmed or abused. This included reporting to the manager and whistleblowing to external organisations, such as the Care Quality Commission when needed.
- Documentation showed that the registered manager appropriately reported any safeguarding concerns to the local authority and CQC as required.

Assessing risk, safety monitoring and management

- The service managed risks safely. Risk assessments viewed were written specifically with the need of each person at the forefront and encompassed both education and social aspects of people's lives. Staff were aware of the risks people presented and how to manage these safely.
- All of the relatives we spoke to felt that people living in the home were safe.
- There were robust checks on the environment.
- People living at the home had Personal Emergency Evacuation plans in place (PEEPS). PEEPS describe the support a person would need to leave the service in an emergency.

Staffing and recruitment

- Recruitment procedures were safe. Pre-employment checks were carried out on all staff before they were offered a job.
- Rotas showed there were enough staff. Rotas also evidenced some dependency on agency staff, however, we saw all agency staff received an induction into the home and the same staff were used.
- Staff told us they felt there were enough staff on shift. The registered manager acknowledged there had been some challenges to recruit but this was now improving.

Using medicines safely

- Medication was managed safely. Medications were stored securely and records were clear and complete. Where people required medication to be given as and when required, often referred to as PRN medication, they had a separate protocol in place for this.
- Controlled drugs were also managed safely. These are medications with additional controls placed on them.
- Medication was only administered by staff who had the correct training to do so.

Preventing and controlling infection

- People were protected from the risk from infections. There were suitable storage facilities for cleaning products and the home was visibly clean and tidy and throughout the inspection we saw the availability of personal protective equipment (PPE) such as gloves and aprons.

Learning when things go wrong

- Staff demonstrated that they understood how to record, manage and report incidents and accidents safely.
- There was a robust system in place to monitor and review accidents and incidents. Accidents and incidents were reviewed on a monthly basis by the registered manager for analysis and trends.

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

- People's needs were assessed before they started to use the service. This information was used to develop the support plans and risk assessments and included taking a positive behaviour support (PBS) approach. PBS is a person-centred approach to supporting people who display or who are at risk of displaying behaviours which challenge.
- Relatives and healthcare professionals were involved in the assessment and planning of people's care where this was appropriate.

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.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Throughout the inspection we observed staff asking people for consent before they delivered support.
- People's support plans contained assessments of their capacity to make decisions. Where people were assessed to lack capacity, best interest decisions were made and recorded. Capacity assessments were decision specific, in accordance with the principles of the MCA.
- The registered manager had made appropriate applications for DoLS authorisations. Where a DoLS had been authorised, these were reflected in support plans.

Staff support: induction, training, skills and experience

- Training records evidenced that the staff received the necessary training and we observed that staff were skilled and knowledgeable when supporting the people who lived at the home.
- New staff were supported to complete an induction process which was aligned to the principles of the care certificate, which is a nationally recognised health and social care induction.
- Staff received an appropriate level of support for their role through regular supervision.

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

- People were supported in their own flats to develop skills that would enable them to live more independently. These were decorated according to people's tastes. We did discuss the need for some furniture replacement with the registered manager and the manager told us of plans to redecorate one flat with additional sensory equipment.

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

- Staff were aware of nutritional needs and how to encourage a balanced diet. Individual dietary requirements were clear in support plans and relatives told us they were confident that staff understood people's needs.

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

- Staff arranged specialist health referrals when required, advice was recorded and support plans amended as appropriate.
- Relatives confirmed they were kept informed if a person was ill or needed to seek medical advice and that they were involved in any medical decisions that needed to be made where the person was unable to make the decision themselves.

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

- Where appropriate, people were supported by staff to attend their college placement each day.
- We saw how the staff at Oxford Street and Arden college worked in partnership to ensure people had consistent and timely care.

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; respecting equality and diversity

- There was a person centred culture at the service and people were involved in planning activities outside of their college placement. We observed kind and respectful interactions.
- Staff knew people well. This was confirmed by one relative who described the staff as; "Very knowledgeable." And, "Put your mind at rest".
- The rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination.
- An Equality and Diversity policy was in place which had been reviewed to reflect current legislation. Staff had received training.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were respected. Staff were knowledgeable around confidentiality and ensured that personal information was securely stored.
- People were supported to maintain their independence and develop new skills. People learnt new skills whilst at college such as cooking. These were further practiced at home.
- Independence was also being promoted through the use of public transport. Staff explained how one person was particularly enjoying the sensory aspects of this as well as enjoying greater presence in the local community.

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

- We saw completed easy read versions of people's support plans. Staff had a good understanding of how people communicated. Not all people communicated verbally. Support plans were clear how to support communication. The service also uses symbols and pictorial aids for people to help understanding, for example pictorial food recipes.
- Support plans demonstrated that where people were able, they were involved in making decisions about their care and the review of any personal outcomes. Where people were unable to express their views, we saw that families had been involved when appropriate.
- People had access to advocacy services.

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

- Support plans were person centred and detailed, accurately capturing personal preferences, hobbies and interests as well as the choices and decisions that people could make for themselves. One relative told us, "Staff are very much on the ball, know [person's] likes and dislikes".
- Support plans were consistently reviewed on a monthly basis and amended where needed.
- The Accessible Information Standards (AIS) were being met. The standards were introduced by the government in 2016; ensuring that people with a disability or sensory loss were provided with information in a way they could understand.
- People chose the activities that they were interested in and had active social lives. During the inspection we saw people being supported to a variety of different activities.

Improving care quality in response to complaints or concerns

- Relatives confirmed that they were aware of the complaints process and were confident that any concerns would be listened to by the registered manager.
- There were no recent formally recorded complaints however; there was a complaints procedure clearly visible at the home and as well as a number of ways people could express their views including formal complaints forms. The registered manager was also in regular contact with relatives so they can share feedback and raise concerns.

End of life care and support

- Oxford Road provides care and accommodation for people attending a special college residential placement for young adults at Arden College and does not provide end of life care to people.

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; Continuous learning and improving care

- The service had an effective system of governance. The registered manager and senior carers regularly completed audits including health and safety, infection control, care plans and medication. These had identified areas of improvement and actions had been taken as a result. These were complimented by audits that were also completed by the provider.
- The registered manager understood their legal responsibility for notifying the Care Quality Commission of deaths, incidents and injuries that occurred or affected people who used the service.
- During the inspection, we discussed the accessibility of the current CQC rating on the company website. We asked for evidence to be sent to us that the rating was clearly displayed. We received clarification the following day that the website had been updated.

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

- The registered manager was clear about the vision for the service and was committed to improving the quality of care as well as the living environment for people living at the home.
- Staff and relatives told us that the registered manager was approachable and listened if there were any concerns. One relative said; "I find the manager great, if I email they come back really fast and knows [person] like the back of their hand".
- The registered manager was aware of the statutory Duty of Candour which aims to ensure that providers are open, honest and transparent with people and others in relation to care and support. The Duty of Candour is to be open and honest when untoward events occur.

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

- Staff said they felt supported by the registered manager and that their views were encouraged and welcomed. Team meetings and supervisions took place.
- People living at Oxford Road participated in the running of the home through informal conversations and meetings with the registered manager and staff. There was also regular contact with relatives who could share views on behalf of those who found it difficult to communicate.

Working in partnership with others

- The registered manager worked in partnership with a range of different health and social care professionals to help make sure people received the right support. This included Arden college where

people attend placements throughout the day.