

Langstone Society

Attwood Street

Inspection report

38 Attwood Street
Halesowen
West Midlands
B63 3UE

Tel: 01215850491

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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

What life is like for people using this service:

- ☐ People continued to receive safe care. People were safe and staff knew how to keep them safe from harm. The provider had a recruitment process to ensure they had enough staff to support people safely. People received their medicines as it was prescribed. Staff followed infection control guidance and had access to personal protective equipment. Accidents and incidents were noted and trends monitored to reduce the amount of accidents.
- ☐ People continued to receive effective care. Staff were supported and had the skills and knowledge to meet people's needs. People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. People's nutritional needs were met and they received enough to eat and drink to ensure they had a healthy diet. People accessed health care when needed.
- ☐ People continued to receive care from staff who were kind and caring. Staff supported and encouraged people to be involve in how decision were made about their support. Relatives took a proactive role in the decision-making process to support people who were unable to communicate their views. Staff were caring, compassionate and kind. People's privacy dignity and independence were respected by staff.
- ☐ People continued to receive responsive care. People's support needs were assessed and planned with their or their relative's involvement to ensure they received the support they needed. People's support was individualised and reviewed with people or their relative's involvement. People were supported to take part in activities of interest and their preferences, likes and dislikes were known to staff. The provider had a complaint process which people were aware of to share any concerns.
- ☐ The service continued to be well managed. The environment was welcoming, warm, comfortable and clean. The registered manager was known and made themselves available. People's relatives shared their views by completing a provider questionnaire about the service. Spot checks and audits were taking place to ensure the quality of the service was maintained.

More information is in the Detailed Findings below.

Rating at last inspection:

- ☐ Rated Good (Report published 27/01/2016).

About the service:

- Attwood Street is a small care home providing personal care and accommodation for up to five people who have a learning disability or sensory impairment. At this inspection five people lived within the service.

Why we inspected:

- This was a planned inspection based on the rating at the last inspection. The service remained Good overall.

Follow up:

- We will continue to monitor the service through the information we receive until we return to visit as per our re-inspection programme. If any concerning information is received 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.

Attwood Street

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Attwood Street is a care home. People in care homes receive accommodation and nursing or personal care. 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

We gave the service 48 hours' notice of the inspection visit because the service was small and people could often be out during the day and we needed to be sure that someone would be in.

What we did

Prior to the inspection we reviewed information we held about the service since their last inspection. This included notifications received from the provider about deaths, accidents/incidents and safeguarding alerts which they are required to send us by law. We also contacted the local authority who commissioned services

from this provider. They raised no concerns about the service.

During the inspection people were unable to share their views about the support they received so we spoke with three relatives. We spoke to two staff members and the registered manager who was available throughout the inspection.

We looked at the care and review records for one person who used the service. The management records for how people were administered medicines as well as a range of records relating to the running of the service. This included incident and accident monitoring as well as complaints.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm.

Using medicines safely

- ☐ Medicines were stored and administered safely. Two staff were observed administering medicines to ensure this was done safely.
- ☐ Where medicines were given 'as and when required' there were guidance in place so this would be administered consistently. A relative said, "I have seen staff give pain relief when needed".
- ☐ We observed staff recording in a medicines administration record once people were administered their medicines. This showed that the medicine was given as required.

Staffing levels

- ☐ Relatives felt there was enough staff to support people. A relative said, "There is always staff around when I visit". Staff we spoke with told us there was always enough staff to support people.
- ☐ Staff told us most staff had been working at the home for a long time and there were no concerns with staffing. Where people had appointments outside of the home we saw that there were sufficient levels of staff to ensure people left in the home would be supported safely.
- ☐ Recruitment processes were in place and staff confirmed this.
- ☐ We saw evidence of recruitments checks taking place before staff were appointed. This ensured suitable staff were appointed to support people.

Learning lessons when things go wrong

- ☐ We found where incidents and accidents happened these were being noted appropriately in people's care records and trends monitored to prevent reoccurrences. Staff confirmed this.

Assessing risk, safety monitoring and management

- ☐ We found where risks were identified these were being reduced. Risk assessment documentation were in place which showed the actions taken to manage/reduce risks to people. A staff member said, "Risk assessments are used and I always read them".
- ☐ Staff could describe people's risks and what they did to support people safely.
- ☐ We saw evidence of risks being reviewed and changes made where people's support needs changed.

