

Devine Care Ltd

Promise House

Inspection report

453-455
Foleshill Road
Coventry
CV6 5AQ

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14 March 2023

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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

Promise House is an extra care service registered to provide personal care support for younger adults and older people, living with mental ill health support needs, dementia, physical and or learning disabilities. Accommodation is provided in 10 individual adapted apartments with shared facilities, including a communal lounge, games room, cinema room and outdoor gym.

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. Not everyone who used the service received personal care. At the time of our inspection the service supported 10 people. Three of those people were in receipt of personal care.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not provide care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Right Support

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. Risks to people's health, safety and well-being were effectively managed. Staff followed good infection prevention and control practice and people received the support they need to take their medicines as prescribed. When needed people were supported to access health and social care professionals. The management and staff team worked in partnership with other professionals to achieve good outcomes for people. People felt safe when receiving support from staff with whom they had developed meaningful relationships.

Right Care

People's needs were met through the delivery of care and support tailored to meet their needs and preferences. People's needs were assessed prior to them using the service to ensure these could be met. People were actively involved in planning their care and they received support at their chosen time, for the agreed duration from staff they knew. Staff respected, and their practice promoted and upheld people's rights. Staff felt valued and supported by the management team and experienced high levels of job

satisfaction. People's preferred methods of communication were known and respected by staff.

Right Culture

The manager led by example. They promoted an open and inclusive culture which had created a welcoming, warm, and friendly atmosphere. People and professionals spoke positively about the way the service was managed and the quality of service provided. Effective systems continually monitored and improved the quality and safety of the service. Action was taken to ensure the provider's policies and procedures were personalised to the service. Staff were recruited safely and received the training, support, and guidance they needed to fulfil their roles. The manager had developed positive relationships and effective communication systems with people, staff and other professionals.

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

Rating at the last inspection

This service was registered with us on 24 September 2020 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the service was registered with us.

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 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.

Promise House

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 provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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

This inspection was announced. We gave the service two days' notice of the inspection. This was because it is a small service and we needed to be sure that a member of the management team would be in the office to support the inspection.

Inspection activity started on 01 March 2023 and ended on 15 March 2023. We visited the registered location

on 14 March 2023.

What we did before the inspection

We reviewed information we had received about the service since they registered with CQC. We used all of this information to plan our inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 3 people who used the service about their experience of their care and support. We spoke with 4 staff members including the manager, deputy manager and support workers. We reviewed a variety of records including 3 people's care records and 2 people's medication records. We looked at 3 staff files in relation to recruitment, staff training and support, and records relating to the management of the service including quality audits and policies and procedures.

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 felt safe living at Promise House and with the staff who supported them. One person told us, "I can honestly say I have never felt safer and that's down to [manager] and staff."
- Staff completed safeguarding training and understood their responsibilities to keep people safe. One staff member commented, "Our priority is the resident's safety and well-being. We report any concerns straight away to our manager." The staff member added, "They (concerns) would be dealt with."
- The providers systems and processes protected people from the risk of harm. The registered manager had reported safeguarding concerns to the local authority and to us (CQC) to ensure any allegations or suspected abuse were investigated.

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

- Risks associated with people's care and their home environment had been assessed, regularly reviewed and were well managed. One person told us, "The staff talk to me about risky things and help me."
- Staff understood how to manage and reduce individual risk to keep people safe.
- The management team completed analysis of any accidents and incidents that had happened each month to prevent recurrence. Where needed, planned care and support had been adjusted to keep people safe.
- The manager promoted and encouraged a learning culture within the service. For example, staff meetings were used to reflect on any accident and incidents, agree any actions needed and share any lessons learned when things had gone wrong.

Staffing and recruitment

- People confirmed they received their care and support from staff they knew at the planned time for the agreed duration. Care and support times were flexible to meet people's preferences, choices and needs.
- Staff told us there were enough staff to meet people's assessed needs. One staff member commented, "We work as a team. The [manager] and [deputy] work with us so there is always help if needed."
- Staff were recruited safely by the provider to ensure people were supported by staff who were of good character and suitable to work with vulnerable people.

Using medicines safely

- Medicines were stored, administered and disposed of safely.
- Medicine administration records confirmed, where needed, people received the support they required to take their medicines as prescribed.
- Staff were trained and competent to administer medicines safely. The management team regularly

observed staff practices and checked medicine records to ensure staff worked in line with the provider's procedure and best practice medicine guidance.

Preventing and controlling infection

- People confirmed staff followed good infection control practice in their homes.
- Staff were provided with personal protective equipment (PPE) and had completed infection prevention and control training. Staff told us this helped them to provide safe care and support.

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 prior to their service starting to ensure their needs could be met.
- People were fully involved in their assessments and on-going reviews of their care and support. One person told us, "I talk to [Manager] and staff about how things are going and what I want to do or change."
- The manager and staff understood, respected and promoted inclusion and diversity. One staff member told us, "Assessments are a starting point. We have to spend time with the residents [people] to really learn and understand what's important to them, so we do things their way."

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.

We checked whether the service was working within the principles of MCA.

- People's consent to care and treatment was obtained and recorded in their care records. One person commented, "The staff are respectful. They ask every single time."
- Staff had completed MCA training and understood the importance of upholding people's rights.
- The manager demonstrated good knowledge of MCA and understood their responsibilities under the Act.

Staff support: induction, training, skills and experience

- People had confidence in the ability of staff members to deliver effective care and support.
- Staff developed and refreshed their knowledge and skills through an initial induction, which included the Care Certificate, and a programme of on-going training. The Care Certificate is the nationally recognised induction standard. Staff spoke favourably about the content and level of training provided.
- The management team supported staff through regular individual and team meetings. One staff member described the support provided by the manager as 'first class.'

