

Housing 21

Housing 21 - Marigold Court

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Housing 21 – Marigold Court is a specialist 'extra care' housing facility where people live in flats in a single purpose-built building. At the time of our inspection there were 42 people using the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

People were safe from the risk of abuse. Risks to people were assessed and regularly reviewed when people's needs changed. Infection control measures were in place.

Medicines were managed safely. The provider employed sufficient staff, staff were trained appropriately and recruited safely. Staff worked effectively with visiting professionals.

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 said staff were very caring and kind. People were supported to maintain their independence and were treated with dignity and respect.

There was a positive culture. Staff and relatives said the management team were supportive. Effective quality assurance checks were taking place, lessons had been learnt and improvements were made continuously.

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 13 September 2017).

Why we inspected

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

Follow up

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 team consisted of an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care 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 and support service.

Registered Manager

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

This inspection was announced.

Inspection activity started on 4 April 2023 and ended on 9 May 2023. We visited the service on 28 April 2023.

What we did before the inspection

We reviewed information we had received about the service. We contacted the local authority commissioning team and safeguarding team for their feedback about 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 all this information to plan our inspection.

During the inspection

We spoke with 7 people and 10 relatives about their experience of the care provided. We spoke with the registered manager, management team and administrator during the site visit. We reviewed a range of records including 3 people's care and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures, were reviewed. We contacted 7 staff members via email.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were safe from the risk of abuse. The provider had policies and procedures in place to keep people safe. One relative said, "The whole place is excellent: clean, fantastic, spacious, safe."
- Safeguarding concerns were recorded, reported and investigated. Staff were confident in their knowledge of safeguarding procedures. The safeguarding policy was accessible to all staff. Staff had completed safeguarding training.
- Lessons were learnt when things went wrong at the service. Learning was also shared from other locations belonging to the provider to help ensure people's safety across all locations.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- Risks were assessed, and actions were put in place to keep people safe. Care documents included information about risks to people and how they should be managed. This included risks around PEG feeding systems, catheter care and emollient creams.
- Risks to people were reviewed regularly and changes made to their care as often as needed.
- Infection prevention and control measures were in place. Staff wore personal protective equipment when needed to help keep people safe. One relative said, "[Staff] still wear masks if they have a cold but it's better now the rules have relaxed because [person] can hear them better."

Staffing and recruitment

- Staff had been recruited safely and there were enough suitably trained staff to provide support to people. Staff had all necessary pre-employment checks in place including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- A number of people said there were enough staff available to help them in a timely manner. One relative said, "The staff are helpful and happy."

Using medicines safely

- Medicines were managed safely. Medicine records clearly detailed what medicines people needed to take and when they needed to take them. 'As and when required' medicines were administered safely.
- Medicines audits were carried out regularly. When issues were identified they were acted upon to ensure the same problem did not occur again.

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.

At our last inspection we rated this key question outstanding. At this inspection the rating has changed to 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 were supported in a caring way. Staff respected people's diversity. One person said, "Staff take time to listen to me even though it takes me a long time to say anything. They really listen to me."
- The cultural needs of people were respected. Care records included information about people's lives and how they wanted to be supported. Staff knew people well. One relative said, "[Staff] really care, they know the residents well and have a really caring relationship with them."
- One person said, "I have only been here 3 weeks, but it's been wonderful so far."

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

- People were supported to make choices about their care. Care records were person centred and people felt involved in their care. People's relatives were involved when needed.
- One person said, "[Staff] can't do enough for me. I had to ask them to stop doing the washing up because I enjoy it and wanted to do it for myself, they were just trying to be helpful."
- A relative said, "[Person] has early stage dementia but they still took part in the care assessment when they arrived along with the family."

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were promoted. Care records clearly outlined how people's dignity was to be maintained during personal care.
- All the staff we spoke to were able to explain the importance of promoting people's independence and how they did this. One person loved writing and had been given a column in the monthly newsletter, he said this helped stop him being lonely.
- One person said, "[Staff] always knock and call out, they wait for me to shout them in." Another person said, "I have told them to just come in but they still knock first."

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. The rating for this key question has remained good. 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 management team had created a positive, supportive culture focused on providing person-centred care, in a warm and friendly environment.
- A staff member said they felt the provider was a supportive employer which helped them deliver better quality care.
- People felt they had achieved good outcomes. One relative said, "Moving [Person] to the service is the best thing we ever did. [Person's] looked after, can see and talk to other people. [Person] is part of a community again."

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

- Staff and management understood their roles well. One relative said, "I see the manager often, drop by her office for a chat. She creates a calm atmosphere. I know I can say anything I need to say and she listens and makes changes if she can."
- The provider had appropriate quality monitoring systems and processes in place. The management team carried out audits and acted on the findings to ensure people continued to receive good quality care.
- The registered manager was aware of the requirements under the duty of candour, there had been no incidents reportable under this regulation recently. People and their relatives were kept informed of issues when needed.

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

- The management team engaged with people and staff to gather their views. Quality assurance surveys were carried out with people and their relatives to ensure the care they received was appropriate and effective.
- Care records included detail about people's equality characteristics and the impact of these on how they wished to be cared for. People were enabled to attend events such as religious services when they wanted to.
- One person from a diverse cultural background was regularly assigned a staff member from the same cultural background. The person enjoyed interacting the staff member and celebrating their shared culture.

Continuous learning and improving care

- The management was continually looking for ways to improve. An action plan was in place with aims to improve different areas of the service. The provider had oversight of the improvements.
- Where trends in incidents were identified, improvements were put in place to help reduce reoccurrences. Areas for improvement were discussed with staff and training provided when needed.

Working in partnership with others

- The staff worked effectively with visiting healthcare professionals. People were supported to access healthcare services in a timely manner.