

National Star Foundation

# National Star at Ledbury Road

## 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

National Star College at Ledbury Road is a residential care home (in one adapted building), providing personal and nursing care for up to seven people with a learning disability. At the time of the inspection there were six people living at the home.

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

Staff had good knowledge of safeguarding processes and how to help people stay safe. There were enough staff to support people safely.

People's care plans and risk assessments were up to date and reviewed regularly.

People received their medicines safely.

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.

Staff supported people with kindness and compassion. People's privacy and dignity was maintained.

Systems were effective for monitoring the quality and safety of the services provided.

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.

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture. The service maximised people's choice, control and independence. Care was person-centred and promoted people's dignity, privacy and human rights. The ethos, values, attitudes and behaviours of leaders and care staff ensured people using services lead confident, inclusive and empowered lives.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Why we inspected

This service was registered with us on 03 December 2019 and this is the first 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below,

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# National Star at Ledbury 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. 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 carried out by one inspector.

#### Service and service type

National Star at Ledbury Road 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

This inspection was unannounced.

#### What we did before the inspection

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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, Healthwatch and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one relative about their experience of the care provided. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We also spoke with eleven members of staff including the director of services, registered manager, manager, senior facilitators, facilitators the housekeeper/cook and a visiting health professional.

We reviewed a range of records. This included three people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We also spoke with two relatives to seek their experience of the service.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems and policies in place and staff had received training in how to protect people from harm and abuse. A staff member told us, "If ever I had any concerns about a person I'd immediately report it to my senior."
- The provider and registered manager understood their responsibility to report allegations of abuse to the local authority and the Care Quality Commission (CQC).

Assessing risk, safety monitoring and management

- Risks associated with people's needs and the environment were assessed, and actions taken to minimise possible harm. Care records included assessments about people's communication, mobility and nutritional needs.
- Staff had received training to assist them in understanding people's different ways of communicating and how best to individually support people.

Staffing and recruitment

- There was enough staff to provide people with the individual support they needed. Although a staff member commented, "Sometimes due to staff sickness the staffing levels had dropped and there was a delay in agency staff arriving to support them." When we discussed this situation, the registered manager told us, they were able to call on the National Star College staff to offer support in the interim."
- A relative told us, "Staffing levels in the past have been a problem but they have got better now. The agency staff used are very good."
- The provider had a robust recruitment process and followed safe practice. Checks had been carried out with the Disclosure and Barring Service (DBS) and references had been obtained. The DBS is an agency who helps employers make safe recruitment decisions..

Using medicines safely

- People's medicines were managed safely. Medicines were safely received, stored and administered. There was clear guidance in place to support staff to safely administer topical medication (such as creams). Systems were in place to ensure medicines were safely destroyed.
- People received their medicines as prescribed by staff who were trained in the administration of medicines and regularly had their competencies checked.
- Regular audits were carried out which highlighted any areas for improvement.

Preventing and controlling infection

- 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.

#### Learning lessons when things go wrong

- Staff understood how to record and report any accidents and incidents.
- The provider and registered manager monitored and took action to implement any required learning from accidents and incidents and shared these with the staff team.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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 were assessed, monitored and reviewed following changes or increased risks to their health.
- Assessments and care planning were carried out where appropriate in partnership with people's nearest relatives or those legally authorised to make decisions in people's best interests. A relative said, "We work together with [person's name] care plan. They [staff] send me a copy and I sign to say I agree with it."
- People's care plans contained clear information about their preferences. Staff were also knowledgeable about people's likes and dislikes.

Staff support: induction, training, skills and experience

- All staff had received an induction which included shadowing more experienced colleagues and working towards the Care Certificate. The Care Certificate is an identified set of standards for health and social care workers. It sets the standard for the skills, knowledge, values and behaviours expected.
- Staff had opportunities to meet on a one to one basis with their managers which they told us made them feel supported to continually develop and improve their working practices.

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

- People were offered choices about what they ate and drank, and staff encouraged people to have a balanced diet and maintain a healthy weight.
- Where required specialist advice had been sought from the Speech and Language Therapist [SaLT] to assist minimise the risk of people choking.

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

- People's rooms were personalised and decorated to their taste.
- People had access to communal spaces and outdoor areas.

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

- Staff had developed good working relationships with external health professionals and organisations to support them in providing effective care and support. A visiting health professional told us they found the staff extremely supportive and knowledgeable about the people they supported.
- We saw from people's care records they had accessed healthcare services such as doctors, opticians and dentists as required.

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.

- People's DoLS applications had been submitted to and authorised by the local authority. We saw in people's care records decisions had been made in people's best interests with evidence to show, people, and their relatives had been involved in the decision-making process.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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

- Relatives were positive about the attitude of staff and the relationships they had built with people. For example, one relative commented, "The staff are on the ball with [person's name] needs I'd be lost without them."
- Staff were observed to be kind and caring in their interactions with people. The atmosphere was relaxed and friendly. A relative told us, they considered the staff to be "Wonderful they go above and beyond for [person's name]."

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

- People had a keyworker individually assigned to support them and assist them in making their choices and decisions.
- Staff were heard encouraging people to remain independent and make choices.
- Relatives were provided with opportunities to feedback their views as to how the service was run. One relative suggested a parents evening would be helpful so relatives could get to know one another.
- Staff could tell us about individual people's preferences, what they enjoyed and what was important to them.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect.
- Staff understood the importance of privacy and people were provided with enough time and the space, they needed so they didn't feel rushed.
- Staff were observed encouraging people to do tasks for themselves independently.

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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; 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's care plans were written detailing each person's wishes and preferences.
- Staff understood the importance of people having fulfilled active lives which included them taking part in hobbies such as swimming sessions and horse-riding.
- Where people chose to follow a religion of their choice this was acknowledged and respected.

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 understood how to communicate with people in ways they understood. Individual communication plans and guidelines were in place for people who did not communicate verbally or who had limited verbal communication. For example, the use of Picture Exchange Communication System (PECS) was utilised to assist people to understand instructions and express their wishes..

Improving care quality in response to complaints or concerns

- Relatives knew of the provider's complaints procedures and how to use it.
- Any complaints recorded were handled appropriately in line with the provider's policy.

End of life care and support

- Where people had consented their end of life wishes had been recorded. However, no one at the home was receiving end of life care at the time of our inspection.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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

- Relatives we spoke with were complimentary about the management at the home. One relative described to us, "[Manager's name] is very experienced and very hands on. She goes out with people to support them, so she understands the ups and downs of how staff deal with behaviours."
- Staff spoke with enthusiasm about their work at the home and people's care and support. One staff member said, "I love my job the management are very supportive."

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 provider understood their responsibility to notify the Care Quality Commission [CQC] and other agencies of any significant events. Notifications had been submitted appropriately which meant the CQC could check appropriate action had been taken.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements. Continuous learning and improving care

- Managers and staff were clear about their roles, and understood quality performance, risks, regulatory requirements, leadership and management.
- There was a manager registered with the Care Quality Commission [CQC] who provided an effective lead.
- Quality assurance systems were in place to monitor the service and identify areas for improvement.
- Staff had regular supervisions and staff meetings, which were planned, and minutes of these meetings were shared with staff.. The registered manager told us, they planned more virtual staff meetings to assist more staff to attend and share their opinions.
- Staff felt they were well trained which helped them to support the people they cared for.

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

- People were involved in day to day decisions about what they wanted to eat and what social activities they wanted to take part in.
- Relatives told us their feedback was sought and had been used to continuously improve the service.

Working in partnership with others

- The staff team worked closely with other agencies to ensure positive outcomes for people. This included

health and social care professionals.