Systems and processes

- ☐ Relatives felt people within the service were supported safely. One relative said, "I am one hundred percent sure they [person receiving service] is safe".
- ☐ Staff described the actions they would take where people were at risk of harm. A staff member said, "We have all completed safeguarding training". The registered manager told us all concerns were raised with the local authority.
- ☐ The local authority carried out regular financial checks of the management of people's finances. We checked one person's money management and found no concerns with how this was being managed.

Preventing and controlling infection

- ☐ We saw staff using personal protective equipment and staff told us this equipment was available to them.
- ☐ We saw staff supporting people following good standards to ensure they could protect against the spread of infection.
- ☐ We found all areas of the home clean and tidy. A relative said, "The home is always clean and I never smell anything unpleasant".
- ☐ We saw staff preparing meals following appropriate standards to ensure any risks to food being contaminated was limited.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good, and relative's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- ☐ The provider carried out a pre-admission assessment so they could be sure they could support people how they wanted. Relatives confirmed their involvement in the assessment process. A relative said, "An assessment was completed to see if they [person receiving service] could move in".
- ☐ We found people's equality and diversity needs were identified within the care plan and staff received training in equality and diversity to be able to meet people's needs. Staff confirmed they received this training.
- ☐ The registered manager understood the nine protected characteristics of the Equality Act (2010) and showed how these were incorporated into the care planning process. These characteristics are the same groups previously covered under equality legislation.

Staff skills, knowledge and experience

- ☐ People were supported by staff who had the skills and knowledge to do so. A relative said, "Staff do know how to support the service users". A staff member said, "I am able to get support when needed".
- ☐ We saw evidence showing the training staff had completed. Where people had specific support needs like diabetes or epilepsy staff received training in these areas so they would know how to support people's needs. Staff confirmed this.
- ☐ Where new staff were appointed we saw an induction process was in place, which included newly appointed staff shadowing more experienced staff. The Care Certificate standards were also included in the induction process. The Care Certificate is an identified minimum set of standards that health and social care workers adhere to in their daily working life.

Supporting people to eat and drink enough with choice in a balanced diet

- ☐ We saw that people's nutritional needs were catered for and staff ensured people could make choices as to the meals they had to eat. We saw a meals menu was in place to aid people make choices. Relatives told us that choices were made by the people living in the home as to what they had to eat and drink.
- ☐ Drinks were made available to people throughout the inspection.
- ☐ Where people had specific dietary requirements, staff knew these and could support people accordingly.
- ☐ We saw guidance in place from the speech and language therapist to support staff in meeting people's specific needs.
- ☐ People received support when needed and this was done on a timely basis. Relatives we spoke with confirmed people received support when they needed it and did not have to wait on staff.

Ensuring consent to care and treatment in line with law and guidance

- ☐ People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).
- ☐ We found where people lacked capacity and were being deprived of their human rights that the appropriate authorisations were in place and being reviewed by the local authority. Decision made were clear and staff acted in people's best interest.
- ☐ Staff confirmed they had received training and understood both the principles of the MCA and were able to say whether people were on a DoLS and the reason why.

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

- ☐ The environment where people lived was decorated nicely with displays around the home of the social events people had taken part in.
- ☐ We saw that people's bedrooms were decorated how they wanted and personalised.
- ☐ The home was welcoming, warm and comfortable. A relative said, "The staff are always welcoming and I can visit whenever I want there are no restrictions".

Supporting people to live healthier lives, access healthcare services and support

- ☐ People's health care was a significant part of how they were supported by staff. We saw that an hospital passport was being used to identify people's health care needs in the event they were required to attend hospital.
- ☐ Relatives confirmed that their relative's health care needs were being met. One relative told us they attended doctor and hospital appointments with staff because they were encouraged to by staff.
- ☐ We found that wellbeing checks were carried out to ensure people were healthy and where there maybe concerns they could be acted upon.
- ☐ Care records showed where health care professionals visited the home to support people. For example, dentist, optician and a nurse.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- ☐ Relatives told us how caring and friendly staff were. A relative said, "Staff are very kind and caring towards everyone who lives in the home".
- ☐ Our observations showed that staff knew people well. Staff knew when people were anxious and needed reassurance. Staff knew the things people liked and disliked. A relative told us some staff had worked in the home for many years and knew all the people living there very well.
- ☐ We saw the choices people made were due to staff's knowledge about them. Staff knew people's gestures, body language and facial expressions so they knew how people were feeling and the choices they wanted to make.

