

Ridge View Supported Living Limited

39 Carnation Road

Inspection report

39 Carnation Road
Loughborough
LE11 2UU

Tel: 07575714245

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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

39 Carnation Road is a domiciliary and supported living service providing personal care to people with mental health needs.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

At the time of our inspection there was one person receiving personal care. The person was using the domiciliary service.

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

The service provided good quality, personalised care. A person's representative said, "[Person] is very happy, comfortable, and at ease with the carers." A social care professional told us, "I have nothing but positive feedback about this service."

People were safe using the service. Staff knew how to protect people from harm and reduce the risk of accidents and incidents. The service was well-staffed, and staff had enough time to support people in a calm and unhurried way.

The service was caring, and staff were trained to provide good-quality, personalised care and support. People's cultural needs were met, and they took part in activities they enjoyed and had chosen themselves.

The provider ensured staff suited the people they were working with. For example, they said, "[Person] likes a fun staff member with a big personality so I make sure that's the staff member they get." A social care professional said, "[Person] gets on very well with the staff."

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.

The provider monitored all aspects of the service to ensure it was operating safely and effectively. They listened to people's views, and the views of their representatives, and made changes to the service as necessary. Staff were well-supported and had regular training and supervisions.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Why we inspected

This service was registered with us on 01/07/2020 and this was its 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 ●

39 Carnation 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.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes. It is also a supported living service providing care and support to people living in 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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. 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. The provider did not complete a Provider Information Return. This is information providers are required to send us with key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke to the provider (who is also the registered manager) and a care worker. We reviewed a range of

records. This included the person's care records and a variety of records relating to the management of the service including audits, policies and procedures, and infection control documentation.

After the inspection

We spoke with a representative of the person using the service and a social care professional who commissioned care with 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

- People were safe using the service. Staff were trained in safeguarding and knew how to protect people from harm and who to go to if they had any concerns about their well-being.
- A person's representative said, "[Person] is safe with the staff. I have no concerns whatsoever about their safety."
- The provider had a safeguarding policy and procedure for staff to follow if a safeguarding incident occurred.

Assessing risk, safety monitoring and management

- Staff minimised risk to people. A social care commissioner said, "Risk is well-managed at the service and safety plans are followed."
- People had risk assessments which staff followed. These were written in conjunction with health and social care staff where necessary.
- People were involved in decisions about risk, and staff explained risk to them in a way they understood.

Staffing and recruitment

- There were enough staff employed to ensure people's needs were met. A care worker said, "The calls are not rushed, and we have the time to do everything we need to."
- Staff were safely recruited and trained. Records showed they had right mix of skills, experience and knowledge, to meet people's individual needs.

Using medicines safely

- At the time of our inspection staff were not administering medicines to any people using the service. However, they were prompting and supporting a person with their medicines and keeping records to show this was done safely. Staff were trained in medicines awareness.

Preventing and controlling infection

- The provider had systems in place to protect people and staff from the risk of infection.
- Staff were trained in infection control and food hygiene. They used personal protective equipment (PPE) correctly and safely.
- Staff followed the provider's infection control policies and procedures which were based on the relevant national guidance.

Learning lessons when things go wrong

- At the time of our inspection there had been no accidents or incidents at the service. The provider said that if they occurred, they would be recorded, reported and investigated in line with the correct protocols.
- Staff used 'reflective' practice' (the ability to reflect on one's actions) to continually improve their performance. This meant if something went wrong staff would learn lessons and act to improve safety at the service in response.

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 feedback confirmed this.

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

- People's needs were assessed before they came to the service to ensure staff could provide them with the right support. Assessments were holistic covering people's physical, mental health and social needs.
- Assessments were done in person and recorded. People and their significant others were involved in the process which was explained to them. People were also supported by a health and social care professionals during the assessment as necessary.

Staff support: induction, training, skills and experience

- People were supported by well-trained and experienced staff. A care worker said they completed their induction training and met with the person before they began supporting them.
- Training records showed staff completed essential and other training. Staff training was updated as necessary to ensure staff were aware of developments in health and social care.

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

- Staff knew how to prepare meals so risks to people were identified and managed in relation to their eating and drinking. For example, they followed instructions from speech and language therapists to ensure a person was safe when eating and drinking.
- Person were encouraged to have a healthy diet and drink plenty of fluids. Staff involved them in decisions about their diet and supported them to understand how to prepare food and drink in a safe way.

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

- A person was supported with their healthcare needs. These were identified when they were assessed and documented in their support plans.
- Staff worked in conjunction with healthcare professionals, including GPs, district nurses, and speech and language therapists, to ensure a person's healthcare needs were met.
- Staff monitored a person's healthcare issues and knew when to refer them to healthcare professionals for additional input and support.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- Staff were trained in the principles of the MCA. They supported people to make decisions and ensured they had people's consent before providing them with care and support. If people needed support with more complex decisions staff said they would involve social care professionals.

