

Speciality Care (Rest Homes) Limited

Norwood

Inspection report

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Date of inspection visit:
06 May 2022

Date of publication:
06 June 2022

Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

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.

About the service

Norwood is a supported living service providing personal care and support for people living in their own homes. At the time of our inspection the service was supporting four people, not everybody supported by the service received the regulated activity of personal care; our inspection focused on people receiving personal care.

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

People told us they felt safe with the service they received. Family members told us they were confident their relative was kept safe and were treated with the utmost respect. The support people received promoted them making as many choices and decisions for themselves as possible. People's autonomy and freedom was promoted, by staff who understood and respected people's rights.

Each person had an individual risk assessment that outlined the support they needed to remain safe in different situations. Staff were knowledgeable about these assessments and people's support needs. People's care and support was reviewed in partnership with them and people who were important to them.

Based on our review of key questions; Is the service safe? And, Is the service well-led? The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support; the model of care and support maximised people's choice, autonomy and independence. Right Care; people's care focused on people as individuals and promoted their rights as equal citizens. Right culture; there was a culture of people being partners in designing their care and support; and of listening to people.

The service has responded well to the COVID-19 pandemic and had supported people to remain as safe as possible. Family members told us they felt very reassured by the response of the registered manager and other staff members.

We have made a recommendation about supporting people with their tenancy agreements.

There was an open, progressive and reflective culture within the service that promoted learning. The registered manager had effective oversight of the safety and quality of the service being provided; and they sought and acted on people's feedback.

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 this service was good (published 18 July 2019).

Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

During this inspection we also checked that the service is applying the principles of Right support, right care, right culture.

We undertook a focused inspection to only review the key questions of Safe and Well-led. Our report is only based on the findings in those areas reviewed at this inspection. The ratings from the previous comprehensive inspection for the Effective, Caring and Responsive key questions were not looked at on this occasion. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has stayed the same based on the finding from this inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Norwood

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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was completed by one inspector.

Service and service type

This service provides care and support to people living in their own homes, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 6 May 2022 and ended on 7 May 2022. We visited the office location on 6 May 2022.

What we did before inspection

We reviewed information we had received about the service since the last inspection and information we had recently received during a monitoring activity. 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 all this information to plan our inspection.

During the inspection

We spoke with people who used the service and one relative about their experience of the care provided. We spoke with three members of staff including the registered manager. We reviewed a range of records. This included care records, staff files in relation to recruitment and staff supervision. We also viewed a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records regarding the governance of the service, safe recruitment and training.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their family members told us the service was safe, and staff treated people with the utmost respect. Staff had received safeguarding training and were knowledgeable about safeguarding people from the risk of abuse.
- The provider had an appropriate safeguarding and whistleblowing policy in place and a designated safeguarding lead who was a point of contact for staff who may wish to raise a concern. Staff members told us they would be confident raising a concern.

Assessing risk, safety monitoring and management

- Risk was assessed, monitored and safely managed. Each person's care and support plan outlined the support they needed to remain safe in different situations and staff were knowledgeable about these assessments and people's support needs.
- People were supported to assess and manage risks in partnership with their support workers. This was an enabling approach that helped support workers to better understand people's needs and preferences in relation to their safety and enable them to adapt their approach to each person.

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)

- The service was working within the principles of the MCA. The support people received promoted them making as many choices and decisions for themselves as possible. If needed, appropriate legal authorisations were in place to deprive a person of their liberty; however, these were the least restrictive options, and any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- Staffing levels were safe. Each person had an assessed level of support needed and the registered manager ensured enough suitably skilled and experienced staff were available to meet people's needs safely.

- New staff recruitment was safe. The provider had a thorough recruitment process that helped ensure staff were suitable to work in health and social care.

Using medicines safely

- Nobody was being supported to use medication. If this support was needed in the future the provider had appropriate policies in place.

Preventing and controlling infection

- The service has responded well to the COVID-19 pandemic and had supported people to remain as safe as possible. People's family members told us they felt very reassured by the response of the registered manager and other staff members.
- Steps had been taken to support people living alone to help them cope with the risks of isolation.
- Staff teams made appropriate use of PPE and separated into smaller teams to help prevent the spread of any infection. People were supported to keep their homes clean.
- People and staff members had been supported to make effective use of the COVID-19 testing program.
- People had been supported to understand and make informed choices about the COVID-19 vaccine.

Learning lessons when things go wrong

- There was an open, progressive and reflective culture within the service that promoted learning. The registered manager and staff had the practice of listening to people and working with them to understand their perspective about what went wrong. A member of staff told us, "When things go wrong, we seek the person's view and what they thought of the event or situation and work with that."

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service was designed for people to have an option for more independent living after finishing their time at a residential college. The registered manager showed us how they supported people to set goals and build on the skills they had. Each person had a different level of support that had been planned in partnership with them and their family members; this helped people to remain safe whilst living a lifestyle of their choice.
- The registered manager and support staff had a creative and pragmatic approach to supporting people to stay safe, solve problems in their lives and achieve outcomes that were meaningful to them. They were active advocates for people having meaningful community inclusion and championing their rights.
- There was a very positive culture within the service. People and their family members told us that they were treated with respect and they liked the staff at the service and their approach. People's autonomy and freedom was promoted, by staff who had an understanding of and respect for people's rights. One person's family member told us, "They treat [name's] home with respect, always ask permission before doing something and are keen on [name] taking ownership and control over his home."

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 and other senior staff were knowledgeable about their responsibilities under duty of candour. They had been open, candid and had worked collaboratively with others when something had gone wrong.

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

- There was a clear staff structure in place; the registered manager, deputy manager and support staff each understood their roles and worked together effectively. The registered manager had effective oversight of the safety and quality of the service being provided; and they sought and acted on people's feedback.
- The provider had a clear set of policies in place that had been accessed by staff members and helped staff to understand their roles.
- The service was providing support under a supported living model. People lived in their own homes and held a tenancy independent of the care/support provider. Part of the support provided was to help people manage their home and tenancy. We saw that some parts of the tenancy agreements did not promote ordinary living.

We recommend the provider seek advice and guidance from a reputable source, about supporting people to understand their rights in relation to their tenancy agreements.

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

- The registered manager and other staff members listened to and involved people who used the service in making decisions. Staff used communication methods that were meaningful to people.
- One person's family member told us about staff members, "They plan around him and what he wants. They sit together and plan the week, but they are flexible and promote choice and he can change his mind and have choices on the day also. Some structure and some ad-hoc choices; just like everyday life."

Continuous learning and improving care

- People's care and support was reviewed in partnership with them and people who were important to them. The registered manager and staff supported people to identify what was working and not working for them and used this feedback to support people to progress further or make changes. These reviews took place regular; however, staff did not wait for a review before supporting people to make changes.
- The registered manager and other staff members had used the learning from the recent pandemic to improve aspects of the service being provided.

Working in partnership with others

- People's family members told us that staff worked in partnership with them.
- The registered manager showed us how they had worked with local authorities and other support providers to help people find the type of support they needed in an area of their preference.