

East View Housing Management Limited

East View Housing Management Limited - 51a Chapel Park Road

Inspection report

51a Chapel Park Road
St Leonards On Sea
East Sussex
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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

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. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

About the service

East View Housing Management Limited - 51a Chapel Park Road is a residential care home providing accommodation and personal care to one person at the time of the inspection. The service can support one person. It is attached to another of the provider's residential services and the services have the same registered manager, staff team and policies and procedures.

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

Right Support:

Staff focused on people's strengths and promoted what they could do for themselves. People had a choice about their living environment and were able to personalise their home. 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.

Right Care:

Staff promoted equality and diversity in their support. They understood people's cultural needs and provided culturally appropriate care. People received kind and compassionate care. Staff respected people's privacy and dignity and understood and responded to their individual needs. People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

Right Culture:

People were supported by staff who understood best practice in relation to the wide range of strengths, impairments or sensitivities people with a learning disability and/or autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs. Staff turnover was very low, which supported people to receive consistent care from staff who knew them well.

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 10 April 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection of the safe and well led key questions. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained 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 East View Housing Management Limited - 51a Chapel Park Road on our website at www.cqc.org.uk

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 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.

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 1 inspector.

Service and service type

East View Housing Management Limited - 51a Chapel Park Road is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. East View Housing Management Limited - 51a Chapel Park Road is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received 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 spent time in the person's home and spoke to 3 members of staff. We reviewed information relating to the person's care and documents relating to the quality of the service. We received feedback from the person's relative.

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. At this inspection 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; Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff understood their responsibilities around safeguarding and how to report concerns. Staff had developed trusting relationships with people and their loved ones. The person's relative told us, "[Person] is taken care of and is happy and safe in the environment."
- Risks to people were assessed and safely managed. Staff worked with people to minimise risks whilst encouraging them to be as independent as possible.
- People had detailed positive behaviour support (PBS) plans which gave clear information on how staff should recognise a decline in a person's wellbeing and the appropriate support to provide for them at the right stage of their experience.
- There were systems in place to review people's risks and what was working well and what needed to be improved to support people.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Staff understood the principles of the MCA and the importance of supporting people to make as many of their own decisions as possible. Where people did not have the capacity to make specific decisions, systems were in place to ensure each decision was assessed, in the person's best interest and the least restrictive option.

Staffing and recruitment; Using medicines safely

- There were enough staff to support the person safely. There was a long-standing staff team in place who knew the person well. This was important to the person as they found change difficult to manage. The same staff team supported people in the adjoining service. When temporary staff were needed across the services due to staff sickness or absence, the registered manager ensured that only the person's core staff team supported them.

- Staff were recruited safely. The provider carried out checks on new staff such as references, right to work and 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.
- There were systems in place to ensure that if people needed medicines administered, this was done safely by staff that were trained and had their competency checked.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

People were supported to have visitors whenever they chose.

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. At this inspection 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 culture of the staff team was positive and empowering. Staff explored different ideas and ways to support people to find new meaningful activities. The effectiveness of engagement activities was regularly reviewed, and staff were constantly coming up with new ideas to try and engage the person more. We saw the person was comfortable around staff and chose to engage with them.
- Staff facilitated visits to the person's family home to spend time with their family whenever they chose to. This had recently included after the passing of a monarch which was a significant event for the person and their family and allowed them to participate in joint mourning as a family.
- The language of the staff team was respectful and positive. Staff spoke about what people could achieve and had been able to do for themselves. We saw the person respond positively to staff and the way staff spoke to them. The person's relative told us, "We are pleased to say that [Person's] communication skills have improved which we feel is due to the one to one contact they receive."

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 registered manager understood their responsibilities around duty of candour and apologising when things went wrong.
- Statutory notifications, which the provider is required to send to CQC to notify us of events that affect the service had been sent appropriately.

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

- The management team had the skills and experience to lead their team. The registered manager is a Skills for Care member and the deputy manager is a member of Care Quality Matters. The registered manager was currently training as a positive behaviour support (PBS) practitioner. Up to date information was regularly shared with the staff team.
- Quality assurance and audit systems were effective in monitoring the quality of the service and identifying areas for improvement. This included care planning, environment and infection prevention and control.
- The management team held robust oversight and analysis of events that happened at the service. This included incidents around people's behaviour, safeguarding concerns and complaints. The registered manager analysed events and identified trends and themes in order to make improvements to the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Systems were in place to meet the needs of people with protected equality characteristics. The person was supported to reengage with their Church community following reopening after COVID-19. This was important to them as they found the online services did not meet their needs. There was clear guidance for staff to follow to ensure the person was supported to get the best out of this experience.
- People had a staff member allocated as a key worker and another as a co-keyworker. The key worker supported the co-keyworker with their learning and development and supported them to get to know the person and how they wanted their care and support provided.
- People and their relatives were invited to complete surveys about the quality of the service provided. We saw there was open communication between staff and people's relatives and that suggestions were valued and implemented by the staff team.
- People's relatives told us there were various ways they could provide feedback to the service, they told us, "East View Housing (EVH) has an annual quality review questionnaire which we complete and means we can raise any concerns that we might have. Any immediate problems can be raised with the manager or deputy directly via telephone or email. We could also contact EVH head office should we need to."
- Staff regularly attended meetings to discuss how things were going and to remind staff of the regulatory requirements. Meetings were used to encourage discussions amongst the staff team of how people's wellbeing could be increased and ideas for new engagement activities.

Working in partnership with others

- The registered manager had good working relationships with external health and social care professionals and understood the importance of accessing health care in a timely way.
- People were supported to access healthcare services such as their GP and dentist. Staff ensured annual health checks were carried out for people.