

Meadowview Care Limited

The Tidings

Inspection report

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Essex
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

The Tidings is a residential care home that provides care and support for up to two people who have a learning disability and or autism. The Tidings is a detached house, and at the time of our inspection there were two people living in the service.

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

We received positive feedback from people's relatives who told us they wouldn't hesitate to recommend the service to others. One described the happy and homely environment where staff, "Do what they're supposed to do... Do what they promise... It's a kind place."

Relatives felt their family members were provided with safe care, in a homely, clean environment. Staff had received training in safeguarding and understood their responsibilities in reporting any concerns. People received their medicines safely as prescribed by trained staff. Safe recruitment processes were being followed and there were enough staff available to support people's individual needs.

People living in the service, staff, and relatives felt the positive management of the service ensured good communication and they felt comfortable to voice an opinion and raise any issues, knowing they would be acted upon.

Staff had been sensitive to people's anxiety about the pandemic, providing individual support to explain why staff were wearing face masks and carrying out routine testing. Staff explained to people why they were unable to temporarily attend some of the external activities they enjoyed, whilst creating new indoor activities to support their well-being.

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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. The outcomes for people using the service promoted choice and control, independence and inclusion. One person told us, "I tell staff what to do," not the other way round, and they felt included in decisions. Staff and leadership focused on ensuring people reached their personal goals through person centred approaches.

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 requires improvement (published 4 March 2020).

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 17 February 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Tidings on our website at www.cqc.org.uk.

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 safe findings below.

The Tidings

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

The inspection was carried out by one inspector.

Service and service type

The Tidings is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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

Due to people's complex needs, and the small size of the service, we gave 24 hours' notice of the inspection. This was to ensure our visit did not impact on people's anxiety. Also to ensure the registered manager, who is also registered manager for two of the provider's other services, would be available to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included the provider's action plan following our last inspection in February 2020.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

Our inspection activity was undertaken over 10 days. Starting on the 5 May 2021 when we visited the service. During the visit we looked around the environment and met the two people living in the service, observing the care and support they received. We reviewed a range of records. This included two people's medication records, risk assessments, cleaning schedules, medication audits, policies and procedures.

We contacted both people's relatives to gain their views of the service. We also spoke with the registered manager and two support workers.

The provider sent us policies and procedures as requested, including infection control, visiting policy and recruitment information.

After analysing the information we gave feedback to the registered manager on 15 May 2021.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Since our last inspection, covers had been fitted to all the radiators to reduce the risk of burns, except for the small office/staff sleeping-in room. The registered manager confirmed people did not have unsupervised access to the room, which was also fitted with a press key lock.
- The registered manager as part of using a lessons learnt approach to drive improvements in identifying / assessing risks, had obtained a copy of the health and safety executive guidance for care home providers. They told us how they used the guide as a reference book to keep their knowledge updated.
- Discussion with staff showed they were knowledgeable on how to report any accidents and incidents to ensure any concerns/risks were identified and acted on.
- One person gave us examples of how staff supported them to keep safe without taking away their independence. This included taking action to address their concerns in using the stairs.
- Staff told us the detailed risk assessments held in people's care plans, reflected current risks associated with people's mobility, epilepsy, eating, accessing the community and social activities.
- The manager showed us the specialist 'breathable' pillows purchased for people living with epilepsy which reduced the risk of suffocation if they had a night seizure.

Using medicines safely

At our last inspection we recommended further work was carried out to improve on their auditing of medicines to ensure effective, timely monitoring of medicines errors. The provider had made improvements.

- The registered manager showed us the improvements they had made to their auditing systems, which ensured any potential medicines errors were picked up and acted on in a timely manner to reduce any risks to the person.
- One person told us how staff supported them to take their medicines as prescribed. Including ensuring none of the tablets prescribed were of a certain colour, otherwise they would refuse to take it.
- Staff received training in administering people's medicines and had their competency checked before

they were able to give out medicines unsupervised. Following this initial training, staff told us they completed annual refresher training, and management carried out regular spot checks to ensure they continued to follow safe practice.