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

- ☐ Relatives told us they were involved in the care planning process and supported staff as part of the decision-making process so people were supported how they wanted.
- ☐ Relatives told us that staff respected what people wanted, responded accordingly and listen to relatives in order that people received the right support.

Respecting and promoting people's privacy, dignity and independence

- ☐ Staff demonstrated they understood the importance of respecting people's privacy, dignity and independence. A staff member said, "People are always covered over and doors and curtains closed during any personal care type task". A relative said, "I am always asked to leave the room during any personal care". This showed people's privacy and dignity was respected.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

People's needs were met through good organisation and delivery.

How people's needs are met.

Personalised care

- ☐ People's needs were met and staff showed they understood how to support people. A relative said, "Staff do know how to support needs. I see how they are with them when I visit".
- ☐ A care plan and assessment was in place to show the support people needed.
- ☐ Reviews took place to ensure where people's needs changed, the support they received would reflect this. Relatives and staff confirmed reviews happened. A relative said, "I do attend reviews and staff keep me informed regularly".
- ☐ Staff understood and knew people's hobbies, interest and preferences to support them to take part in social activities.
- ☐ Advocates were available to people when and where they needed the support of one.

Improving care quality in response to complaints or concerns

- ☐ The provider had a complaints process in place and a log was kept where a complaint was made. While there were no complaints the registered manager knew the importance of monitoring for trends. A relative said, "I do know who to complain to, but I have never had to complain".
- ☐ Staff knew about the complaints process. A staff member said, "I would pass any complaints to the manager".

End of life care and support

- ☐ People's end of life wishes were noted and there was no one currently receiving end of life care.
- ☐ Staff received training to be able to support people at this sensitive time.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership and management

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- ☐ Relatives spoke highly of the service and explained how the service was always welcoming.
- ☐ Relatives and staff spoke positively about the registered manager. Staff explained how the service had improved since the registered manager's appointment. A staff member said, "The manager is very supportive to us".

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- ☐ The registered manager carried out spot checks on staff and audits on the service.
- ☐ Staff confirmed this was done. A staff member said, "I do see the manager walking about and doing checks. She checks my competence to administer medicines".
- ☐ We saw that monthly checks and reviews on the service took place to ensure the service people received was of the highest quality.
- ☐ The registered manager understood the legal requirements within the law to notify us of all incidents of concern, death and safeguarding alerts.
- ☐ The provider had a whistle blowing policy and staff explained when they would use it. A whistle blowing policy is intended to encourage employees to raise concerns where people are put at risk of harm.
- ☐ It is a legal requirement that the overall rating from our last inspection is displayed within the service and on the provider's website. While the provider did not have a website, we saw that the rating was displayed within the home. This meant people, relatives and visitors were kept informed of the rating we had given.

Engaging and involving people using the service, the public and staff

- ☐ Relatives told us they completed questionnaires to share their views on the service. A relative said, "I do get a questionnaire yearly".
- ☐ The provider involved people and relatives as part of the review process to gather information as to whether people's preferences or support needs had changed.
- ☐ We found staff used a range of formats to engage with people. For example, pictorial, cards, showing people the item and the use of gestures. The accessible information standard was known by the registered

manager, but they confirmed they would set up training to ensure staff understood the standard.

Continuous learning and improving care

- ☐ Staff received regular ongoing training to ensure their learning, skills and knowledge was current to be able to support people.
- ☐ The registered manager used complaints, incidents and accidents and spot checks as a way of improving the service by the monitoring of trends and using the information gathered to benefit how people were supported.

Working in partnership with others

- ☐ The provider worked in partnership with hospital consultants, social workers, health professionals and relatives to ensure the service people received was person centred.
- ☐ We found that as part of working in partnership people could access a range of social events outside of the home, take part in thing of interest as well as go away on holidays. One relative told us how they went on holiday with their relative and staff.