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- If needed staff supported people with meal planning, shopping and cooking. One person told us they valued this support because it helped them to maintain and increase their independence.
- Care plans included information about people's dietary requirements including, cultural preferences and those related to specific medical conditions. This helped staff provide effective care.
- Staff understood when to escalate concerns about people's physical and mental health to other professionals. For example, if changes in a person's behaviours indicated a deterioration in their mental health.
- The management and staff team worked with health and social care professionals to improve outcomes for people, including community psychiatric nurses and psychiatrists. The manager told us, "Working together is crucial to support the residents to achieve their goals."

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

- People provided positive feedback about the management and staff team's caring approach. One person told us, "I love it here. Staff are professional and polite. [Manager] is very welcoming. I am happy."
- Staff knew people well. They cared for the same people which enabled them to form meaningful and respectful relationships. Throughout our inspection visit staff showed a genuine interest in people and their wellbeing.
- Staff felt valued and cared for. One staff member told us, "This is the best job I have ever had." They explained this was because of the care, support and guidance they received from the manager.
- Staff completed equality and diversity training to help them understand people's needs. The manager told us, "Understanding and respecting equality and diversity starts at the staff recruitment stage. It flows through staff inductions, trainings and everything there after for residents and staff."
- The manager promoted a person-centred approach. They had pro-actively reached out to a voluntary organisation within the local community to support people to access important information. For example, about how to obtain a free health check in preparation for fasting during a religious festival.

Supporting people to express their views and be involved in making decisions about their care; respecting and promoting people's privacy, dignity and independence

- People were actively involved in making decisions about their care and their rights were upheld. One person told us, "They (staff) respect and encourage me. I say what I need and they help."
- Staff prompted and respected people's rights. One staff member said, "Each resident has the same rights as you or I. We guide and prompt but ultimately it is their decision and we respect that."
- Staff spoke about people in a respectful way. This included when they discussed people's changing needs with each other and when they shared information with us.
- People's independence was prompted. One staff member told us, "A key aim is to support the residents to build their confidence by developing their skills. The aim is to become more independent and to live a life that's fulfilling for them."
- People's confidential information was stored securely to ensure it could only be accessed by authorised staff.

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

- The service was responsive. People planned their care and support which was tailored to their individual needs, preferences and wishes. The deputy manager told us, "Our care and support is not regimented. There are no set times. Times are decided by residents on a daily basis. We do what the residents need when they want it. That achieves a good outcome."
- Discussion with staff demonstrated they knew the people they supported well and understood their needs, what was important to them and how they preferred their care to be provided.
- People's care records had been regularly reviewed. However, some records needed further information adding to make sure individualised care was always provided consistently. When we shared our findings with the manager they told us, "I fully accept your point. It's in our heads and needs to be on paper. I will do it as a priority."

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.

- The manager was aware of their responsibility to support people's communication needs.
- Information about the service was available in different formats which reflected the needs of people living at Promise House, for example pictorial and large print.

Improving care quality in response to complaints or concerns

- People knew how to make a complaint and felt comfortable to do so, if needed. One person told us, "I would go to [manager]. Everything would be sorted."
- Staff understood their responsibility to support people to share any concerns or complaints.
- Records confirmed complaints had been listened to and managed in line with the providers procedure.

End of life care and support

- At the time of our inspection the service did not support anyone who was at the end stage of their life. The manager told us end of life care and support in line with people's wishes could be planned and provided if it was needed.

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.

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

- Staff felt supported. They spoke highly of the support and direction they received from the management team. One staff member told us, "[Manager] is so knowledgeable and explains things clearly so we know what's expected and how to do things."
- The management team consisted of the registered manager, who was also the director of the service, a manager and deputy manager. The manager was responsible for the day-to-day management and they had very good oversight of the service. They had applied to be registered with CQC.
- The provider had effective systems in place to continually monitor, evaluate and improve the service provided. For example, checks of medicines. Shortfalls, and improvement opportunities were detailed in the services improvement plan which was regularly reviewed and updated.
- The manager understood their responsibilities. They had informed us about important events as required by the regulations and kept themselves updated through for example, their membership of a local network for managers.
- Some of the providers policies and procedures were not specific to Promise House at the time of our visit. Action was taken to address this.

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

- People were very satisfied with the service they received and the way their service was managed. One person told us, "This is the best help I have ever had. I never want to leave." A second person said, "In years this is the first time I have felt like I'm home. I owe how I feel to them [management and staff]."
- Inspection findings demonstrated an open culture was embedded. This created a warm, relaxed, friendly and caring atmosphere. One staff member told us, "We are encouraged to share our ideas. [Manager] is always available and really listens and value what you have to say."
- The manager and staff were passionate about the delivery of good quality individualised care. The deputy manager told us, "You can't help someone by doing the same for everyone. We learn about the residents, talk to them and develop our approach to reflect their individual needs."

How the provider understands and acts on duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The manager understood their responsibilities to inform people and professionals involved in people's care when concerns were raised or when something went wrong.

- The manager was open and honest during our inspection. They listened and took immediate action in response to our feedback.

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

- People, professionals and staff were encouraged to provide feedback about the service to help the service continually improve. Recent feedback showed very high levels of satisfaction. For example, a professional involved in a person's care had commented, "I am really impressed with the support offered to vulnerable adults... It's highly reassuring [name] has finally found somewhere to call home and feel safe and secure whilst being valued as an individual..."
- Feedback from people, staff and the management team demonstrated people achieved good outcomes. Partnership working and involving people was key to the services personalised approach to care delivery.
- The manager demonstrated their passion, commitment and determination to continually improve the service. They told us, "I want the residents to achieve their goals. My staff share this view and will bend over backwards to achieve this. We are always looking at how to build on what's been achieved to learn and grow."