Systems and processes to safeguard people from the risk of abuse

- Relatives told us their family members were receiving safe care. One relative told us how their family member would speak their mind and if they didn't like anything about the service they would tell them, "[Family member] tells me everything."
- Staff had received training in safeguarding people from abuse and told us they would not hesitate in reporting any concerns to the management, and if not acted on, would contact external agencies. One staff member told us they would have, "No hesitation," in reporting any concerns.
- The registered manager was aware their responsibility to liaise with local authority about safeguarding issues and where applicable, act on/learn from any recommendations to improve practice.

Staffing and recruitment

- The service continued to follow safe recruitment procedures, including checks of new staff's identity and they are able to work with vulnerable people.
- Relatives felt there were enough staff to meet their family member's needs. They praised the quality and stability of the staff group who they had got to know. One relative commented, "They've had the same carers for a long time... You need someone they are used to."
- One person living in the service told us they liked the staff, "They are lovely," and we observed good interaction with the person laughing with staff and engaging in meaningful conversations.
- Staff felt the staffing levels were good, which gave them time to engage with people on individualised basis to support their health and well-being.

Preventing and controlling infection

At our last inspection we recommended the provider considered current best practice in relation to infection prevention and control and takes action to update their practice accordingly. The provider had made improvements. Enhanced cleaning schedules were in place, and spot checks carried out to ensure the tasks have been undertaken. This was to ensure people were supported in the clean and hygienic environment.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection the provider had failed to identify and act on identified shortfalls to the quality and safety of the care provided. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The checks and audits carried out to assess the quality and safety of the service were more robust. Spot checks were carried out to ensure records had been completed accurately, and reflected the work undertaken. This had supported the provider to drive improvements in areas identified in our last report; medicines, environmental risks, and cleanliness of the service. Acting on any shortfalls within a timely manner.
- Staff told us where shortfalls in their practice were identified, they received feedback in a kind and professional manner, which supported them to learn what they had done wrong and how to address it.
- Relatives praised the management of the service. One described the registered manager as being, "Brilliant, no messing about, will ensure everything is all right... Mind you I've never found anything to complain about."
- Relatives and staff told us they would recommend the service to others. One relative said they would, "Definitely," recommend. This was because their family member was, "Always so happy," and spoke highly about the kind staff.

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

- People's relatives felt fully involved in their family member's care and support. They told us they had a good rapport with the registered manager and staff. One relative said, the registered manager was always obtainable, "I can phone any time of the day."
- Staff felt the positive culture of the service, was underpinned because they enjoyed their work, and were committed to providing quality care. One staff member told us the provider was, "Lovely to work for." Another told us, "I love my job... I feel very supported and always have done."

- Staff told us the registered manager had a good visible presence in the service, knew people well and was very approachable. One staff member told us they felt really supported by the registered manager, who took time to listen to them and either resolved, "Or tries to sort," any issues they had. Another said they liked the way the service was managed, "I feel listened to."
- Staff told us since the start of the pandemic, the management had ensured they were kept up-to-date with what was going on and how it affected them in the people they supported.

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

- Care reviews, the complaints policy, relative telephone calls, meetings and staff supervision, provided different forums for people, their relatives and staff to express their views and influence change.
- During the pandemic staff meetings had been held via video link or face-to-face.
- Staff were aware of people's individual communication needs. This enabled staff to communicate effectively with people to ensure their voice was heard.

Working in partnership with others; Continuous learning and improving care

- The registered manager worked in partnership with health and social care professionals, such as community and specialist nurses, GP, and chiropodist to ensure the needs of people were being met.
- During the ongoing pandemic, the registered manager had been liaising with their peers, and local and government agencies to share best practice and keep their knowledge updated. They shared the information with staff and updated policies and procedures.
- Staff were aware the local facilities, clubs and organisations in the area, and as they reopened would continue to support people in building links with the local community.