

Milewood Healthcare Ltd

Redfern

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

Redfern is a care home providing personal care to six people living with a learning disability or autism. The service can support up to seven people.

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 and what we found

People told us they received good care; staff were supportive and caring.

People and staff told us the home was safe. Staff had a good understanding of safeguarding and the whistle blowing procedure. They felt confident to raise concerns if needed. Previous safeguarding concerns had been reported and thoroughly investigated.

There were enough staff to provide personalised care and enable people to fulfil what they wanted to achieve. New staff were recruited safely.

People received their medicines when they were due. Incidents and accidents were monitored to help keep people safe and learn lessons. Health and safety checks and risk assessments were completed to help maintain a safe environment.

Staff received good support and the training they needed. People were supported to have enough to eat and drink and to access health care services.

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's needs had been fully assessed including considering people's protected characteristics. This was used to develop detailed and personalised care plans.

People were supported to participate in activities of interest to them; they also regularly accessed their local community.

Staff felt the home was well managed. There were regular opportunities for people and staff to share their

views. Quality assurance checks were effective in identifying areas for improvement.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 22 April 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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 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.

Redfern

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.

Inspection team

One inspector carried out this inspection.

Service and service type

Redfern is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke briefly with three people who used the service. We spoke with four members of staff including the registered manager and support workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

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 staff told us the home was safe. One person said, "This is my home, I don't want to go anywhere else."
- The provider continued to operate effective safeguarding procedures.
- Staff had a good understanding of the provider's safeguarding and whistle blowing procedures; they confirmed they were confident to raise concerns if needed. One staff member said, "I would definitely use it [whistle blowing] if needed."

Staffing and recruitment

- There were sufficient staff on duty to provide personalised care and support. Staffing levels were flexible to allow for people's social and leisure preferences. One person mentioned they would like to attend a football match at the weekend; staff immediately rearranged the rota to ensure this happened.
- The registered manager regularly reviewed staffing levels to ensure they remained acceptable.
- The provider had effective recruitment processes to check new staff were suitable.

Using medicines safely

- People continued to receive their medicines safely.
- Medicines were stored appropriately and records accurately accounted for the medicines people received. People had also been supported to reduce their reliance on medicines, with the support and guidance of health professionals.
- Management checked staff followed the agreed medicines management procedures.

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

- Health and safety checks and risk assessments were carried out to help keep people and the environment safe.
- The provider had procedures to deal with emergencies, including plans to ensure people continued to receive the support they need.
- Staff had an in-depth understanding of people's needs; this helped them support people sensitively when they were anxious or distressed.
- The home was clean and well maintained; staff followed good infection control practices.

Learning lessons when things go wrong

- Accidents and incidents were reviewed to help keep people safe and learn lessons.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant 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 had been fully assessed; this included discussing religion, culture and lifestyle.
- Assessments were detailed and personalised, this helped ensure people received care that met all of their needs.

Staff support: induction, training, skills and experience

- Staff received good support and the training they needed. One staff member said, "I am very supported, [registered manager] and [deputy] are really good. They have been there for me."
- Training, supervisions and appraisals were up to date.

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

- Staff were involved in deciding the shopping list for the house and supported to purchase the items.
- People chose what they had for meals following advice from staff members; some people were involved in preparing meals.

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

- People were supported to access health appointments.
- Health professionals were involved in people's care as required; their recommendations were included in people's care plans.
- People had a health action plan, developed following an assessment of their health needs. This included areas such as oral hygiene.

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

- People were involved in the decoration of their bedroom so it suited their interests and preferences. One person told us about how they had chosen a football themed wallpaper for their room.

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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- DoLS authorisations had been approved for people requiring this.
- Staff followed the MCA; assessments and best interests decisions where people could not consent to restrictions placed on them. This included managing finances, health appointments and administering medicines.
- Staff had completed MCA training; they supported people to make daily living choices and decisions in line with their needs.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 continued to be well cared for; staff had a good understanding of their needs.
- People confirmed they were happy with their care and the staff team. They commented, "I have done alright here", "The staff are lovely" and "I love it here, I would stay here forever if I could."
- There were positive relationships between people and staff. People were comfortable around the staff team and regularly engaged with staff for a chat or to seek advice. Staff in response were encouraging and reassuring.

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

- Staff encouraged people to make choices and decisions, this included meal choices and activities.
- People's communication needs had been assessed and their support needs documented in communication care plans. Staff followed these when supporting people.
- Some people accessed external support, if needed, to make decisions, such as independent advocates or relatives.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect.
- Staff understand the importance of promoting dignity; they adapted their practice accordingly when caring for people.
- People's independence was promoted as much as possible. Some people accessed the local community independently, whilst others helped around the house.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; End of life care and support

- People had personalised care plans covering all their care needs. This included specific guidance to ensure they had the care they needed and their preferences met.
- Care plans included information about what was important to people and any wishes they had for their future care needs.
- Care plans were reviewed to ensure they remained up to date.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff had an excellent understanding of people's communication needs. They used knowledge effectively when supporting people with decision-making.
- Information was available in different formats, such as easy read and pictorial.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to participate in a variety of meaningful activities. People had one to one support time, which they chose to spend how they wanted. This included arranging activities outside of the home.
- Other people had been involved in work placements in the past and attending college.
- People had developed good relationships with each other and enjoyed spending time together. They were also supported to maintain relationships with relatives. There was lots of banter about topics of mutual interest, such as sport. One person said, "Me and [person] get on well together."

Improving care quality in response to complaints or concerns

- There had been no recent complaints about the home.
- The complaints procedure was available in a pictorial format to help encourage people to raise concerns.

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

- Staff endeavoured to ensure people made progress and their independence was enhanced. They described the progress one person had made, including no longer needing medicines and potentially moving on to a more independent placement.
- Staff said they felt valued. One staff member described the staff and teamwork as positive aspects of the home. They commented, "We have a really good staff team ... we are like one big family."
- The home had a friendly and welcoming atmosphere. One staff member said, "There is always humour, laughing and joking on."

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

- The registered manager submitted the required statutory notifications to CQC following significant events at the home.
- The registered manager was supportive and approachable; people had a good rapport with the registered manager. One staff member told us, "All of the management are really approachable."

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

- There were opportunities for people and staff to share their views about the home, such as regular meetings and formal consultation.
- Feedback from the most recent consultation with people and staff had been positive. Where requests for changes or ideas for improvement had been suggested, actions had been completed to implement these changes. This included redecorating areas of the home and additional training for staff.

Continuous learning and improving care

- The provider continued to operate a structured approach to quality assurance. Regular checks were completed to make sure people received safe care. The regional manager also completed regular checks of the home.
- Quality assurance checks were effective in identifying and resolving issues in the home and sharing lessons learnt.

Working in partnership with others

- The provider worked in partnership with local commissioners and health professionals to work towards positive outcomes for people.