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

- Staff knew people well and understood their characters, likes and dislikes. This enabled them to provide support in a way people found positive and fun. A representative of a person said, "The carers talk to [person] all the time and have a laugh with them."
- People's cultural needs were identified and met. Staff supported them to follow their hobbies and interests and take part in social activities they enjoyed.
- The service had equality and diversity policies and procedures in place which staff followed. For example, if a person wanted staff of a particular gender every effort was made to respect their wishes.

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

- Staff had good relationships with those involved in people's care and support. For example, they understood how important a person's representative was to their life and involved them when important decisions were made.
- Staff were trained and supported to provide compassionate, personalised care. The provider worked alongside them to ensure the quality of care was consistent across the service.

Respecting and promoting people's privacy, dignity and independence

- Staff were trained in dignity in care and knew how to support people in a way that promoted their privacy and independence.
- Staff and people developed routines for personal care that suited people and enabled them to carry out some tasks themselves with support and encouragement.

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

- People's support plans were personalised to meet their individual needs. They included their choices and preferred routines and instructions to staff on how to provide support in the way they wanted it.
- Support plans covered people's physical, mental, emotional and social needs. Staff documented how these needs were met in care notes which were well-written and respectful. A person's representative said, "They [care records] are clear and precise."
- People were encouraged to follow their interests, take part in activities, and maintain relationships with those who mattered to them. Support plans were flexible, due to people's changing needs, and reviewed once a month or more frequently if necessary.

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 people wanted to be communicated with and gave them the time they needed to get their views across. A person's representative and a social care professional both commented on how well staff communicated with the person.
- A care worker told us how they reassured a person if this was required, considering their communication needs. A care worker said, "[Person] wants to get their views across and be understood. If you show them you are patient and have time to listen, they are OK."
- The service had policies and procedures in place to ensure information was provided to people in an accessible manner. These were in a written format and the provider said they would be explained to people verbally or using other communication methods where necessary.

Improving care quality in response to complaints or concerns

- A person had the provider's phone number and could call them at any time if they were unhappy about any aspect of the service. Staff regularly asked this person if they were happy with the care provided and gave them the opportunity to suggest any changes or improvements they wanted.
- The service had a written complaints policy. The provider was reviewing this with the intention of producing a more user-friendly pictorial version to better suit the needs of the people using the service.

End of life care and support

- At the time of our inspection the service was not providing this type of support. The provider told us that

should this change they would work with health and social care professionals to ensure people received the care and support they needed at the end of their lives.

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/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

- People thrived using the service. A social care professional said, "This service has produced really good outcomes for [a person]."
- The provider and staff were committed to providing high-quality, personalised care and support. They valued and respected people, listened to their views, and the views of others involved in their life.
- The culture of the service was open and transparent. The provider and staff shared the service's vision and values and were open to new ideas, change and improvement.
- The provider, who was also the registered manager, was involved in all aspects of the service, including the direct provision of care and support. This enabled them to keep the day-to-day culture of the service under constant review.

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

- The provider understood their legal responsibilities, including following the requirements of their registration, and submitting notifications and other important information to CQC as necessary.
- Staff were well-supported by the provider who kept them informed of any changes to people's care and support needs. A care worker said, "[Provider] updates me straight away if a person's needs change."
- The provider monitored all aspects of the service to ensure it was operating safely and effectively. Care plans were reviewed at least monthly and staff had formal supervisions with records kept.
- Data was kept securely, and the provider and staff understood the Data Protection Act and how to maintain confidentiality in line with data protection standards.

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

- The provider consulted with people and their representatives and took their views into account when making decisions about their care and support. For example, during COVID-19 pandemic, changes were made to a person's activities to ensure they remained safe.
- The care worker said the provider was approachable and open to suggestions about how to improve the service. They told us, "[Provider] is a caring person who listens to and responds quickly. I speak with them every day and when I finish work, I go back to the office and we talk again."
- Staff were trained in equality and diversity and understood their responsibilities to uphold people's

human rights.

Continuous learning and improving care

- The provider was a registered nurse and kept their PIN (registration) number up to date by completing an annual training programme. Care workers' training was refreshed annually or as necessary.
- The provider used the Department of Health and Social Care and the Skills for Care websites for reference and advice. They were also a member of a local authority registered managers forum where good practice and continuous improvement were discussed.

Working in partnership with others

- The service worked closely with social care professionals to ensure the people's needs were met. The provider sent regular updates to social care professionals to keep them up to date with people's progress.